# ACTION NATIONALE
# Quinzaine de la pesée des cartables

## Relevé des mesures

**Date de l'opération :**

**Conseil local de :** **Département :**

**Collège ou école élémentaire de :**

| Nb de mesures | Classe | Garçon ou Fille | Âge | ½ pen sion | Taille | Poids avec cartable | Poids sans cartable | Poids du cartable | Nb heures de cours de la journée | Poids maxi 10% du poids de l'enfant | Excédent |
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