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| **No.** | **Année** | **Titre court du projet** | **Temps au bureau (jours)** | **Temps en mer (jours)** | **Temps d’expérience pratique pas en mer (jours)** | **Niveau 1 temps en charge (jours)** |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |
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|  |  | **TOTAUX** |  |  |  |  |
|  |  | **GRAND TOTAL** |  |  |  |