**ANALYSE DE TÂCHE**

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| **Nom de la personne** | |  | **Autonomie** | **Type de soutien** | | | | | |
| **Date** | |  | **Incitation verbale** | **Incitation gestuelle** | **Incitation physique** | **Aide physique** | **Démonstration** | **Équipement adapté** |
| **Nom de l’éducateur** | |  |
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| **Condition préalable** | |  |
| **Contexte** | |  |
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| **Autonomie** | **Incitation verbale** | **Incitation gestuelle** | **Incitation physique** | **Aide physique** | **Démonstration** | **Équipement adapté** |
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