



VILLE D'ANTIBES JUAN LES PINS  
DGA VIE SOCIALE ET CULTURELLE  
DIRECTION EDUCATION  
UNITE AFFAIRES SCOLAIRES  
18/20 Boulevard Foch – Centre Salusse Santoni

## OPENING HOURS

**Monday-Tuesday-Thursday From 1.30 to 5.00 pm**  
**Wednesday-Friday From 9.00 to 12.00 am**

## SCHOOL REGISTRATION 2019/2020

**FROM MONDAY, JANUARY 14th**  
**TO FRIDAY, FEBRUARY 8th 2019**

### **Procedure for registration 1<sup>st</sup> year of nursery-school — CP class entrance — 1<sup>st</sup> registration in the municipality**

Children are registered to the school of the Residence location or the sector according to the school mapping.

**For your information, a map of the school districts is available on the website:**

**[www.antibes-juanlespins.com/education/inscriptions-scolaires](http://www.antibes-juanlespins.com/education/inscriptions-scolaires).**

Registration in other academic sector's school need a derogation form submitted to the competent commission.

**The completed file should be sent :**

- **by post :** DIRECTION DE L'EDUCATION  
Unité Affaires Scolaires  
Centre Salusse Santoni  
18/20 bd Foch - 06600 ANTIBES
- or
- **by email :** [inscriptions.scolaires@ville-antibes.fr](mailto:inscriptions.scolaires@ville-antibes.fr)

An acknowledgment of receipt will be sent to you by e-mail

- **or submitted in the office (3rd floor) :** An acknowledgment of receipt will be given to you After file registration by the Direction of Education, a school registration certificate will be sent or given to the parents, **end of June 2019**.

The school admission will be completed by presenting this certificate to the school's director. **The admission will then be firm and final.**

For registration to the 1<sup>st</sup> year of nursery-school admission, priority will be given to children born between January, 1st 2016 and August, 31st 2016 in the sector school. For children born between September, 1st and December, 31st 2016 will be accommodated based on availability.

**No registration file will be accepted for children born in 2017.**

For new registrations priority will be given for the children whose parents are living in the commune.

**Files submitted after February 8th 2019 will be processed based on availability, including siblings.**

Requests to change academic sector will be subjected to a derogation request except for brotherhood or medical reasons.

Registrations outside the municipality will be subjected to a derogation request.

For the CP class entrance, the derogation given for the nursery-school years must be subjected to a new request. It will be examined by the Derogation Commission and maybe approved function of the availability in the school.

### **Change of coordinates and family situation**

**We draw your attention to the necessity of transmitting us up to date phone numbers and any change of address and family situation in the course of the year**

## **COMPULSORY DOCUMENTS TO BE SUPPLIED**

### **Photocopies to be prepared**

#### **INCOMPLETE FILES WILL NOT BE PROCESSED**

**The acts in foreign language must be translated into French by an official translator.**

- The concerned pages of **the family book** (pages parents/child) or birth certificate
- The concerned pages of **the health record of the child** (anti-tetanus vaccination)
- A radiation certificate** if the child was previously registered in another school
- School insurance certificate** (to hand over to the headmaster at the beginning of the school year)

**Certificate of residence** less than three month time of the child's parents  
. **If you are tenants or owners, supply a copy, in the name of the parents**, of one of the following documents :

- Invoice or certificate of electricity or gas subscription
- Rental receipt or lease contract (only a professional of real estate)
- Home phone bill only, internet subscription
- House insurance certificate
- Title deed of less than three months (a compromise is not accepted)

. **If you are hosted by a third party**, an attestation form must be requested by e-mail at : [inscriptions.scolaires@ville-antibes.fr](mailto:inscriptions.scolaires@ville-antibes.fr) or withdrawn in the office.

#### **For a first year primary school registration**

**Medical certificate of admission in the first year of primary school (CP)** delivered by the school doctor during the assessment of last maternal section (if detained at the time of registration)

#### **In case of divorced or separate parents**

- Photocopy of the judgment fixing the child's residence and parental authority
- If no judgment : please fill the form "certificate of residence" enclosed, with a copy of identity cards according to indications given onto this form.
- Alternating custody : Please fill the form "certificate of residence" enclosed, with a copy of identity cards and proofs of address for each parents has to be supplied, according to indications given onto this form .

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#### **For a derogation to school sector :**

**The form has to be filled and returned between January, 14th and February, 8th 2019 (the inscription form)**

- The out-of-sector waiver form if the desired registration does not fall within the scope of the school of residence.

#### **For a derogation out of town :**

**The form will be withdrawn and submitted between January, 14th and February, 8th 2019 (accompanied by the application form)**

- The out-of-town form if the parent (s) does not reside in Antibes


**Schedules are the same for all the public primary schools.**

**Monday, Tuesday, Thursday and Friday 8:30 till 11:30 am and from 1:30 till 4:30 pm**

#### **Extracurricular activities**

**(Morning welcome / Restoration time / Extracurricular activities period / Evening animations / Wednesdays childcare / Recreation centers)**

Registration has to be done at the Guichet Unique. Immeuble Orange Bleu 11 Bd Chancel

 04 92 90 52 90



Ville d'Antibes Juan les Pins

DGA Vie sociale et culturelle

Direction Education  
Service Santé Scolaire  
16 Bd Foch  
Tél : 04 92 90 54 80  
Fax : 04 92 90 54 72

## INFORMATION SANTE SCOLAIRE

Antibes Juan-les-Pins est une des villes possédant un **Service Municipal de Santé Scolaire**.

Ce service assure par délégation les missions qui incombent au Service de Promotion de la santé en faveur des élèves de l'Education Nationale et au service des Actions pour la Maternité et l'Enfance du Conseil Départemental des Alpes Maritimes.

Il se compose de médecins, infirmières, psychologue, assistante sociale, orthophoniste animateurs santé, secrétaire, éducatrice, et AVS (personnel dédié à l'aide à la scolarisation d'enfant porteur d'un handicap).

Ses missions répondent aux différentes circulaires relatives au Code de la Santé publique (art L 191 et L 193) :  
**Promouvoir la santé physique et mentale de l'enfant en faveur de tous les jeunes scolarisés en vue de contribuer à leur bon équilibre et à leur épanouissement et d'assurer leur bonne insertion dans l'école.**

### A L'ECOLE MATERNELLE :

Votre enfant va bénéficier

- \* En **petite et grande section** d'un bilan de santé complet.
- \* En **moyenne section**, d'un dépistage visuel et pour certains d'une évaluation du langage.

### A L'ECOLE ELEMENTAIRE :

Votre enfant va bénéficier

- \* En classe de **CE2**, un bilan infirmier systématique.
- \* Pour les classes du **CP au CM2**, un dépistage bucco-dentaire annuel.

Le service assure également un suivi régulier pour **tous les enfants requérant une attention particulière** (handicap, troubles des apprentissages ...), participe aux réunions de PPS (Projet Personnalisé de Scolarisation) et aux équipes éducatives.

**Le service de Santé Scolaire est disponible pour toute question concernant votre enfant.**

## IMPORTANT : PAI

En référence à la circulaire n°99 – 181 du 10/11/99 et du B. O. n° 34 du 18/09/2003,

**Un Projet d'Accueil Individualisé (PAI)** doit être établi pour accueillir à l'école les enfants **présentant des maladies chroniques (diabète, épilepsie, asthme, allergies ...)**

Si votre enfant a besoin au sein de l'école :

- d'un régime alimentaire,
- de prendre régulièrement des médicaments,
- d'un aménagement particulier,

Il conviendra de prévenir la (le) **directrice** (eur) de l'école et **de fournir au médecin scolaire les ordonnances et certificats** précisant les mesures à mettre en place pour votre enfant.

Une réunion sera alors organisée par la (le) directrice (eur) de l'école pour établir **le PAI : contrat signé par les parents et les différentes personnes qui s'occupent de l'enfant** (L'Education Nationale, la Santé Scolaire, la Direction de l'Education, la Direction Restauration, la Direction Jeunesse-Loisirs).

**DIRECTION DE L'EDUCATION  
Unité Affaires Scolaires  
Centre Salusse Santoni  
18/20 bd Foch – 06600 ANTIBES  
3rd floor**

**SCHOOL REGISTRATION,  
REQUESTS FOR DEROGATION FROM THE SCHOOL  
PERIMETER AND OUT OF TOWN :**

**From January 14th to February 8th, 2019**

**OPENING HOURS :**

**Monday-Tuesday-Thursday: From 1.30 pm am to 5.00 pm  
Wednesday-Friday : From 9.00 am to 12.00 am**

**Phone : 04.92.90.52.40  
Fax : 04.92.90.52.46**

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**Informations and Registrations : [inscriptions.scolaires@ville-antibes.fr](mailto:inscriptions.scolaires@ville-antibes.fr)**



**INSCRIPTIONS SCOLAIRES 2019 - 2020**



## SCHOOL REGISTRATION FORM YEAR 2019-2020

**DGA VIE SOCIALE ET CULTURELLE  
DIRECTION EDUCATION  
UNITE AFFAIRES SCOLAIRES**

<b>For office use only</b>		
		N° dossier :
Ecole de secteur :	Ecole d'affectation :	Classe :
Dérogation HC <input type="checkbox"/>	Dérogation HS <input type="checkbox"/>	Fratrie <input type="checkbox"/> Réintégration <input type="checkbox"/>

### FAMILY INFORMATION

**CHILD'S SURNAME** ..... **Child's First name** .....

Date of birth : ...../...../..... Place of birth : .....Country :.....

Gender : F  M

Nationality of the child :  French  European  Other  
(specify).....

Doctor's name : ..... Doctor's tel no. : .....

Name of previous school : .....

<b>Parent / guardian N° 1 :</b>	<b>Parent / guardian N° 2 :</b>
<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian
<input type="checkbox"/> Mr <input type="checkbox"/> Ms	<input type="checkbox"/> Mr <input type="checkbox"/> Ms
NAME : .....	NAME : .....
Maiden name : .....	Maiden name : .....
First name : .....	First name : .....
Address* : .....	Address* : .....
Postcode/city : .....	Postcode/city : .....
Phone : ...../...../...../...../.....	Phone : ...../...../...../...../.....
Mobile : ...../...../...../...../.....	Mobile : ...../...../...../...../.....
<b>Information to be provided obligatorily</b>	<b>Information to be provided obligatorily</b>
E-mail address : .....	E-mail address : .....

**MARITAL STATUS :**       Married     Separate     Divorced     Single     Widowed  
 In the process of divorce     Marital relationship     Civil partnership (PACS)

**IN CASE OF A DIVORCE OR A SEPARATION indicate the main home of the child :**

Parent / guardian N°1     Parent / guardian N°2     Alternating custody

**FILL THE ENCLOSED FORM OR ATTACH A COPY OF JUGEMENT**

The following part must be filled in for both admission in nursery and primary school.  
 You need to provide a copy of the judgement if the child must not be given to one of the parents.

### PROFESSIONAL INFORMATIONS

<u>Parent / guardian N° 1 :</u>	<u>Parent / guardian N° 2 :</u>
Profession :.....	Profession :.....
Name and address of the employer : ..... ..... .....	Name and address of the employer : ..... ..... .....
Post code/city :.....	Post code/city :.....
Work. Number :...../...../...../...../.....	Work. Number...../...../...../...../.....

### FAMILY COMPOSITION

Surname – first name Brothers / sisters	Date of birth	Name of nursery or school in 2018/2019

**Inscription in a school wich is not the sector school, will only be taken in the following cases :**

- Sibling : to complete above
- Medical reasons: medical certificate under confidential fold for the school doctor

**Other cases will need to fill a derogation request, and submit to a commission.**

**PEOPLE OTHER THAN THE PARENTS/GARDIAN AUTHORIZED TO PICK UP THE CHILD OR TO  
WARN IN CASE OF EMERGENCY**

The persons will be reached only when the parents are unreachable

Name – First name	Relationship to the child	Daytime tel. No. Mobile tél. No	I authorize this person	
			To pick up the child	To be reached in case of emergency
			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO

no contact

**MEDICAL INFORMATIONS**

**If the child is allergic or suffers from a chronic disease or handicap, please read and follow the procedure in the attached note in order to be able to establish a P.A.I. (an individual welcoming and support project).**

In case of accident, the child will be driven by firemen to the emergency services of the closest hospital and the parents warned immediately.

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One or both parents declare on their honor that the above-mentioned information's are factually correct and make a commitment to indicate to the Direction of Education of the City of Antibes-Juan Les Pins as well as in the school Direction any change of address or situation during the year.

It should be pointed out that the person who uses a false name or a false civil status on a public act or an administrative document intended for the public authority, who produces a falsified certificate or any other false statement is liable to the criminal penalties set forth by law.

**I hereby certify** that the information's supplied above are correct.

**I authorize** the previously mentioned persons to pick up my child at the end of the school day.

**Protection of personal data - Legal notices**

The information collected in the registration file is subject to computer processing in the applications of is subject to computer processing in the applications of Antibes, for school's management registrations.

The Antibes-Juan-les-Pins' Municipality is the controller.

This processing is necessary for the execution of public interest's mission (Legal basis of the treatment, Art 6-1 of the General Regulation on data protection)

This treatment falls within the framework of Art L2121-30 of the Territorial Collectivities' General Code and Art L212-1 to L212-9 of the Education Code relating to the Competences of the Communes.

The recorded data are the ones required in the school registration file and will be kept in accordance with the requirements of the Archives de France.

The recipients of the recorded data are the Education Direction, the Academy Inspector, the Schools Directors and the Guichet Unique.

In accordance with Articles 15 to 22 of the General European Regulation on the Personal Data Protection of April 27, 2016 and Law No. 78-17 of January 6, 1978, relating to data, files and freedoms, as amended by law ° 2018 -493 of June 20, 2018, **you have a right to access, rectify, erase and portability of your data** but also a right to define guidelines on your data's fate at the end of their use, **as well as a right of objection to the processing of your data.**

To do this, simply **make a request to the Data Protection Officer of the Municipality of Antibes Juan-les-Pins** by indicating your requests accompanied by a valid identity card or passport : by e-mail à [rgpd@ville-antibes.fr](mailto:rgpd@ville-antibes.fr) or by post to : Délégué à la Protection des Données - Mairie d'Antibes Juan-les-Pins - Cours Masséna - 06600 Antibes.

Antibes, ...../...../ 2019

Signature of the  
parent / guardian N° 1  
Read and approved

Signature of the  
parent / guardian N° 2 :  
Read and approved



**DGA VIE SOCIALE ET CULTURELLE  
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**CERTIFICATE**

*It should be pointed out that :*

Selon l'article 441-7 du code pénal « Est puni d'un an d'emprisonnement et de 15 000 € d'amende le fait de :

1° D'établir une attestation ou un certificat faisant état de faits matériellement inexacts ;

2° De falsifier une attestation ou un certificat originellement sincère ;

3° De faire usage d'une attestation ou d'un certificat inexact ou falsifié.

Les peines sont portées à trois ans d'emprisonnement et à 45 000 € d'amende lorsque l'infraction est commise en vue de porter préjudice au Trésor public ou patrimoine d'autrui ».

**CERTIFICATE OF RESIDENCE OF THE CHILD  
If divorced, separated or alternating custody without judgement**

Hereby, I undersigned  Hereby, we undersigned M. / Ms.....

Legal responsible for the child .....

Born .....City/Dep .....

Declare on the honor, that the reference address for schooling is :

N°..... Street .....

Residence.....

City ..... Zip code.....

**Alternating custody** : attach copy of identity documents and proof of residence of both parents.

**Isolated Parent** : Attach Copy of Parents identity documents

Declare on the honor no longer have contact with Mr / Ms.....

**Parents separated**: attach copy of parents identity documents

I/we accept that this address is taken into account for the school registration and the scholar affectation to the area school.

I/we attest co-parental authority over our child.

To all legal intents and purposes,

Antibes,

Parent responsible or guardian N° 1 Signature :

Parent responsible guardian N° 2 Signature :