**THE NUMBER AND THE TITLE OF THE MEETING**

**AGENDA**

**Location: NAME OF THE INSTITUTION, TOWN, ADDRESS**

**Time: MONTH DAY, YEAR**

Contacts:

|  |  |  |
| --- | --- | --- |
| CONTACT 1 | Phone No: \_\_ | Mail address: \_\_ |
| CONTACT 2 | Phone No: \_\_ | Mail address: \_\_ |

**DAY I**

|  |
| --- |
| **WEEK DAY, MONTH DAY,YEAR, INSTITUTION** |
| 0930 – 1000 h | Registration of participants  |
| **Part I** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  | *Coffee break + Joint picture* |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Part II** |
|  |  |  |
|  |  |  |
|  | *Lunch break/ Networking* |
|  |  |  |
|  |  |  |
|  | *Final conclusions* |
|  |
|  | *Dinner/ Networking* |

**DAY II**

|  |
| --- |
| **WEEK DAY, MONTH DAY,YEAR, INSTITUTION** |
|  |  |  |
| **Part III** |
|  |  |  |
|  |  |  |
|  | *Coffee break*  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  | *Lunch*  |