



Meeting Agenda

Date/Time:

Location or Call In #:

Type of Meeting: *(Planning, check-in, information-sharing, problem-solving, brainstorming, regular staff meeting or other)*

Participants:

Desired Outcomes: 1. 2. 3.			For Information	For Discussion	For Brainstorming	For Decision
Time	Agenda Item	Individuals Responsible				
	Confirm agenda	• All		X		X
		•				
		•				
		•				
		•				
	Next steps: Actions, timing, responsibilities.	• All	X	X	X	X
	Adjourn and confirm next meeting time of: _____	• All				X