Confirmation of conference attendance

**To Whom it May Concern,**  Amsterdam, 14 March 2024

This is to confirm that \_\_\_\_\_\_\_\_\_*YOUR NAME*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

was a participant at the 7th AMS Annual Research Meeting, held on 14/03/2024 at KIT (Royal Tropical Institute), in Amsterdam.

\_\_\_\_\_\_\_\_\_\_\_ *YOUR NAME* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ participated in the ­­­­­­­­­­­ Basic / Clinical / Sports & Health science *(delete as appropriate)* category with a poster / abstract titled

\_\_*TITLE OF YOUR ABSTRACT*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Participation in the 7th AMS Annual Research meeting** | **# of ECTS** |
| Participation with abstract, poster, as speaker and visitor (= Plus programme) | 1.5 (maximum) |
| Participation with abstract, poster and as visitor (=Whole programme) | 1.1 |
| Participation with abstract, poster and as speaker | 1.3 |
| Participation as visitor only (workshops, posters, and oral presentations) | 0.2 |
| Participation with abstract and poster | 0.9 |
| **Sum total** | *Add # of* **ECTS** |

Kind regards,

*Bring along to the annual meeting to have it signed.*

*M. di Carlo Riato / S. Lund*

On behalf of the organizing committee

Date: \_\_\_\_\_\_ / \_\_\_\_\_\_\_ / 2024