



After Action Report

Squadron Information

Unit:

Unit POC:

Event Information

Date:

Time:

Duration:

Number of Attendees:

Please list how many members, if any, did not participate under the corresponding reasons below.

Chose not to participate
Personal conflict

Duty-related conflict
Other

Actual Expenses

MOA (activity related):

NAF (food & beverage):

What went well at your event?

What areas needed improvement?

Would you host this event again? Why or why not?

What lessons were learned and what recommendations do you have for future squadron events?

Signature