



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 | Duty-related conflict |
| Personal conflict | Other |

Actual Expenses MOA (activity related): _____ NAF (food & beverage): _____

What FSS or Off Site establishment(s) did you partner with for this event?

What went well for this event?

What areas need improvements for this event?

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

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

Signature