ID #

UNITE AFTER ACTION

AIR FORCE UNITE

REQUESTING UNIT:

UNITE POC: EMAIL: @us.af.mil

DATE OF EVENT:

EVENT LOCATION:

ACTUAL START TIME: ACTUAL END TIME:

ACTUAL # OF PARTICIPANTS:

ACTUAL FEES PAID BY PARTICIPANTS:

TOTAL APF REQUESTED: TOTAL NAF REQUESTED:

HOW WELL DID YOUR PLANNING PROCESS GO? HOW COULD IT BE IMPROVED?

HOW WAS THE OVERALL EXECUTION OF YOUR PLANNED ACTIVITIES? HOW COULD THIS BE IMPROVED?

WAS EVENT EASY TO IMPLEMENT? YES ☐ NO ☐

WOULD YOU HOST THIS EVENT UNDER THE UNITE PROGRAM AGAIN? YES ☐ NO ☐

WHY OR WHY NOT?

WHAT FEEDBACK ON YOUR SELECTED VENDORS CAN YOU PROVIDE?

WHAT FEEDBACK FROM PARTICIPANTS CAN YOU PROVIDE?

DID YOUR UNIT RECEIVE ADDITIONAL FUNDING ASSITANCE FOR THIS EVENT? BOOSTER CLUB, DONATIONS, OR SPONSORS?

COULD YOUR UNIT HAVE HOSTED THE EVENT WITHOUT UNITE FUNDING? YES ☐ NO ☐

UNITE POC SIGNATURE:

C3 SIGNATURE:

ROBINS AIR FORCE BASE 78TH FORCE SUPPORT SQUADRON

C3 OFFICIAL USE ONLY

ACTUAL APF: ACTUAL NAF: