

## **UNITE AFTER ACTION**

REQUESTING UNIT:	
UNITE POC:	REQ ID:
DATE OF EVENT:	
EVENT LOCATION:	
ACTUAL START TIME:	ACTUAL END TIME:
ACTUAL # OF PARTICIPANTS:	
ACTUAL # OF DEPENDENTS:	
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? LYES NO NO YES YES NO NO YES NO YES NO NO YES NO	
WHY OR WHY NOT?	
WHAT FEEDBACK ON YOUR SELECTED VENDORS CAN YOU PROVIDE?	
WHAT FEEDBACK FROM YOUR PARTICIPANTS CAN YOU PROVIDE?	
WHAT LESSONS WERE LEARNED AND WHAT RECOMMENDATIONS DO YOU HAVE FOR FUTURE	
PROGRAMMING?	
COULD YOUR UNIT HAVE HOSTED THE EVENT WITHOUT UNITE FUNDING? YES NO	
UNITE POC SIGNATURE:	
C3 SIGNATURE:	
00 GIGHATUNE.	

ACTUAL NAF:

ACTUAL APF: