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?   **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 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:

C3 OFFICIAL USE ONLY

ACTUAL APF: **ACTUAL NAF:**