



UNITE AFTER ACTION REPORT

REVITALIZING SQUADRONS ...the beating heart of the Air Force."

CY24
Form 3

REQUESTING UNIT:

UNIT POC:

EMAIL:

DATE OF EVENT:

EVENT LOCATION:

ACTUAL START TIME:

ACTUAL END TIME:

DID YOUR COMMANDER APPROVE FUNDING FOR SPOUSES & DEPENDENTS? YES NO

ACTUAL # OF UNIT MEMBERS: # OF SPOUSES/DEPENDENTS: TOTAL:

ACTUAL FEES PAID BY PARTICIPANTS (OUT-OF-POCKET COSTS PER PERSON):

Strongly Agree Agree Neutral Disagree Strongly Disagree

THE EVENT WAS SUCCESSFUL.

WE WILL PARTICIPANT IN THIS TYPE OF EVENT AGAIN.

THE EVENT WAS EASY TO IMPLEMENT.

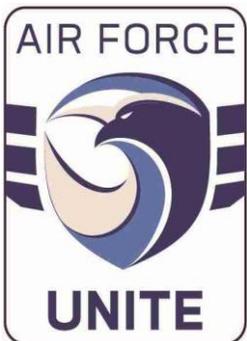
PARTICIPANTS FOUND THE EVENT ENJOYABLE.

HOW WELL DID YOUR PLANNING PROCESS & OVERALL EVENT EXECUTION GO? HOW COULD IT BE IMPROVED?

WHAT FEEDBACK CAN YOU PROVIDE ON YOUR SELECTED VENDORS/ACTIVITIES?

WHAT FEEDBACK CAN YOU PROVIDE FROM YOUR PARTICIPANTS?

WAS ADDITIONAL FUNDING ASSISTANCE (BOOSTER CLUB, DONATIONS, ETC.) USED? YES NO



UNIT POC SIGNATURE:

C3 OFFICIAL USE ONLY

C3 SIGNATURE:

REQUEST ID:

APF (ACTIVITY FUNDS) REQUESTED:

NAF (FOOD FUNDS) REQUESTED:

APF (ACTIVITY FUNDS) UTILIZED:

NAF (FOOD FUNDS) UTILIZED:

Submit this form to 88FSS.Unite.WPAFB@us.af.mil. Units must submit an AAR with 5 photos within 2 business days of event.