

UNITE AFTER ACTION



REQUESTING UNIT:

UNIT POC:

REQ ID:

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:

WAS THE PROGRAM SUCCESSFUL? WHY OR WHY NOT?

HOW DID YOU HEAR ABOUT UNITE AND THIS EVENT?

WAS EVENT EASY TO IMPLEMENT?

YES

NO

WOULD YOU PARTICIPATE IN THE UNITE PROGRAM AGAIN?

YES

NO

WHY OR WHY NOT?

WHAT FEEDBACK DID YOU GET FROM YOUR PERSONNEL?

WHAT FEEDBACK DO YOU HAVE AS A CUSTOMER?

WHAT LESSONS WERE LEARNED AND WHAT RECOMMENDATIONS DO YOU HAVE FOR FUTURE PROGRAMMING?

DID PARTICIPANTS FIND THE PROGRAM ENJOYABLE

YES

NO

UNIT POC SIGNATURE:

C3 SIGNATURE:

C3 OFFICIAL USE ONLY

ACTUAL APF:

ACTUAL NAF: