AFTER ACTION REPORT

Date: _____

To: OPS, ADMIN, XO, CO, NSI, SNSI Respectively,
From: _____

Subject: Event Summary and Request for Cadet Event/Hours Update.

Event's Title and Date: _____

Summary (What happened/how the event went/if any compliments were expressed):
_____
_____
_____
_____
_____

Problems (Organizational/time management/buses/lesson learned):
_____
_____
_____
_____
_____

Type of Credit: (Circle one or enter hours when applicable)

Community Service	**Unit Service**	**Academic**
Drill Team	**Participation**	**Mini Boot-Camp**
Sea Cruise	**Orienteering**	**Color Guard**

Other: _____Hours: _____

Special Comments (late arrivals/departures):
_____
_____
_____
_____
_____

(Please attach alphabetized muster sheet of cadets in attendance)

Initials: SNSI/NSI_____ CO _____ XO _____ OPS _____ ADMIN _____