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After Action Report (Short Form)

Directions: This short form is for small incidents that do not involve activation of the EOP and/or HCC.

Incident / Exercise Name

Incident Date: Click here to enter a date.	How was the incident identified? Click here to enter text.
Incident Time:	
Incident Type: Mass Gathering	Who was notified of the incident?
Location: Click here to enter text.	
Event/Incident Summary: Click here to enter text.	
Response Actions Taken: Click here to enter text.	
Were supplies/equipment adequate for response? Yes	What factors caused and/or contributed to the emergency? Click here to enter text.
What specific lessons were learned? Click here to enter text.	
What actions should be recommended or implemented? (Include updates to plans/policies) Click here to enter text.	



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Signature Page

Emergency Management After Action Report (Short Form)

A signed copy of this AAR will be kept on file in the Department of Emergency Management.

Prepared By:

Print Name	Title	Signature	Date
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Reviewed and Accepted:

Print Name	Title	Signature	Date
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