

COI Event Afteraction Report

(For use of this form see USAREC Reg 601-2)

To:	From:	Date:
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**Section I
Summary**

Control Number _____ Date and location held _____

No. of Military/DOD hosts _____ No. COI _____ No. TAIR/speakers _____ Total Attendance _____

Cost per person _____ Total cost _____ No. of leads generated _____

No. of requests for recruiter services _____ No. of pledges of support _____

Other beneficial results, feedback, problems or recommendations:	Leads (indicate name of referral):
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**Section II
Attendees**

Print name, title, and category for all attendees. H=host (military or DOD) and C=COI

