

**EVACUATION**

After-Action Report

| BACKGROUND INFORMATION |                  |
|------------------------|------------------|
| Location:              | Person in Charge |
| Date                   | Time Started     |
| Type of Incident       | Time Finished    |
| DESCRIPTION OF EVENTS  |                  |
|                        |                  |

| OBSERVATIONS  |
|---|
| <b>Primary Areas for Improvement:</b> <ol style="list-style-type: none"><li>1.</li><li>2.</li><li>3.</li></ol> <b>Major Strengths:</b> <ol style="list-style-type: none"><li>1.</li><li>2.</li><li>3.</li></ol> |

|               |      |
|---------------|------|
| Submitted by: | Date |
|---------------|------|

**REMEMBER:**

Document and complete the After Action Report (AAR) upon **every** evacuation. The AAR will be submitted electronically to the Emergency Preparedness Program at [EPP@csudh.edu](mailto:EPP@csudh.edu) within 24 hours following **any** evacuation. Thank you!