Highland Village Police Department
After Action Report

INCIDENT / EVENT

Date: _____ Day of Week:_____
Event:_____
Hours of Operation: _____
Incident Commander / Supervisor:_____

PERSONNEL

# Police Officers		# Fire Personnel	
# Police Auxiliary		# Cert Personnel	
# Police Vehicles		# Parks Personnel	
# Police Bikes		# Other Personnel	

ENFORCEMENT ACTIONS

# Citations		# Arrests	
# Warnings			

LOCATION STATISTICS

Est. # of People		Est. # of Vehicles	

WEATHER

Conditions		Temperature	

COMMENTS / CONSIDERATIONS

☐ See attached sheet(s) for additional comments / considerations.

Supervisor: _____ Date: _____