



Joint Support Services Division
Defence Reserves and Employer Support



DEFENCE RESERVES SUPPORT
Supporting Australia's Reservists and their Employers

PRINCE OF WALES AWARD POST ACTIVITY REPORT

Name of POWA Recipient:		Name of POWA Activity:	
Name of Civilian Employer:		Financial Year of Activity:	

Activity:

Brief description of the activity undertaken including:

- a. Name of activity and provider
- b. Dates and locations of the activity
- c. Key components of the activity (e.g. Course completion, qualification earned, training in specialised field, attendance at an industry conference with recognised speakers etc.)

Outcomes:

A description of the outcomes of your activity including:

- a. Benefits to you
- b. Benefits to your employer
- c. A reflection on how/whether the outcomes achieved align with the objectives you outlined in your application

Secondment:

Did you undertake a Secondment in conjunction with your POWA? **YES** **NO**

If so, please provide detail below:

- a. Where were you seconded to?
- b. What activities or duties did you undertake as part of your secondment?
- c. How did the secondment benefit you?

Administration:

Do you or your employer have any feedback or suggestions, regarding your POWA experience? Consider:

- a. Financial support
- b. Clarity of communications
- c. Clarity of process
- d. Unexpected/ unplanned outcomes

Future Communications:

Are you willing to be contacted further regarding your POWA experience? This may include interviews, or photographs for the purposes of marketing future iterations of the program. **YES** **NO**

Is your civilian employer willing to be contacted for further information regarding their experience with the POWA program? This may include interviews, or photographs for the purposes of marketing future iterations of the program.

YES **NO** **UNSURE**

Do you have access to any photographs/videos from your activity that you would be willing to allow DRES to use for the purposes of marketing future iterations of the program? **YES** **NO**

Prepared by:

Name:		Signature:	
Position:		Date:	