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| Organization Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Primary and Alternate Points of Contact (Name, Email, please)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 1. What do you do well inside your organization (organizational resilience)?
2. What areas do/would you need assistance from the COAD-OC?
 | What can/do you do well for other organizations/individuals? |
| Before (Preparedness Actions) |  |  |
| During (Response Actions) |  |  |
| After (Recovery Actions) |  |  |