Air Force Aid Society Supplemental Education Loan

To complete the fillable application and add a digital signature you must download this form and save it to your computer, then close the adobe program. Find and open your saved document and complete all fields. When ready, double click in the digital signature box and instructions will open to configure your digital ID.

Knowing incidental college expenses for books and fees, combined with required equipment such as computers, course-specific software programs, and special calculators can pose a hardship for families already coping with high tuition and room and board costs, the Society is offering an interest-free loan to help reimburse families for these kinds of expenses. In addition, we are offering an extra \$1,000 per student for families that have been impacted financially due to the COVID-19 pandemic.

This interest-free loan is open to the sponsoring members of students who applied for the 2020-2021 Arnold Education Grant. To apply, simply complete the brief application form and return to this office by email/fax/mail as listed below postmarked no later than 31 January 2021. Maximum dollar amount for each full-time dependent undergraduate student is \$1,000. Totals less than \$1,000 will be reimbursed for the actual amount spent and totals equal to or greater than \$1,000 will result in a \$1,000 reimbursement.

Checks for approved loans will be disbursed by HQ AFAS to the sponsoring member. Since AFAS cannot set up an automatic repayment by allotment from your military pay, you must complete the enclosed Paymatic form authorizing payment from your personal checking account and submit it with your loan application. The additional funding for COVID impacts is required to be repaid within the same 12-month period. Note: If you have an existing EA Loan, your monthly allotment will be increased accordingly to repay this loan within the 12month period.

If you have any questions, please feel free to contact us at ED@afas-hq.org

Education Assistance Department Air Force Aid Society, Inc. FAX (866) 896-5637 (703)972-2647 ED@afas-hq.org



EDUCATION ASSISTANCE LOAN

Email Application to ED@afas-hq.org or FAX to 866-896-5637

The Air Force Aid Society is offering an interest-free loan to reimburse 2020-2021 education expenses which have been paid out-of-pocket for each dependent full-time undergraduate student's books, fees, and required equipment. The maximum loan per student will be \$1000, repayable by allotment over 12 months. In addition, we are offering and extra \$1,000 per student impacted by COVID.

AIR FORCE MEMBER APPLICATION INFORMATION:

Name of Air Force Member (Last, First, MI)		Grade	SS	N		Status and DOS/Retirement Date: Active DOS: Retired Ret Date:
Home Address (Street, City, State & Zip Code)	Home Phone			Complete Unit A	ddress (If A	ctive Duty)
Email Address		Cell Phone		<u>.</u>	Duty Phon	e (If Active Duty)

STUDENT #1 INFORMATION:

Name of Student (Last, First, MI)		SSN	2020-2021 College Status	
			(Freshman, Sophomore, Junior or Senior)	
School Name	City		State	
SPRING 2021 EXPENSES (Do not include Room or Board): ENTER EXACT AMOUNT TO BORROW UP TO \$1,000: \$				
SFRING 2021 EAFEINSES (BO HOU INCIDE ROOM OF BOARD). EAFER EAACT AMOUNT TO BORNOW OF TO \$1,000. \$				
ANAQUINT (horrow we to an additional \$1,000 nor student if imported by COV/ID 10); \$				
AMOUNT (borrow up to an additional \$1,000 per student if impacted by COVID-19): \$				

STUDENT #2 INFORMATION:

Name of Student (Last, First, MI)		SSN		2020-2021 College Status (Freshman, Sophomore, Junior or Senior)
School Name	City		Stat	ie
SPRING 2021 EXPENSES (Do not	include Room or Board): EN	ITER EXACT AMO	JNT TO BORRO	W UP TO \$1,000: \$
AMOUNT (borrow up to an addit	tional \$1,000 per student if i	impacted by COV	D-19): \$	

IF MORE THAN 2 STUDENTS, ATTACH INFORMATION ON SEPARATE SHEET

MEMBER'S CERTIFICATION

I certify that the above information reflects my dependent's full-time enrollment status and is an accurate accounting for out-of-pocket expenses not funded by another source. Additionally, I authorize the Air Force Aid Society to deduct a monthly (EFT) Electronic Funds Transfer (see form below) to repay this loan over a 12-month period, and I am aware that if I have an existing EA loan, my monthly allotment will be increased accordingly.

Signature of Member

(If active duty Air Force Member is deployed, spouse may sign the application and attach a Power of Attorney.)

PAYMATIC

(Electronic Funds Transfer Authorization)

NAME:	SSN:

PHONE:	EMAIL:

BANK NAME:	
BANK ADDRESS:	

ROUTING NUMBER:	ACCOUNT TYP	PE:
ACCOUNT NUMBER:	CHECKING	SAVINGS

MONTHLY PAYMENT:	
EFFECTIVE MONTH OF 1ST DRAFT:	

I authorize the Air Force Aid Society to deduct a monthly Electronic Funds Transfer (EFT) withdrawal from the above designated bank account for which supporting documentation has been attached (**copy of 'void' check or statement from bank**).

This authorization is to remain in effect with the Air Force Aid Society until my loan is paid in full or unless revoked by me in writing.

PRINTED NAME	DATE
SIGNATURE	