

AFAS "Assistance" Application Instructions Using the AFAS Member Portal



- 1. Access the Air Force Aid Society Member Portal
 - Go to: <u>https://portal.afas.org</u>
 - Click Sign In



2. Sign In Tab

- > If you previously registered for an account, you may Sign In with your Email and Password
- If you never registered for an account, you can create an account by selecting the Register tab and following the instructions (See information on next page)

Note: You may need to reset your password or call 703-972-2604 for an AFAS Team Member to unlock your account if it does not allow you to proceed

Sign in	Register
Welcome to ou	r new Air Force Aid Society portal!
EMERGENCY T PROCESSED T	RAVEL – ALL EMERGENCY TRAVEL FINANCIAL ASSISTANCE REQUIRED DUE TO SERIOUS ILLNESS/DEATH OF A FAMILY MEMBER WILL BE HROUGH THE AMERICAN RED CROSS (ARC). PLEASE CONTACT THE ARC AT 1-877-272-7337 FOR IMMEDIATE ASSISTANCE.
This is your one	e-stop shop to manage your relationship with the Air Force Aid Society, the official charity supporting US Airmen and Space Guardians. Once you
create your acc	count and log in, you will be able to view your donation history, set-up and manage your recurring gift, apply for an education grant, emergency
assistance, con	nmunity programs, or manage your education or emergency assistance loans.
If this is your fi	rst time accessing the portal, please navigate to the "Register" tab above to set up your account.
If you need to u	unlock your account please click the "Forgot Your Password" button below.
If you have any	issues please contact the following for support:
For issues with	Donations, please contact the Donation Team: donations@afas-hq.org
For issues appl	ying for Education Assistance, please contact the Education Team: education@afas-hq.org
For issues appl	ying for Assistance, please contact the Assistance Team: <u>ea@afas-hq.org</u>
Sign In	
	* Email
* P	assword
	Remember me?
	Sign in Forgot your password?

3. Register Tab – Creating a new account

Enter your personal Email, create a Password & Confirm password, enter the code from the image on your screen, and then click **Register**

Note: **Do not** use your ".mil" or ".edu" email as you may not receive important emails regarding your application

Sign in Register	
ddress is already taken, p	lease return to the "Sign in" tab and use the password reset button at the bottom of the screen to generate a password for your
count. Register an accou	int
* Email	
802- 25	
* Password	
* Confirm password	
	DC7FDBM
	EGATEDM
	<u>Generate a new image</u> Play the audio code
	Enter the code from the image
	Register

If you receive a message indicating "the username/Email is already taken", you may have already registered. Click on the Sign In tab and enter your Email and Password to continue to the application. If you do not remember your password, click on the Forgot your password? button and follow the instructions to request a password reset

> Profile screen - enter the required information on this page and then click Update

John Shuffy	Your information	
	Title *	E-mail/Username
Profile	Amn x Q	johnsnuffy80@gmail.com
Donation History	First Name *	Business Phone
Recurring Donations	John	703-972-2604
My Applications	Middle Name	
Security	Last Name *	
Change password	Snuffy	
	Address Street 1 1550 Crystal Drive	Address 1: State/Province
	Street 2	ZIP/Postal Code
		22202
	Class.	Address 1: Country/Degion
	City	Address I. Country/Region

> Once complete, you should be taken back to the Sign in / Register screen and be able to Sign In

4. Create An Application

> Sign In to your account to start an application. (Select the Sign In tab, enter your Email and Password)



> Click on **My Applications**

WELCOME TO TH	E AFAS PORTAL
To make a donation to the Air Force Aid Socie To apply for Education, Assistance	ety click the Donate Button on the left. or Community Programs or
to continue an existing application click the	My Applications Button on the right.
Donate	My Applications
How to Appl	y?

Click on Apply for Assistance

My Applications

This page is the central location to monitor your applications with the Air Force Aid Society.

To begin a new application, click on one of the blue buttons below. To apply for Assistance click the "Apply for Assistance" button on the left. To apply for a Community Program (Bundles for Babies / "Bee" Arnold Spouse Tuition Program ONLY] click the "Apply for Community Program" button in the middle. To apply for the Cen. Henry H. Arnold Education Grant click the "Apply for Education Crant" on the right.

Once an application has been started but not completed, it will be displayed here with a status reason of "Unsubmitted". To edit or resume the application, click on the blue Application ID in the table below. This will take you back to the application, where you will be able to edit the information and finish the application.

Once the application has been submitted, it will be displayed here with a status reason of "Submitted". To view the details of the submission, click on the blue Application ID in the table below. This will take you to the application's detail page where you will be able to review the details of the submitted application.



> Next, select the **Eligibility Category** which pertains to you and then click **Submit** to begin your application

Note: The system **will not** allow you to apply if you do not fall under any of the eligibility categories

Note: Active-Duty Air Force/Space Force members assigned to any other type of installation, organization, or Geographically Separated Unit (GSU) <u>can</u> apply for assistance using the "Active-Duty Air Force/Space Force member assigned to an Air Force/Space Force installation" eligibility category

Registration Eligibility Check

Welcome to the Air Force Aid Society Emergency Assistance online application.

Incorporated in 1942, Air Force Aid Society (AFAS) is the official charity for the U.S. Air Force and U.S. Space Force. AFAS works to support and enhance the United States Air Force and the United States Space Force missions by providing emergency financialassistance, educational support, and community programs to Airmen, Guardians, and their families.

The intent of financial assistance is to stabilize an emergency situation. It is not intended to be a long term remedy when spending continues to exceed a budget. Emergency assistance may be provided as a no-interest loan or grant. Final determination will be made by HQ AFAS upon review of application, required documentation and the emergency financial need.

If your emergency financial need is due to the illness or death of a family member and required emergency travel assistance, please contact the American Red Cross at 1-877-272-7337.

To continue with an existing application click here.

Select the eligibility category which pertains to you

O Active-Duty Air Force/Space Force member
O Spouse of an active-duty Air Force/Space Force member with a Power of Attorney (POA)
O Air National Guard or Air Force Reserve member
O Spouse of an Air National Guard or Air Force Reserve member with a Power of Attorney (POA)
O Air Force Retiree
O Spouse of an Air Force Retiree with a Power of Attorney (POA)
O Widow or widower of an Air Force Retiree
O Dependent family member (enrolled in DEERS) of Air Force/Space Force member who died on active duty
O Other military service member (Army, Coast Guard, Marines, Navy)
O None of the above

Step 1: Applicant Information page – Fill in the required information and then click Save and Continue. Note: All fields with an asterisk (*) are mandatory and must be completed to continue to the next screen

ASSISTANCE APPLICATION



Step 2: Military Member Information page – Fill in the required information and then click Save and Continue

Note: First Sergeant name and contact information is mandatory. AFAS reserves the right to contact the First Sergeant if/when necessary

dilitary Member Information	Contact Information
SSN (with dashes) *	Personal Email Address *
	Please enter a personal email address, millemail addresses will not be accented
DODID	
	Work Email Address *
First Name *	
	Phone Number Type *
	Mobile Phone 🗸
	Mobile Phone (no dashes) *
Last Name *	
	Work Phone (no dashes) *
Suffix	
Date of Birth (Format: MM/DD/YYYY) *	Unit Information
Sec	Init Name *
dilities and the former while a	Algerta
filitary information	Street
Military Branch *	
3 6 5	Duty Station/Base *
Military Category *	۹.
Select	✓ City*
Military Rank *	
Please select a value	State/Province *
	Q
	Zip Code *
	Half Three Number in a deshead #
	unit priore number (no dasnes) *
	Provide a telephone number
	First Sergeant *
	AFAS reserves the right to contact your Military & Family Readiness (M&FRC), First Sergeant, or leadership if warranted.
	First Sergeant Phone Number (no dashes) *
	Provide a telephone number
	First Sergeant Email *

> Step 3: Requested Assistance Details page

• Click on the blue **Add Requested Item** button on the right-side to select specific categories of need and the amounts needed. You may include multiple items in the same application

Note: AFAS provides assistance to help solve short-term needs. For assistance solving a longer term need, please visit your local Military & Family Readiness Center. They can assist with basic budget counseling and provide additional resources

olicant Information 🥜	2 Military Member Information	3 Decaverated Assistance Details	4 Decendents	5 Dequirement:	
sbursement Method					
the "Add Requested Item	icon, select a category and provi	de a description and a dollar amoun-			/
Requested item Category	Requested Item				

- Under **General**, use the drop-down boxes to select specific needs. Provide additional information for your needs in the open box on the right
- Once finished, click the blue **Submit** button

	4 Create		×
	General		^
	Requested Item Category* Please select a value	Please provide more details on your specific needs for this requested item.	
	Requested Item Subcategory *		
	Amount (Format: 0.00)		
1 Applicant Info			
6 Disbursemen	Submit		
Click the "Add Re			ested item
Requested I			-
			_
There are r	te records to displey.		
Selected Ass	Istance Type *		

• When back on the **Requested Assistance Details page,** provide an **Explanation of Hardship** in the open box

Note: This should be clear and concise details about what caused the hardship and what is needed to achieve financial wellbeing. AFAS requires this information to better understand your specific situation

				Add Requested (
	r	Subcategory	Description	Amount
1	Barle Linica Evenances	Food		0000012
	Sanillannana	Mortpape		\$1.6mc0
	unines	ElectriciCes		\$23500
1	Requested Total			\$1,990,00
5	elected Assistance Type * tandard Assistance xplanation of Hardship *			
2				

• If you need to *change* or *delete* one of your requested items, click the **blue down arrow** next to the dollar amount for that item

- ppinter in the interior of	2 Military Member Information 🖌 3	Requested Assistance Details 4 D	ependents 5 Requirements	
Disbursement Method				
k the "Add Requested Item"	con, select a category and provide a descr	iption and a dollar amount.	Add Requested Item	
Requested Item Category ↑	Requested Item Subcategory Descrip	tion	Amount	
Basic Living Expenses	Food		\$100.00	
Rent/Mortgage	Mortgage		\$1,675.00	dit Requested Item
Utilities	Electric/Gas		\$215.00	Delete Requested Item
Requested Total			\$1,990.00	
Selected Assistance Type * Standard Assistance				
Explanation of Hardship *				
PROVIDE CONCISE, FAC	S-BASED INFORMATION TO HELP HQ I	JNDERSTAND YOUR SITUTATIONA		
			1.	2

• Once all requested items have been entered and verified, review all categories and amounts to verify they are correct, then click **Save and Continue**

> Step 4: Dependents page

- If you have any dependents, click Add Dependent to provide their details
 Note: Please include all dependent names, Date of Birth (DOB), and your relationship as reflected in the Defense Eligibility Reporting System (DEERS). This information may be verified
- Once you have entered any dependents, or if you do not have any dependents, click Save and Continue

sbursement Method				
ch dependent, click "Add De	ependent" and complete the Name, Relat	onship, and Date of Birth fields. C	ontinue until all your depen	dents are listed.
				Add Dependent
Name 1	Relationship	Date of Birth	Age	
Toby	Spouse	1/11/1969	53	

> Step 5: Requirements page

 Click on each blue box on the right and upload a copy of the Required Documents *Note:* These documents are required by the system and *must* be attached before submitting your application (Documents required are based on your requested items). Although these documents are limited, an AFAS Team Member may request additional documentation if needed

6 Disbursement Method				
Please attach each file individually by click hat corresponds with the Document Narr	king the blue text on the left side of the tal	ble and in the new window click the	choose file button to selec	t your file
Document Type 4	Description	Status	Received Date	
Mortgage Payment Bill/Lender Letter	r I	Pending		٢
Military ID (Front and Back)		Pending		۲
Leave and Earning Statement (LES)		Pending		۲
Electric/Gas Invoice/Bill		Pending		۲
Budget		Pending		0

• **Create a Budget** - Click on the word **Budget** in blue under **Document Type** *Note:* A budget is required with your application

Nortgage Payment Bill/Lender Lette	ar		
		Pending	۲
Ailitary ID (Front and Back)		Pending	٢
eave and Earning Statement (LES)		Pending	٢
lectric/Gas Invoice/Bill		Pending	٥
Budget		Pending	۲
	liitary ID (Front and Back) eave and Earning Statement (LES) lectric/Gas Invoice/Bill udget	liitary ID (Front and Back) eave and Earning Statement (LES) lectric/Gas Involce/Bill udget	Illitary ID (Front and Back) Pending eave and Earning Statement (LES) Pending lectric/Gas Invoice/Bill Pending udget Pending

• Click **Budget Worksheet** in the blue text and fill-in the Excel worksheet. When finished, upload the file from your computer (select **Choose Files**) and then click **Submit**

	Document Type *	Notes
	Budget	
	Instructions	
	If you are applying for emergency travel assistance, the budget is not required.	
	There are no notes to display	
	mere are no notes to display.	
	Download the budget template and upload t	ne completed excel file below.
_/	Budget Worksheet	•
	Accepted file types: jpeg, png, doc, docx, pdf,	xslx*
	Choose Files No file chosen	
	Carthourste	

> Step 6: Disbursement Method page

• Select how you would like to receive your disbursement, either through Zelle or Bank ACH

Zelle To use Zelle, you must register through your bank and select the Zelle Identifier Type . It is either a stateside phone number (entered without dashes) or a personal email synced to your stateside bank account.	Bank ACH If Bank ACH is elected, fill out the Bank Name, Routing Number and Account Number. Funds will be deposited directly into this account.
1 Applicant Information 2 Military Member Information 3 Requested Assistance Details 6 Disbursement Method Enroll today in the Zelle payment platform to direct deposit approved emergency assistance funds into your account! Click Here to learn more. Disbursement Method* Zelle Zelle Identifier Type * Previous Save and Continue	1 Applicant Information 2 Military Member Information 3 Requested Assistance Details 6 Disbursement Method Enroll today in the Zelle payment platform to direct deposit approved emergency assistance funds into your account? Click Here to learn more. Disbursement Method* Bank ACH Bank Name*

o Once you have entered and verified your Disbursement Method, click Save and Continue

Final Steps to Submit Your Application to AFAS

- 1. Please read the *Terms of Agreement* and then **check the box** indicating you understand and accept these terms
- 2. Select your Marketing Preferences for how you would like to be contacted
- 3. Once you have completed the 2 steps above, click **Submit** to send your application to AFAS for processing



ADDITIONAL INFORMATION

- > You will receive a verification email
- If your application is approved, you will receive an email with an attachment which requires your signature. This signed document must be returned before AFAS can distribute any approved funds



Having difficulty with your application or have questions? Contact AFAS at 703-972-2604 or email <u>ea@afas-hq.org</u> for assistance

> What Happens Next?

- Your application will be assigned to an AFAS Caseworker through our corporate office in Arlington, VA.
 It will be reviewed as quickly as possible to assess your financial need
- Ensure you answer any calls you receive from area codes 703 or 571 as your Caseworker may be trying to contact you for additional information regarding your case
- Also, be sure to check your email as the Caseworker may send you messages regarding your case. You
 may also want to check your Junk/Spam folders for updates as well
- If financial assistance is approved, you will receive an email with an attachment which requires your signature acknowledging concurrence of repayment agreement or grant as shown above. You must return the document before AFAS can proceed with distribution of approved funds. This email is sent using Adobe Sign. Please be sure to monitor your Inbox, Junk/Spam folders