

AFAS <u>Spouse</u> "Assistance" Application Instructions Using the AFAS Member Portal



- 1. Access the Air Force Aid Society Member Portal
 - Go to: https://portal.afas.org
 - 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	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 create your acc	e-stop shop to manage your relationship with the Air Force Aid Society, the official charity supporting US Airmen and Space Guardians. Once you sount 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
If this is your fi	rmunity programs, or manage your education or emergency assistance loans. 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 For issues appl For issues appl	Donations, please contact the Donation Team: <u>donations@afas-hq.org</u> ying for Education Assistance, please contact the Education Team: <u>education@afas-hq.org</u> 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

lease DO NOT use your ' ddress is already taken. I	.mil" email address to register. You may not receive important email notifications if you do so. If you receive a message that your ema please return to the "Sign in" tab and use the password reset button at the bottom of the screen to generate a password for your
ccount.	
egister an accou	Int
* Email	
* Password	
* Confirm meaning	
Commin password	
	PG7FPBM
	Cenerate a new Image 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

Sonn shuny	Your information	
	Title *	E-mail/Username
Profile	Amn x Q	johnsnuffy80@gmail.com
onation History	First Name *	Business Phone
ecurring Donations	John	703-972-2604
ly Applications	Middle Name	
Security		
hange password	Last Name *	
	Address	
	Street 1	Address 1: State/Province
	1550 Crystal Drive	٩
	1550 Crystal Drive Street 2	Q ZIP/Postal Code
	1550 Crystal Drive Street 2	Q ZIP/Postal Code 22202
	1550 Crystal Drive Street 2	Q ZIP/Postal Code 22202 Address 1: 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 So To apply for Education, Assistar	ociety click the Donate Button on the left. Ice or Community Programs or
to continue an existing application click	he My Applications Button on the right.
Donate	My Applications
How to A	.pply?

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) dick the 'Apply for Community Program" button in the middle. To apply for the Gen. Henry H. Arnold Education Grant click the 'Apply for Education Grant" 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 herewith 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

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

Active-Duty Air Force/Space Force member
Spouse of an active-duty Air Force/Space Force member with a Power of Attorney (POA)
Air National Guard or Air Force Reserve member
Spouse of an Air National Guard or Air Force Reserve member with a Power of Attorney (POA)
Air Force Retiree
Spouse of an Air Force Retiree with a Power of Attorney (POA)
Widow or widower of an Air Force Retiree
Dependent family member (enrolled in DEERS) of Air Force Force member who died on active duty
Other military service member (Army, Coast Guard, Marines, Navy)
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



• Select **"No"** under **Military Member is Applicant** section, then chose your **Relationship to Military Member** from the drop-down menu, and if you have a **Power of Attorney (POA)**

Note: You *must* have a Power of Attorney to proceed. If you do not have a POA, contact the AFAS Team at 703-972-2604 to discuss next steps

Military Member is Applicant	
No O Yes	
Relationship to Military Member *	
Spouse	×
Do you have a power of attorney? *	

• When you have completed all the required fields on the page, click **Save and Continue**

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

8 Disburgement Method	
Ailitary Member Information	Contact Information
SSN (with dashes) *	Personal Email Address *
	Please enter a personal ernall address, mill ernall addresses will not
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	Network Provell & deleterer #
First Name *	
	Phone Number Type *
Mode Initial	Mobile Phone V
	Mobile Phone (no dashes) *
Last Name *	
	Work Phone (no dashes) *
Suffix	And the second s
Date of Birth (Format: MM/DD/YYYY) *	Unit Information
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All have a landa mar a bland	in the second
allitary information	Street
Military Branch *	
×	Duty Station/Base *
Military Category *	٩
Select 🗸	City*
Military Rank *	
Please select a value	State/Province *
	Q
	Zin Code !
	Unix Priorie Number (no dasnes) *
	Figure 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 Ino dashes! *
	First Sergeant Phone Number (no dashes) * Provide a telephone number
	First Sergeant Phone Number (no dashes) * Provide a telephone number
	First Sergeant Phone Number (no dashes) * Provide a telephone number First Sergeant Email *
	First Sergeant Phone Number (no dashes) * Provide a telephone number First Sergeant Email *

- ► Step 3: Requested Assistance Details page
 - o 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	I ed Acd.,l'ICJe Dlt:lik	4 Decendents	5 Dequirement:	
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the "Add Requested Item"	icon, select a category and provi	de a description and a dollar amoun-		C4I-B-IM1:i	/-
ReQI.MSt.edft•,nCatt1-ofY	ReQ.Meedt\e'''				
	0.1	Description		Amount	

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

40	create		*
	General		-
	Requested Item Category *	Please provide more details on your	
	Please select a value	specific needs for this requested item.	
	Requested Item Subcategory *		
	~		
	Amount (Format: 0.00)		
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Spotterne mit			
sbursemen	Submit		
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Requested			•
Requested I P			
Requested -			_
There are no record	da to display.		

• 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

Click the 'Add Re	equested Item" icon, select a category	and provide a description and	d a dollar amount	Ad:i Qequ@e
Rcq1>GtC'O	n.cm Otc-9ory ctC"QVC'.tc-Cl ncm s.d>C>t<9o,y	Ot'.atpt>on		Amo,.flt
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Selected As: Standard Ar	sistance Type *			
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• 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

ppicant internation •	2 Military Member Information	 3 Requested Assistance Details 	4 Dependents 5 Requirements		
Disbursement Method					
k the "Add Requested Item"	icon, select a category and provide	e a description and a dollar amount.			
			Add Requested	item	
Requested Item Category	Requested Item Subcategory	Description	Amount		
Basic Living Expenses	Food		\$100.00	0	
Rent/Mortgage	Mortgage		\$1,675.00	Edit Requested Item	
Utilities	Electric/Gas		\$215.00	Delete Requested Item	
Requested Total			\$1,990.00		
Selected Assistance Type *					
Standard Assistance					
Explanation of Hardship *					
	TS-BASED INFORMATION TO HE	ELP HQ UNDERSTAND YOUR SITUTAT	IONA		
PROVIDE CONCISE, FAC					
PROVIDE CONCISE, FAC					

• 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

ndent and complete the Name, Relationship. and Date of Birth fields Continue unul all your dependents are h
Add Der
Relationship Oaiteof Birth Age
Spouse VII/1969 53
Spouse VII/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

Disbursement Method			
u attach ch f1le nchvtdu-1fv bycl	tekan⊖ tM blue tot en ttw lffl std∙ ottM tab	and in tM Aw ndOIN check the c	boow f to button to Ht of your the
Tesponds v,, ilh th• Doc _u ment N•m•	• th11tyou HIe <wd and="" click="" submit<="" th=""><th></th><th></th></wd>		
OOC.u@nt Type "&,	O.SC:ription	SU.tus	Re<• ∲ Dat
Mortoage Payment Bill/Lender Le	eter	Penchng	@]
Military ID (Front and Back)		Pending	@]
Leave and Earning Statement (LE	51	Pending	@]
Elec::ricJC.n Invoice/Bill		Pending	@]
Budget		Pending	•

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

OOCu@ntTy@a	Description	Status	Received Data
Mortgage Payment Bill/Lender Lette	Mortgage Payment Bill/Lender Lettei		rn
Military ID (Front and Back)		Pending	rn
Leave and Earning Statement (LES)	Leave and Earning Statement (LES)		rn
[1c':,rti./C,n ln @e/0111		Pending	rn
Budoet		PefildiOO	rr
		1 onaio o	
Bredous Save and Continue			

o 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**



Click **Power of Attorney** under **Document Type** and upload the Power of Attorney document.
 Ensure you have included all pages including the signature page

Applicant Information	2 Military Member Information 🗸	3 Requested Assistance Details	4 Dependents 🖌 5	Requirements
6 Disbursement Method				
Please attach each file individu that corresponds with the Docu	ially by clicking the blue text on the left ument Name that you selected and clic	t side of the table and in the new windo ck submit.	w click the choose file but	tton to select your
Document Type ↓	Description	Status	Receive	ed Date
Power of Attorney		Pendir	ng	

• Once you have uploaded all the documents, click **Save and Continue**

> 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 Image: 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 *		

• 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

Options ~	Emergency Assistance Contract (Allotment) AIR FORCE AID SOCIETY ASSISTANCE CONTRACT				Ø	Next required field 2
	MEMBER/ADDI/CANT INCORMATION					
MEMBER John Snuffy			MEMBER # CON-278900	LAST 4 OF SSN 1234	1	
	APPLICANT RELATIONSHIP John Snuffy Member			1		
		DISBURSEMENT	INFORMATION			
	CASE # EA-2024-142107	PREVIOUS BALANCE	NEW LOAN \$1,640.00	NEW LOAN BALANCE \$1,640.00]	
		MONTHLY REPAYMENT TERMS				
	PAYMENT AMOUNT \$164.00	PAYMENT METHOD Allotment	# MONTHS 10	START DATE 9/15/2024		
Start	LOAN DISBURSEMENT – PROMISSORY NOTE I acknowledge receipt of \$1,640.00 from the Air Force Aid Society as an interest free (0%) Ioan and I promise to repay this Ioan in full according to the monthly repayment terms outlined above. I authorize AFAS to start an allotment in accordance with the allotment terms outlined above.					
	By clicking continue, our <u>Privacy Policy</u> fo	I acknowledge that I have read and agree to details on our privacy practices.	the Adobe <u>Terms of Use</u> . See	Continue		

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