#### **AFAS 2.0 MEMBER PORTAL INSTRUCTIONS**

Recommend **manual entry** of one of the following links into your browser:

• TO CREATE AN APPLICATION:

https://portal.afas.org/ea-eligibility/

• TO CONTINUE WORKING ON AN EXISTING APPLICATION:

https://portal.afas.org/my-applications/

AIR FORCE AID SOCIETY			Home	Ways To Give +	How We Help +	Our Impact +	Our Purpose -	Contact +	Sign in
	Sign in Register								
	Welcome to our new Air F	orce Aid Society portal!							
	This is your one-stop shop create your account and li emergency assistance, or	to manage your relationship w og in, you will be able to view yo manage your education or eme	vith the Air Force Aid Societ our donation history, set-up ergency assistance loans.	y, the official charity and manage your re	supporting US Airme ecurring gift, apply fo	en and Space Gua or an education gra	rdians. Once you ant, apply for		
	If this is your first time acc	essing the portal, please naviga	ate to the "Register" tab ab	ove to set up your ac	count.				
	If you have any issues plea	ise contact the following for sur	pport;						
	For issues with Donations For issues applying for Ed For issues applying for Em	please contact the Donation Te ucation Assistance, please conta lergency Assistance, please con	eam: <u>donations@afas-hq org</u> act the Education Team: <u>ed</u> stact the Emergency Assista	ucation@afas-hq.org ance Team: <u>ca@afas</u> -	hq.org				
	Sign In								
	Email								
	* Password								
		Remember me?							
		Sign in Forgot your pas	ssword?						

NOTE: New users must REGISTER first and then SIGN IN to create an application.

AIR FORCE AID SOCIETY		Home
	Sign in Register Please DO NOT use your "mil" email address to register. You may not receive important email notific address is already taken, please return to the "Sign in" tab and use the password reset button at the account. Register an account  * Email	ations if yo
	Confirm password	
	Generate a new image Disy the sudio code Enter the code from the Image	

• Enter your **PERSONAL** email, create a password, confirm your password, and enter the code from the image on your screen and click "Register".

(**DO NOT use your ".mil" email** as you may not receive important emails regarding your application.)

- If you receive a message indicating "the username (your email) is already taken", it means you have already registered.
- Click on the "Sign In" tab on this screen 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 "Resetting Password" instructions.
- Once all the required information on the Profile screen is completed, click "Update".
- Should be back to the Sign in / Register screen.

Before signing in, please make sure your browser is still displaying the correct link:

Portal.afas.org/Signin?returnUrl=%2Fea-eligibility@2F

C 🏠 🔒 portal.afas.org/SignIn?retu	mUrl=%2Fea-eligibility%2F			
🚧 ADP 🔇 New Tab 🔇 Eagle 🌋	CAP 🧿 Microsoft Office 🥜 eBridge 🔃 Inbox - RingCentral			
y o 📭 🏟				
AIR FORCE AID SOCIETY		Home	Ways To Give 🗸	How We Help 🗸
	Sign in Register			
	Welcome to our new Air Force Aid Society portal!			
	This is your one-stop shop to manage your relatio create your account and log in, you will be able to emergency assistance, or manage your education	nship with the Air Force Aid Society, view your donation history, set-up a or emergency assistance loans.	, the official charity s and manage your re	supporting US Airme curring gift, apply for

### \*\*\* URL must end with ea-eligibility%2F

- On the "Sign In" tab, enter your email and password and click "Sign In" to create an application.
- The next screen should appear.

#### **IMPORTANT**

If you registered using your .mil email address, please change it to your personal email address <u>BEFORE</u> starting your application. See "CHANGING EMAIL/USERNAME" further in these instructions.



Home Ways To Give + How We Help + Our Impact +

Home	*	Registration	Eligibility	Check

### **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 financial assistance, 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 Assistance

\_\_\_\_\_\_ Falcon Assistance - Financial needs based emergency assistance up to \$1500 for: basic living expenses including rent/mortgage, food, phone, utilities and gasoline; emergency travel for any family relationship; child care, medical and dental needs; vehicle insurance, payment/registration, vehicle repair. Loans approved under a Falcon Assistance must be repaid in 15 months or by ETS if less than 15 months. If your need exceeds \$1500, does not fall into one of the categories above, oryou are repairing a loan to AFAS, pending separation, or are under Chapter 15 bankruptcy, apply for Standard Assistance.

\_\_\_\_\_Standard Assistance - Financial needs based emergency assistance to help with: basic living expenses such as rent or utility bills, medical or dental care, funeral expenses, vehicle repairs, tavel emergencies, pet PCS transportation, special needs, disasters, assistance to surviving dependents, other categories of need. A budget is required, as well as proof of debt.

• Review the types of assistance available (Falcon and Standard). Click on the drop down arrow in the box and select the type of assistance requested.

**NOTE:** Falcon Assistance LIMIT is \$1500.00

• Next, select the "Eligibility Category" that pertains to you and then click "Submit" to begin your application.

## **1. Applicant Information**

### EMERGENCY ASSISTANCE APPLICATION

1 Applicant Information	2 Military Member Information	3 Requested	Assistance Details	4 Dependents	5 Requirements	
6 Disbursement Method						
Applicant Informa	ation		Contact In	formation		
SSN (with dashes) *			Personal Em	all Address *		
			This email m	ust be the one that	t you logged in with, if you wo	uld like
-			to change it	please do so on you	ir profile page.	
DODID			<u>Ibarshall@</u>	tgmail.com		
			Work Email	Address		
First Name *						
			Phone Num	ber Type *		
Middle Initial						~
			Work Phone	(no dashes)		
Last Name *			Provide a	telephone numbe	a.	
Cutting			Home Add	Iress		
			Address Line	-1*		
		Q				
Date of Birth (Format: M	IM/DD/YYYY) *		Address Line	2		
MM/DD/YYYY						
			City *			
Military Member Is Appli     No. O Ves	Icant					
			State (Broude			
Relationship to Military I	Member •	~	State/Provin	ce -		
		•				
			Zlp Code *			
			EEOC Volu	untary Self Ir	Institution Quest	ions
			Gender: (Ple	ase check one of t	he options below)	lions
						~
			Pace/Ethnic	ity: (Please check)	one of the descriptions below	
			Race/Ethnic correspondi	ity: (Please check on ng to the ethnic gr	one of the descriptions below oup with which you identify)	м 1
			Race/Ethnic correspondi Copy and pa	Ity: (Please check on ng to the ethnic gr ste this link https://	one of the descriptions below roup with which you identify) portal.afas.org/eeoc-descriptio	v ) ons/into
			Race/Ethnic correspondi Copy and pa a new brows listed below	Ity: (Please check of ng to the ethnic gr ste this link https:// er for definitions of	one of the descriptions below roup with which you identify portal.afas.org/eeoc-description the race and ethnicity catego	v ) ons/ into ories
			Race/Ethnic correspondi Copy and pa a new brows listed below.	Ity: (Please check of ng to the ethnic gr ste this link https:// er for definitions of	one of the descriptions below roup with which you identify) portal.afsc.org/eeoc-descriptio f the race and ethnicity catego	ons/into ories
			Race/Ethnic correspondi Copy and pa a new brows listed below.	Ity: (Please check of ng to the ethnic group of the standard sector ste this link https:// er for definitions of	one of the descriptions below roup with which you identify jortal_fas.org/eeoc-descriptic i the race and ethnicity catego	ons/into ories
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			Race/Ethnic correspondi Copy and pa a new brows listed below. Please selec (Participation	Ity: (Please check of ng to the ethnic gr ste this link https:// er for definitions of t household Incom n will have no bear	one of the descriptions below roup with which you identify jortal afs.org/eeo-description i the race and ethnicity catego he range: Ing on assistance determination	ons/ into pries

Save and Continue

2. Military Member Information

## EMERGENCY ASSISTANCE APPLICATION

	2 Military Member Information	3 Requested Assistance D	etails 4 Dependents	5 Requirements
6 Disbursement Method				
Military Member Inf SSN (with dashes) *	ormation	Contact Persona	Information	
111-22-3333		Please e be accep	nter a personal email addr sted	ess, .mil email addresses will not
DODID		Ibarsh	all@gmail.com	
		Work Er	nall Address *	
First Name *				
Lisa		Phone P	lumber Type *	
Middle Initial		Mobi	e Phone	~
м		Mobile	hone (no dashes) *	
Last Name *		70333	32288	
Farkas		Work Pl	none (no dashes) *	
Suffix		Provid	le a telephone number	
Date of Birth (Format: MM/ 11/18/1960	(ייייי/סמ' •	Unit Inf Unit Na	ormation me*	
Military Information	1	Street		
Military Branch *				
Air Force (USAF)				
		Duty St	cion/base -	
Military Category *		Duty St	anony base -	٩
Military Category *		Duty St	iuun/base -	٩
Military Category *		Duty St	BUULTBASE -	٩
Military Category * Military Rank * Please select a value		Duty St.     City *     City *     State/Pi	ovince *	<u>्</u>
Military Category * Military Rank * Please select a value		Duty St     City*     City*     State/Pi	ovince *	् ् ् ्
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Military Category * Military Rank * Please select a value		Duty St.     City *     City *     State/Pi     Zip Cod     Unit Ph     Provice	ovince * e * one Number (no dashes) *	م م
Military Category * Military Rank * Please select a value		Duty St.     City *     City *     State/Pr     Zip Cod     Duty Ph     Provice     First Set	ovince * = * one Number (no dashes) * le a telephone number seant *	م م م
Military Category * Military Rank * Please select a value		Duty St.     City *     City *     State/Pr     Zlp Cod     Unit Ph     Provic     First Ser     We will	ovince * e * e * le a telephone number geant * not contact the first serged	Q Q ent without your permission during
Military Category * Military Rank * Please select a value		Duty St.     City *     City *     City *     State/Pr     City Cod     Duty Dravid     First Ser     We will     the apple	ovince * e * le a telephone number geant * not contact the first serged ication process.	Q Q ant without your permission during
Military Category * Military Rank * Please select a value		Duty St.     City *     City *     City *     State/Pi     Zip Cod     Unit Phe     Provid     First Sei     We will     the appi	e * e * e * de a telephone number geant * not contact the first serger icetion process. geant Phone Number (no	Q       Q       Q       ant without your permission during       odashes) *

Previous Save and Continue

3. Requested Assistance Details

# EMERGENCY ASSISTANCE APPLICATION

	in, select a category and	provide a description and a donar amount.	Add Requested Item
Requested Item Category	Requested Item Subcategory	Description	Amount
There are no records to displ	ay.		
elected Assistance Type * tandard Assistance			
xplanation of Hardship *			

- Enter "Explanation of Hardship" (Provide concise, facts-based information to help HQ understand your situation. What has caused your financial hardship?)
- Click on blue button "Add Requested Item" at the top right to select specific categories of need and amounts needed.

• Use drop down boxes highlighted below to identify specific need(s). Provide additional information if needed.

Requested Item Category*       Please provide more details on your specific needs for this requested Item.         Requested Item Subcategory*       Image: Category*         Amount (Format: 0.00)       Image: Category*         1Applicent info       Image: Category*         6 Disbursemer       Submit	
Click the "Add Re Requested   +	ested Item
There are no records to display. Selected Assistance Type * Standard Assistance	
Explanation of Hardship *	
PROVIDE CONCISE, FACTS-BASED INFORMATION TO HELP HQ UNDERSTAND YOUR SITUTATIONA	

• Once all requested items have been entered, review and verify all categories and amounts shown are correct.

## EMERGENCY ASSISTANCE APPLICATION

1 Applicant Information 🖌	2 Military Member Information	<ul> <li>3 Requested Assistance Details</li> </ul>	4 Dependents	5 Requirements	
6 Disbursement Method					
Click the "Add Requested Item" i	icon, select a category and provi	de a description and a dollar amount.		Add Requested Ite	:m
Requested item Category ↑	Requested Item Subcategory	Description		Amount	_
Basic Living Expenses	Food			\$100.00	۲
Rent/Mortgage	Mortgage			\$1,675.00	۲
Utilities	Electric/Gas			\$215.00	۲
Requested Total				\$1,990.00	
Selected Assistance Type * Standard Assistance					
Explanation of Hardship *					
PROVIDE CONCISE, FAC	TS-BASED INFORMATION TO H	IELP HQ UNDERSTAND YOUR SITUTATI	ONA		//
Previous Save and Con	tinue				

• Click on "Save and Continue".

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

### EMERGENCY ASSISTANCE APPLICATION

Requested Item Category Requested Item	
A CONTRACTOR CONTRACTOR	Amount
Basic Living Expenses Food	\$100.00
Rent/Mortgage Mortgage	\$1,675.00 Edit Requested Iten
Utilities Electric/Gas	\$215.00 Delete Requested it
Requested Total	\$1,990.00
elected Assistance Type *	
tandard Assistance	
xplanation of Hardship *	
PROVIDE CONCISE, FACTS-BASED INFORMATION TO HELP HQ UND	RSTAND YOUR SITUTATIONA

Previous Save and Continue



## EMERGENCY ASSISTANCE APPLICATION

Applicant Information	Military Member Information 🖌 3 Re	quested Assistance Details 🖌 4	Dependents 5 Requi	rements
6 Disbursement Method				
r each dependent, click "Add Dep	endent" and complete the Name, Relatio	nship, and Date of Birth fields. Conti	inue until all your depend	ents are listed. Add Dependent
	Relationship	Date of Birth	Age	
Name 个			1	



## EMERGENCY ASSISTANCE APPLICATION

ise attach each file individually by o	licking the blue text on the left side of the t	able and in the new window click the	choose file button to select you
Document Type ↓	Description	Status	Received Date
Mortgage Payment Bill/Lender Le	tter	Pending	[
Military ID (Front and Back)		Pending	
Leave and Earning Statement (LE	5)	Pending	[
Electric/Gas Invoice/Bill		Pending	
Budget		Pending	

• This is a list of all required documents (determined by your request) that must be attached before submitting application.

• If a budget is required, click on the blue "Budget" under Document Type and then click on the blue words "Budget Worksheet" to get to Excel spreadsheet. Complete the budget, save it, and then attach.

View details		×
Document Type * Budget Instructions If you are applying for emergency assistance, the budget is not requ	ry travel uired.	Î
There are no notes to display.		
Download the budget template an Budget Worksheet Accepted file types: jpeg, png, doo Choose Files No file chosen	nd upload the completed excel file below. c, docx, pdf, xslx *	
Submit		•

## 6. Disbursement Method

• Select your preferred method of disbursement: ZELLE or BANK ACH

## EMERGENCY ASSISTANCE APPLICATION

Applicant Information 🖌	2 Military Member Information 🖌	3 Requested Assistance Details 🖌	4 Dependents 🖌	5 Requirements 🖌
Disbursement Method				
Enroll today in the Zelle pay into your account! Click Her Disbursement Method *	ment platform to direct deposit appro e to learn more.	ved emergency assistance funds		
Zelle		~		
Zelle Identifier Type *				
		~		

• To use Zelle, you must have a stateside bank. The Zelle Identifier is either a stateside phone number (**entered without dashes**) or personal email synced to your bank account.

EM	IERGENO APPI	CY ASSIS		CE
Applicant Information 🖌	2 Military Member Information 🖌	3 Requested Assistance Details 🖌	4 Dependents 🖌	5 Requirements 🖌
Disbursement Method				
Enroll today in the Zelle pay into your account! Click Her Disbursement Method *	rment platform to direct deposit appro re to learn more.	ved emergency assistance funds		
Bank ACH		~		
Bank Name *				
Routing Number *				
Account Number *				
Verify Account Number *				
L				

- If Bank ACH elected, funds will be deposited directly into the bank account specified above.
- Once Disbursement Method has been entered and verified, click on Save and Continue

### Your application is complete.

### Only 2 more steps left before submitting it to AFAS HQ.

- 1. Please read the "Terms of Agreement" and then check the box indicating that you understand and accept the terms.
- 2. Click on your "Marketing Preferences".

Home > My Applications > Terms of Agreement



I hereby authorize the Department of the Air Force to supply the Air Force Aid Society with any requested information in connection with this assistance. I further authorize the Department of the Air Force, or any agency, to supply my latest home address, or duty assignment to the Air Force Aid Society whenever requested.

I understand that:

- the solicitation of this information is authorized by 10 USC 8012;
- the disclosure of this information on my application is voluntary;
- all information requested will be used only for determining eligibility for and administration of a loan;
   the failure to provide all requested information may result in disapproval on this application;
- these funds will not be used to fund an abortion or for any expenses related to an abortion to include travel;
- these funds will not replace funds lost by fines or garnishments;
- these funds will be used for the purpose requested;

I authorize the AFAS to investigate my credit record and, in the administration and collection of this loan, furnish information concerning this loan to National Credit Bureaus and others who may properly receive this information. I certify that the information provided on this application is complete, true, and correct.

larketing Preferences		
Allow Mail *	Allow Bulk Mail *	
● Allow ○ Do Not Allow	O Allow 🖲 Do Not Allow	
Allow Bulk Email *	Allow Soliciting *	
O Allow 🖲 Do Not Allow	O Allow 🖲 Do Not Allow	

- Once the above steps have been taken, click on the blue "Submit' button to send your application to AFAS HQ for processing.
- You will receive the following verification email:



#### HAVING PROBLEMS? CALL AFAS HQ AT 703-972-2604 FOR ASSISTANCE.

## WHAT HAPPENS NEXT?

- Your application will be assigned to an AFAS caseworker through our corporate office in Arlington, VA and will be triaged 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 reach you for additional information regarding your case.
- Also check your email as the caseworker may be sending you messages regarding your case.
- 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 below. You must return the document before AFAS can proceed with distribution of approved funds.



- Upon receipt of the signed document, funds will be disbursed in a timely manner either through Zelle or Bank ACH as requested by you.
- Monitor your bank account and call HQ AFAS at 703-972-2604 if issues arise.

## **RESETTING PASSWORD**

- Go to the "Sign In" tab
- Click on "Forgot your password?"

	Sign in Register			
	Welcome to our new Air Force Aid Society portal!			
	This is your one-stop shop to manage your relationship with the Air create your account and log in, you will be able to view your donation	r Force Aid Society on history, set-up	, the official charity and manage your re	supporting US Air
	emergency assistance, or manage your education or emergency as	sistance loans.		3 3. 4 - PP 3
	If this is your first time accessing the portal, please navigate to the	"Register" tab abo	we to set up your ac	count.
	If you have any issues please contact the following for support:			
	For issues with Donations, please contact the Donation Team: <u>donal</u> For issues applying for Education Assistance, please contact the Ed For issues applying for Emergency Assistance, please contact the E	<u>tions@afas-hq.org</u> lucation Team: <u>edi</u> mergency Assista	<u>ication@afas-hq.org</u> nce Team: <u>ea@afas-</u>	<u>hq.org</u>
	Sign In			
	Email			
	* Password			
		ŕ		
	aign in Porgot your password?			
<ul> <li>Entoryour of</li> </ul>	mail and click "Send".			

Forgot you	r Password or new to the system?
Enter your email address to	o request a password reset. If you do not receive an email please check your spam folder.
f you still do not receive ar	remail please contact one of the following for support:
For issues with Donations, For issues applying for Edu	please contact the Donation Team: <u>donations@afas-hq.org</u> ication Assistance, please contact the Education Team: <u>education@afas-hq.org</u>
Request a password	d reset
* Email	
	Extensible several address which we use when motion AFAC densities such in far Education funding and Extension. Asistenses

**NOTE:** It may take a few minutes to receive the following email to reset your password. (Check your spam folder if you do not see it in your inbox.)



A password reset was requested for your account. Please click the following link to start the password reset process.

• Click on link provided and enter new password, confirm new password, and click "Reset".

	AIR FORCE AID SOCIETY	Home	Ways To Give 👻	How We Help 👻	Our Impact 🗸	,
Reset passwo	ord					
	Ne	ew password				
	Confirm ne	ew password				_
			Reset			

- Screen appears showing password has been reset.
- To SIGN IN, close this browser and go to:

https://portal.afas.org/SignIn?returnUrl=%2Fea-eligibility%2F

**DO NOT** click on the blue "Sign In" button. It does not take you to the correct screen.



Sign in

### **CHANGING EMAIL/USERNAME**

- 1. Sign in to the AFAS portal.
- 2. Click on your name in the top right corner and select "Profile".



3. Enter your personal email in the Email/Username' box. (You will use this email to log in to the portal in the future.)

AIR FORCE AID SOCIETY	Home Ways To Give		Help +	Our Impact 🗸	Our Purpose 🗸	Contact 🗸
Home > Profile						
Profile						
lisa Donald	Please provide some inform username/primary email. Yo Your information	ation about yo u may not rece	urself. Ple elve impo	ase DO NOT use y rtant email notific	our ".mil" email add ations if you do so.	ress as your
	Title *			E-mail/Usern	ame	
Profile	AB	×	Q	lbarshall@	gmail.com	
Donation History	First Name *			Business Pho	one	
Recurring Donations	lisa			Provide a t	elephone number	
My Applications	Middle Name					
Security	Last Name *					
Change password	Donald					

4. Scroll down to the bottom of the Profile screen and click "Update".