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 on the digital signature box and instructions will open to configure your digital ID.



EDUCATION ASSISTANCE LOAN

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

The Air Force Aid Society is offering an interest-free loan to help offset education costs for families with dependents attending college that have been impacted financially by COVID-19 pandemic. Dependents should be enrolled in college as full-time undergraduate students. The maximum loan per student will be \$1000, repayable by allotment over 12 months.

AIR FORCE MEMBER APPLICATION INFORMATION:

Name of Air Force Member (Last, First, MI)		Grade	SSN	SSN		Status and DOS/Retirement Date: Active DOS: Retired Ret Date:
	T., 51					
Home Address (Street, City, State & Zip Code)	Home Phone		Com	plete Unit A	Address (If A	ctive Duty)
Email Address		Cell Phone	Duty Pho		Duty Phor	ne (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	St			ate	
Amount \$ (up to \$1,000)						
STUDENT #2 INFORMATION:						
Name of Student (Last, First, MI)		SSN			2020-2021 (Freshman	College Status Sophomore, Junior or Senior)
School Name	City	S			State	
Amount \$ (up to \$1,000)						
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IF MORE THAN 2 STUDENTS, ATTACH INFORMATION ON SEPARATE SHEET

MEMBER'S CERTIFICATION

I authorize the Air Force Aid Society to start an allotment to repay this interest-free 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 to repay this loan within the 12-month period.

Signature of Member

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