



ARMY FEE ASSISTANCE

Application Checklist for Department of Army Civilians

_____ Printed name of qualifying Army Sponsor

Assigned Army Post/Garrison: _____

If duty station is not on the Garrison, please provide place of duty: _____

Sponsor/Family Documents:

_____ **AFA Certification of Non-Availability – Army 2010-02**

_____ I am a geographically dispersed Sponsor – **Form is NOT REQUIRED**

_____ My child/children are Infant to Pre-School/Pre-K – **Form is MANDATORY**

_____ My child/children are School Age/Kindergarten and above – **Form is NOT REQUIRED**

_____ **Fee Assistance Family Application – Army 2014-01**

_____ Copy of your most recent Leave & Earnings Statement (LES)

_____ Copy of your most recent Federal Tax Return Form 1040

_____ Copy of your current **SF50 or DA Form 3434**

_____ Copy of the spouse/partner, to include unmarried legal parents/partners, most recent pay statement(s) or school schedule that reflect the following:

Full Time AFA:

- The past 4 consecutive weeks of employment that reflect an average of 25 hours or more per week
- Enrolled in 12 credit hours or more of undergraduate school
- Enrolled in 9 credit hours or more of graduate school

Part Time AFA:

- The past 4 consecutive weeks of employment that reflect a minimum of 16 and less than 25 hours per week
- Enrolled in 6 - 11 credit hours or more of undergraduate school
- Enrolled in 3 – 8 credit hours or more of graduate school

_____ **Certification for Seeking Employment or Enrolling in School – Army Form 2010-04 (if applicable)**

_____ Copy of your spouse/partner, to include unmarried legal parents/partners, most recent Federal Tax Return Form 1040, if applicable.

Choosing a Child Care Provider

Provider Name: _____

Provider Address: _____

City: _____ State: _____ Zip: _____

Contact Name/Phone Number of Provider: _____

_____ If the provider you have chosen is currently a qualifying Child Care Provider approved to participate in the Army Fee Assistance Program through the General Services Administration (GSA); your provider will submit the Family Enrollment Form CC 2014-06 directly to the GSA to complete your application.

_____ If you have a provider that is not currently participating in the Army Fee Assistance Program, please have the provider visit the GSA website http://financeweb.gsa.gov/childcare_portal_for_providers to begin the enrollment process, or they may contact the GSA via email at childcareprovider@gsa.gov or at (866) 508-0371 for an application packet.

_____ If you do not have a provider, please check here and the GSA Subsidy Administration Section will assist you in locating child care in your area.

The forms and documents listed above are required for a standard application. Please note that your situation and application may require additional documents and/or information.

Fax: (816) 823-5410

Scan and email to: army.childcare@gsa.gov

GSA Subsidy Administration Section
1500 E. Bannister Rd., Rm. 1061, KCMO 64131
Tel: (866) 508-0371 • Fax: (816) 823-5410
army.childcare@gsa.gov
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