

**AUTHORITY FOR TUITION ASSISTANCE – EDUCATION SERVICES – HQ AIR FORCE RESERVE**

**PRIVACY ACT STATEMENT AND AUTHORITY:** Privacy Act of 1974 as amended applies. This document may contain information which must be protected in accordance with DOD 5400.11R, AFI 33-129, and AFI 33-332, and it is for official use only.  
**AUTHORITY:** 10 U.S.C. 8013 and EO 9397.  
**PRINCIPAL PURPOSE:** To process an individual's request for Air Force Reserve tuition assistance. Use of SSN is necessary to make positive identification of the individual and records.  
**ROUTINE USES:** Records may be used for the purposes of ensuring enrollment and payment/billing information for statistical purposes.  
**DISCLOSURE IS VOLUNTARY:** Disclosure of SSN is voluntary; however, failure to provide the information required may result in disapproval of the individual's request for tuition assistance.

<b>LAST NAME, FIRST NAME, MIDDLE INITIAL:</b>	<b>RANK:</b>	<b>DOS:</b>	<b>SSAN:</b> ***
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<b>ORGANIZATION:</b> /	<b>DUTY PHONE:</b> /	<b>SCHOOL / UNIVERSITY:</b> UNIVERSITY OF NORTH DAKOTA
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COURSE DESCRIPTION	DATES	LVL	LOC	CREDIT TYPE	CREDITS	CREDIT COST	TOTAL FEES	GOV COST
		D	C	1	3	\$286.35	\$0.00	\$750.00

Check if VA Top-Up will be used

<b>TOTAL INSTRUCTIONAL FEES:</b> \$0.00	<b>TOTAL TUITION:</b>	<b>TOTAL GOVERNMENT COST:</b>	<b>TOTAL STUDENT COST:</b>
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**CONDITIONS**

I agree that no changes will be made in the above course(s) and for fee(s) or dollar amounts without the approval of the issuing education staff; otherwise, I will pay the difference to the Air Force and/or the school. I understand that the Air Force will pay 100% of my tuition and fees up to \$260 per SH and \$188.66 per QH. I understand that my annual fiscal year CAP is \$4600. I agree to pay the remaining amount and any other costs. IAW AFI 36-2849, I will reimburse the Total Government Cost above for non-completions, withdrawals, or unsatisfactory grades due to reasons within my control. I understand that it is my responsibility to ensure my grades are updated in the AF official system of record (AFAEMS/AFVEC). Grades that are 60 days past term end date are considered overdue and will prevent me from applying for TA and will result in reimbursement of TA. I hereby voluntarily authorize the amount to be withdrawn from my pay if it is determined that my failure to complete the course was not due to circumstances beyond my control. Collection of this debt will be in accordance with DoDFMR, Vol 7A, Chapter 50 and AFMAN 65-116, 70.21. I authorize the release of academic information (i.e. Course grades, degree/certification completion status etc.) by the above institution to the Air Force (PL 93-588). I agree to notify the education service office of degree completion or completion of 15 semester hour increments (or quarter hour equivalent) according to AFI 36-2849 for update of my military record. All policies and conditions in the AFI 36-2849 apply. I understand that this application does not guarantee that funds are available and that the United States Air Force has no obligation to fund this application until it has been approved (within 5 business days) by the Education Services Officer. I understand that TA for courses starting in the next fiscal year is conditional until the receipt of the TA funds. I agree (officers only) to an Air Force Reserve Service Commitment (RSC) for four years following the end of course(s) per AFRCI 36-2102. I understand that offers to repay tuition assistance after completing a course will not remove the RSC. Applicable policies and conditions in DoDI 1322.25 and AFI 36-2849 apply.

**INITIAL:**  I will inform my Commander and/or supervisor of my enrollment in the above course. If necessary, I will disenroll from the above course. I understand that withdrawing from a course after the term start date may result in a financial debt which may require me to reimburse the Air Force.

<b>SIGNATURE OF APPLICANT:</b> ** // DIGITALLY SIGNED BY :	<b>DATE:</b>
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**INITIAL:**  Approved. The applicant has been counseled and is considered qualified for the course. Eligibility is based on the certification above.

**DISAPPROVED BECAUSE:**

<b>SIGNATURE OF RESERVE EDUCATION AND TRAINING OFFICE REPRESENTATIVE:</b> ** // DIGITALLY APPROVED BY	<b>DATE:</b>
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**Submitting Invoices:**  
 Invoices must be submitted through the Academic Institutional (AI) Portal. If you do not have an AI Portal account, you may register by visiting <https://alportal.acc.af.mil/alportal>. If you need assistance submitting an invoice, please email [alportal@bamltech.net](mailto:alportal@bamltech.net) or call 334-617-6172.  
  
 Questions regarding payment of this tuition assistance document should be directed to AFRC/A1KE: [afrc.a1ke@us.af.mil](mailto:afrc.a1ke@us.af.mil) or call 478-327-0384.

**DOCUMENT INFORMATION:**



OFFICIAL

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