



“GIVE PARENTS A BREAK”

Certificate of Eligibility

_____ is eligible to receive child care under “Give Parents a Break”

Name of Sponsor/Spouse

Eligible from: _____ to: _____ at: _____
month/year month/year Installation

Name of Person Making Referral: _____

Referring Agency: (circle one)

- Military and Family Readiness Center
- First Sergeant
- Commander
- Chaplain
- Family Advocacy
- Doctor or other medical professional

Organization: _____ Phone Number: _____

Sponsor Name: _____ Rank: _____

Home/Cell Phone Number: _____ Work Phone: _____

Name(s) of Eligible Child(ren): _____ Age: _____

_____	_____
_____	_____
_____	_____
_____	_____

Signature of Person making Referral: _____

(Digital signature required)

Visit the Air Force Aid Society member portal by visiting <https://portal.afas.org> to apply for the GPAB program. Once logged in you can click on Apply for Community Programs and select Give Parents a Break. Please be sure to complete all required documents in the application within **30 days** of receiving this certificate of eligibility.

Call 703-972-2604 or email ea@afas-hq.org should you have additional questions regarding this certificate.