**Chapter 1**

**Introduction**

1-1. General. This procedure is created pursuant the Arkansas National Guard Foundation’s, hereinafter, “The Foundation,” By-Laws.

1-2. Purpose. The Foundation’s Board of Directors established the Survivor Outreach Services Fund to provide support to surviving family members of fallen service members in the State of Arkansas, regardless of branch or component. There are three types of support that are intended to be provided from this fund, (1) short term emergency financial assistance in the form of grants to surviving family members impacted by a crisis, (2) Educational assistance in the form of grants, loans, or scholarships to surviving dependents and spouse, (3) Support to programs that foster the unique bonds and sense of community that exists within the Survivor community across Arkansas

1-3. Funds are administered through accounts maintained by the ANGF. The Foundation will maintain all appropriate administrative files and information concerning the operation and processing of the business of these funds. The ANGF may fund its programs utilizing a mixture of government and private funds, or with the income from its various endowments.

1-4. Eligibility. The Foundation recognizes that there are conflicting definitions that are applied to survivor families. These definitions are sometimes limited to only surviving parents (Gold Star Mothers), other definitions include spouses, siblings, and dependent children. Some definitions limit recognition to only service members who were in a duty status at the time of their deaths. The Foundation recognized that many members of the National Guard and Reserve are not in a paid status at the time of their deaths. These conflicting definitions mean that there is a spectrum of support that ranges from the service member that passes while in combat operations, whose family receives significant financial support from the Department of Defense to a member who passes while on active duty or drill status but not in a combat zone, to the reserve component member who takes their own life in an off-duty status and whose surviving family members are often excluded from official support by the Department of Defense. The Foundation intends to ensure that the survivors of reserve component members receive the same support as that provided by the Foundation to a member who passed while in a paid duty status, therefore the Foundation defines Survivor as:

*“The primary next of kin, including parents, surviving spouses, (so long as they remain unmarried until the age 55), and children (during their minority) of armed services members who lose their lives during the term of their enlistment while serving regardless of military branch, duty status, or manner of death. Siblings of fallen service members are welcome at all Foundation sponsored events but are only eligible for financial support if there was a loco parent’s relationship”*

**Chapter 2**

**Emergency Assistance.**

2-1. General. The Foundation requests that applicants explore all resources (family, community service organizations, churches, etc.) before making application for emergency assistance. The Survivor may be referred to a financial counselor for additional financial counseling based on the recommendation of Emergency Assistance committee.

2-1. The requested financial assistance must be to solve a crisis. A crisis is defined as “an event beyond the control of the Survivor that requires assistance that is not available from any other reasonable source.” Additionally, the financial assistance should remedy a one-time problem, not an ongoing situation. If an applicant’s monthly cost of living notably exceeds their income, no one-time infusion of financial assistance will solve the problem.

2-2. Examples of situations that could qualify are:

1. Delay in receiving pay or reimbursement from the government
2. Temporary shelter, lodging or rent.
3. Emergency utility assistance, i.e., gas electric water.
4. Emergency transportation and vehicle repair.
5. Costs incurred for emergency travel due to death or hospitalization of immediate family member.
6. Emergency Home Repair
7. Any special circumstance as deemed appropriate by The Adjutant General.

2-3. Examples of things that would not typically qualify are:

1. Payment for nonessential items or services.
2. Payment for ordinary leave or vacation.
3. Payment of fines or legal expenses.
4. Liquidation or consolidation of debt.
5. Assistance with down payment on a home purchase or home improvements.
6. Funds to purchase, rent or lease a vehicle.

2-4. Application Procedures: The Survivors first step will normally be to contact a Survivor Outreach Services Coordinator. Survivors may also contact someone in the Family Readiness Office or local Family Assistance Center to assist in the process. Anyone who can act on the behalf of the Survivor may apply for assistance if they have a properly executed Power-of-Attorney and proof of identification. The Survivors in need, family member or Survivor Outreach Services Coordinator on the Survivors behalf will prepare an application and submit to request assistance. A SOS Coordinator will verify eligibility. The SOS Coordinator will provide the application electronically to the Executive Director of the Foundation.

2-5. Application contents. Applicants may be required to provide verifiable proof of the need and other supporting documents. ANGF Form 1001 will be used to apply. At a minimum, the following items should be needed: The request should contain, as a minimum:

a. A Department of Defense Form 1300,Report of Casualty, NGB Form 22, or other documentation that proves the Survivors entitlement in accordance with paragraph 1-4.

b. Description of the circumstances or events that caused the financial emergency.

c. Any other factors that establish the members family’s financial hardship.

d. The purpose or bills that the grant will be used for.

e. The amount requested.

f. Any explanation or attempt to remedy the situation by the Survivor or the lack of other options or resources (savings account, family assistance, other organizations); and

g. Name of the Survivor, names of the family member impacted if applicable, home address, and phone contact numbers.

h. Substantiating documents (car repair estimate, rental agreement, utility bill, etc.).

2-6. Type of Assistance Available. The amount of assistance will not exceed $2,500.00 in a 12-month period. Assistance is in the form of a grant. Upon approval, the funds may be paid to the Survivor or applicant or may be made payable direct to a creditor.

2-7. Application Processing. Once the Foundation Executive Director receives the application, there are three levels of approval depending on the size of the grant requested and the criteria under which the grant is requested:

1. Grants of up to $750, which fall within the criteria stated in Paragraph 2-2 above may be approved by the Executive Director. The Executive Director can choose to fund all or part of a grant request.
2. Grants of $750 to $1500, which fall within the criteria stated in Paragraph 2-2 above require review by the Foundation Emergency Assistance Approval Committee. These votes will normally be conducted electronically. The Committee can choose to fund all or part of a grant request.
3. Grants from $1500-$2500, or those that are an exception to the criteria stated in Paragraph 2-2 require approval by a majority vote of the Foundation Executive committee. These votes will normally be conducted electronically.
4. Once a determination is made, the Foundation Executive Director will arrange to make the appropriate payment to the Survivor’s Creditor and will maintain all appropriate records in the administration of this program.

2-8. SOS Emergency Assistance Approval Committee. The Adjutant General of the Arkansas National Guard will appoint members of the Foundation Emergency Assistance Approval Committee. The Committee is intended to be small to facilitate timely actions on requests for assistance. The Committee may conduct its proceedings in person, or electronically. Decisions will be made by a majority vote of the committee. Electronic voting is authorized. Recommended members of the committee include:

1. A Survivor Outreach Services Coordinator appointed by the State Family Programs Director
2. The Senior Enlisted Advisor to the Adjutant General.
3. The State Family Programs Director.
4. The State Full Time Support Chaplain
5. The Executive Director of the National Guard Association of Arkansas

2-9. Contact Information: Survivors in the State of Arkansas may contact the Executive Director of the Foundation at 501-758-6422 to receive more information about the Survivor Outreach Services Fund.

**Chapter 3.**

**Educational Assistance.**

3-1. General. The ANGF Survivor’s Educational Assistance is intended for the primary next of kin, including parents, surviving spouses, (so long as they remain unmarried until the age 55), and children up to age 23 of armed services members who lose their lives during the term of their enlistment while serving regardless of military branch, duty status, or manner of death. Siblings of fallen service members are only eligible for financial support if there was a loco parent’s relationship.

3-1. Qualified Educational Programs. The award can be used at private universities, state colleges, community colleges, vocational and technical training as well as career institutions. To receive assistance, the Survivor must be:

1. enrolled or planning to be enrolled in an undergraduate program leading to a bachelor’s degree
2. attending an accredited college or university, or
3. enrolled in an accredited technical or trade school program which results in a certificate or diploma if they don’t already have a bachelor’s degree.

3-2. Covered Costs. The award will be used to subsidize the costs of tuition, schoolbooks, fees, on-campus room and board, and approved education and tutoring as well as other expenses.

3-3. Application Deadline. Applications must be received by 1 May each year. Award Recipients will normally be announced by 1 July and announced by the ANGF on the Foundation Website.

3-4. The Foundation Board of Directors will determine the size and number of Scholarships that will be awarded annually as part of its annual budget process.

3-5. Survivors will apply for Survivor’s Educational Assistance using ANGF Form 1002.

3-6. The ANGF Scholarship Committee will review and score the scholarship applications, establish an order of merit list, and provide the list of Scholarship Winners to the Foundation President.

3-7. The ANGF Executive Director will track enrollment status of all scholarship winners and ensure that checks are issued to the appropriate winners or their school/college.

**Chapter 4.**

**Survivor Support Programs.**

4-1. General.The Foundation supports to programs that foster the unique bonds and sense of community that exists within the Survivor community across Arkansas.

4-2. The Foundation may fund programs conducted by Survivor Outreach Services or organizations that partner with SOS.

4-3. The Foundation recognizes that not all support organizations accept the same definition of Survivor or Gold Star family members. The Foundation hopes to sponsor events that are open to all Survivors, including the Survivors associated with members of the reserve who were not in a paid status at the time of their death. This definition includes the Survivors of reservist who died by suicide while not on duty status.

4-4. Support Organizations may submit mini grant utilizing ANGF Form 1003. These mini grant request should specify the following details about the event that the Foundation is requested to support.

1. Name, Tax Status, and Point of Contact for the Partner Organization.
2. Date, Time, and Location of the Event.
3. A Brief Summary of the Even to be Sponsored.
4. Number of Survivors that will be served
5. Definition of Survivor used by the partner organization.
6. Amount of Support that is requested.

**Chapter 5.**

**Partner Organizations.**

5-1. The following is a list of organization that ANGF has TBP partnered with in the past or with whom the Foundation has an ongoing relationship.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Organization Name | Point of Contact | Email | Phone Number | Tax Status |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |