CHILD ANNUITANT'S SCHOOL CERTIFICATION

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The public reporting burden for this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ORGANIZATION. RETURN COMPLETED FORM TO: Defense Finance and Accounting Service, US Military Annuitant Pay, 8899 E. 56th Street, Indianapolis, IN 46249-1300. PLEASE REMEMBER TO SIGN YOUR FORM.

PRIVACY ACT STATEMENT

AUTHORITY: 10 U.S.C. Section 1435, Eligible Beneficiaries and Section 1447; Definitions; and E.O. 9397.

PRINCIPAL PURPOSE(S): The Defense Finance and Accounting Services (DFAS) uses this information to determine the continued eligibility of child annuitants who are receiving annuity payments from the Survivor Benefit Plan (SBP) or the Retired Serviceman's Family Protection Plan. Once the child annuitant reaches age 18, it must be verified that the child is attending a qualifying school on a full time basis in order to be entitled to annuity payments. The SORN covered by this system is T7347b (**http://dpcld.defense.gov/Privacy/SORNsIndex/DOD-wide-DORN-Article-View/Article/570196/t7347b/**). The PIA is located at **http://www.dfas.mil/foia/privacyimpactassessments.html**.

ROUTINE USE(S): In addition to those disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act, these records, or information contained therein, may specifically be disclosed outside the DoD as a routine use pursuant to 5 U.S.C. 552a(b)(3) as follows: to the Internal Revenue Service, the Department of Veterans Affairs, or trustees or guardians of survivors (children). It may also be disclosed for any of the "Blanket Routine Uses" as published at the beginning of the DFAS compilation of systems of record notices.

DISCLOSURE: Voluntary; however, if DFAS does not receive this information, the annuity payments will stop.

WARNING

Any intentionally false statement, willful concealment of material fact, or use of a writing or document knowing the same to contain a false, fictitious, or fraudulent statement or entry, is a violation of the law punishable by a fine of not more than $10,000 or imprisonment of not more than 5 years, or both. (18 U.S.C. 1001)

SECTION I – ANNUITANT/STUDENT IDENTIFICATION INFORMATION

1. DECEASED MEMBER'S SSN/DODID	2. DECEASED MEMBER'S NAME *(Last, First, Middle)*
3. ANNUITANT'S SSN/DODID	4. ANNUITANT'S NAME *(Last, First, Middle)*

5. IF UNDER AGE OF MAJORITY, NAME OF PARENT/LEGAL GUARDIAN: *(Or Legal Representative As Applicable.)*	6. PARENT/LEGAL GUARDIAN OR LEGAL REPRESENTATIVE MAILING ADDRESS: *(If Applicable)*

7. DATE OF BIRTH (*YYYYMMDD*)	8. ARE YOU MARRIED? *(X one. If YES, attach copy of marriage certificate.)*
	☐ YES ☐ NO DATE OF MARRIAGE (*MM/DD/YY*)

SECTION II – CURRENT ANNUITANT/STUDENT VERIFICATION

1. ARE YOU CURRENTLY ENROLLED IN A SCHOOL ON A FULL TIME BASIS? *(X one)*

☐ **YES** *(Continue to number 2)* ☐ **NO** *(Skip to 5)*

Note: It is the annuitant's responsibility to ensure that his/her academic workload level meets the school's definition of full time.

2. TYPE OF EDUCATIONAL INSTITUTION:

☐ HIGH SCHOOL ☐ TRADE SCHOOL ☐ TECHNICAL INSTITUTE ☐ JUNIOR COLLEGE
☐ COLLEGE/UNIVERSITY ☐ VOCATIONAL INSTITUTE ☐ OTHER *(Specify)*

3. SHOW THE TOTAL SCHOOL HOURS PER WEEK:

A. IF COLLEGE OR EQUIVALENT, SHOW CREDIT HOURS _____

B. IF HIGH SCHOOL OR EQUIVALENT, SHOW ACTUAL CLOCK HOURS _____

C. IF IN A WORK-STUDY PROGRAM SPONSORED BY THE SCHOOL, SHOW HOURS AT WORK _____

HOURS AT SCHOOL _____

4.A. NAME OF SCHOOL

B. MAILING ADDRESS *(Including ZIP Code)*	C. ENTER DATE SCHOOL YEAR BEGAN OR IS EXPECTED TO BEGIN *(MM/DD/YYYY)*	D. ENTER DATE SCHOOL YEAR ENDS OR IS EXPECTED TO END *(MM/DD/YYYY)*

5. IF NOT CURRENTLY ATTENDING SCHOOL ON A FULL-TIME BASIS:

A. NAME OF LAST SCHOOL ATTENDED	B. DATE LAST ATTENDED SCHOOL (*MM/DD/YY*)

SECTION III – FUTURE INTENT TO ATTEND or CONTINUE TO ATTEND SCHOOL ON A FULL-TIME BASIS

1. AFTER THE END OF THE CURRENT SCHOOL YEAR, DO YOU INTEND TO ENROLL OR CONTINUE AS A FULL TIME STUDENT WITH LESS THAN A 150 day *(5 months)* **BREAK BETWEEN SCHOOL YEARS?**

☐ **YES** *(Continue to 2.A.)* ☐ **NO** *(Skip to Section IV)* ☐ **UNDECIDED** *(Skip to Section IV)*

2.A. NAME OF SCHOOL

B. MAILING ADDRESS *(Including ZIP Code)*	**C. APPROXIMATE DATE SCHOOL YEAR WILL BEGIN** (*MM/DD/YY*)	**D. APPROXIMATE DATE SCHOOL YEAR WILL END** (*MM/DD/YY*)

SECTION IV – SIGNATURE OF STUDENT PAYEE *(OR PARENT/LEGAL GUARDIAN or LEGAL REPRESENTATIVE, IF APPLICABLE)*

I certify that all information given in this certification is true and correct to the best of my knowledge and belief. I understand that I must immediately notify the Defense Finance and Accounting Service (DFAS) if I, as the annuitant/student transfer to another school, discontinue school attendance, reduce attendance to less than full-time or enter into a marriage. I further confirm that I fully understand that I am not entitled to annuity benefits unless I am attending a qualifying school on a full time basis (except for certain authorized school breaks). If I receive annuity payments for periods when I was not attending a qualifying school on a full time basis, I will be responsible for repaying those annuity payments.

SIGNATURE OF ANNUITANT OR (LEGAL REPRESENTATIVE)	**EMAIL ADDRESS**	**DAYTIME TELEPHONE NUMBER**	**DATE** (*MM/DD/YY*)

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DISCLOSURE: Voluntary; however, if DFAS does not receive this information, the annuity payments will stop.

INSTRUCTIONS

GENERAL

1. Read these instructions and Privacy Act Statement carefully before completing the data form.

2. The Defense Finance and Accounting Service (DFAS) - Cleveland will establish your current eligibility and annuity payments based on the data provided on the form.

3. Ensure that you promptly advise DFAS if you transfer to another school, discontinue school attendance, reduce attendance to less than full-time or enter into a marriage or if there are any changes to your correspondence address, contact information or direct deposit information.

4. Submit completed form by mail to: Defense Finance and Accounting Service, U.S. Military Annuitant Pay, 8899 E. 56th Street, Indianapolis, IN 46249-1300; by fax: 800-982-8459; or online: https://go.usa.gov/xymaH

SECTION I - ANNUITANT/STUDENT IDENTIFICATION INFORMATION

ITEMS 1, 2, 3, 4, 5, 6. Self-explanatory.

ITEM 7. Enter date of birth. A child whose 22nd birthday occurs before July 1st or after August 31st of a calendar year, and while regularly pursuing such a course of study or training, is considered to have become 22 years of age on the first day of July after that birthday.

ITEM 8. Child eligibility to receive annuity payments terminates by marriage of the child, regardless of whether the child is an incapacitated child entering into a valid marriage with another incapacitated individual. The termination of a child's marriage by death or divorce does not serve as a basis for reinstating annuity payments, regardless of school attendance. An annulment of the child's marriage which renders the marriage void or invalid, or a judicial decree by a court of competent jurisdiction declaring the marriage void, may serve as a basis for reinstating annuity payments.

SECTION II - CURRENT ANNUITANT/STUDENT VERIFICATION

ITEM 1. The term full-time student is an enrolled student who is carrying a full-time academic workload, as determined by the institution, under a standard applicable to all students enrolled in a particular educational program. It is the annuitant's responsibility to ensure that his/her academic workload level meets the school's definition of full time.

A recognized educational institution is a school that is accredited, has an educational faculty, and requires study or training to be done at the school. Included are: high schools, trade schools, technical or vocational institutes, business schools, junior colleges, Government service academies (for example, U.S. Naval Academy), and colleges, universities, or comparably recognized educational institutions.

The student's workload may include any combination of courses, work, research, or special studies that the institution considers sufficient to classify the student as a full-time student. However, for an undergraduate student, an institution's minimum standard must equal or exceed one of the following minimum requirements:

(1) For a program that measures progress in credit hours and uses standard terms (semesters, trimesters, or quarters), 12 semester hours or 12 quarter hours per academic term.

(2) For a program that measures progress in credit hours and does not use terms, 24 semester hours or 36 quarter hours over the weeks of instructional time in the academic year, or the prorated equivalent if the program is less than one academic year.

(3) For correspondence coursework, a full-time course load must be:

(i) Commensurate with the full-time definitions listed in paragraphs (1) through (2) of this definition; and

(ii) At least one-half of the coursework must be made up of non-correspondence coursework that meets one-half of the institution's requirement for full-time students.

(4) Vocational or technical schools generally require that students make this schooling their principal activity. This means that the student spends as much as 40 clock hours each week in activities related directly to training in the school. Normally, the activities take place at school.

ITEMS 2, 3. Self-explanatory.

ITEMS 4.A, 4.B. Self-explanatory.

ITEM 4.C. Enter date of the beginning of school year that annuity is being claimed for.

ITEM 4.D. Enter date of end of the school year that annuity is being claimed for.

ITEM 5. Child annuity payments eligibility terminates for school nonattendance.

SECTION III - FUTURE INTENT TO ATTEND or CONTINUE TO ATTEND SCHOOL ON A FULL-TIME BASIS

ITEM 1. A break in attending a recognized educational institution for over 150 days may result in suspension of the annuity payments. Resuming full-time attendance may serve as a basis for reinstating annuity payments.

ITEM 2.A,2.B. Self-explanatory

ITEM 2.C. To the best of your knowledge, provide date of the beginning of school year that future annuity payments will be claimed for.

ITEM 2.D. To the best of your knowledge, provide date of the end of school year that future annuity payments will be claimed for.

SECTION IV – SIGNATURE OF ANNUITANT/STUDENT or (LEGAL REPRESENTATIVE)

Child Annuitant's School Certification form is only valid if signed by annuitant or legal representative. Any person who knowingly presents a false or fraudulent claim for payment of benefit or knowingly presents false information in an application for an annuity may be subject to severe criminal penalties. If you have any questions about your eligibility for an annuity, you should consult a customer care representatives at 800-321-1080 or by writing to U.S. Military Annuitant Pay, 8899 E. 56th Street, Indianapolis, IN 46249-1300 before signing this form.