AF Form 4380, AIR FORCE SPECIAL NEEDS SCREENER

This form is an accession requirement to be completed by <u>ALL</u> HPSP, FAP, and deferred applicants. <u>Complete the form even if you do not have any dependents.</u>

The Air Force makes an effort to ensure specialized medical and educational services are available for all military family members. In order to help us do this, we need to know if any special medical and/or educational needs exist for your family members. This form will help to ensure that, if necessary, your family receives continuity of any specialized care they require if you are selected for an active duty training location.

Note: The questions on the form should be answered only for dependent family members that will relocate with you to training.

This form must be uploaded into MODS as part of your application package. The form does not affect the scoring of your application package and will only be coordinated with the Air Force Programs for Families with Special Needs if you are selected for an active duty program and if you answer yes to any questions.

If necessary, the Air Force Programs for Families with Special Needs will contact you for additional information and will assist coordinating relocations for families who have specialized medical or educational needs.

Please ensure that you sign and date the form.