

# Army Family Action Plan (AFAP) Issue Submission Form

[For use of this form see USAR Reg 608-1; the proponent agency is the USAR Family Programs Directorate.]

## PRIVACY ACT ADVISORY STATEMENT

**AUTHORITY:** Title 10, U.S. Code Annotated, Section 3013.

**PRINCIPAL PURPOSE:** Used to submit recommendations or complaints in order to improve the program.

**ROUTINE USES:** To report program deficiencies and suggest improvements.

**PROVIDING THE INFORMATION:** Providing your name and home phone number are voluntary.

**Issue title:** (*WHAT is the problem/issue/concern?* -- Use a few words to describe it.)

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**Scope:** (*WHY is the issue a problem? WHO does it affect?*)

**Recommendation(s):** (*WHAT should be done to fix it?*)

1.

2.

3.

**Submitter's name and phone number:** (*Optional*)

[*This information provides a way to contact you for more information and to let you know the status of the*

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Name

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Phone Number

**Unit name and telephone number:** (*Submitting the issue*)

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Unit Name

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Phone Number

## Forward Issue to:

AFTB/AFAP Program Specialist (go to [www.arfp.org/afap](http://www.arfp.org/afap) to find the Staff Locator)