



BJA

Bureau of Justice Assistance
U.S. Department of Justice

PUBLIC SAFETY OFFICERS' BENEFITS PROGRAM

Claim for Education Benefits

Pre-Screen

This file contains an example of the online application you will fill out for the Claim for Death Benefits. This information is provided as a reference tool only and it is not intended to be submitted. If you would like to proceed with the on-line application, please create a User Account.

PUBLIC SAFETY OFFICERS' BENEFITS PROGRAM

Claim for Education Benefits – Pre-Screen



How to Apply for Public Safety Officers' Educational Assistance (PSOEA) Program Benefits

Eligibility for PSOEA Benefits:

- Spouses or children of Public Safety Officers whose PSOB death or disability claims have previously been approved are eligible to apply for PSOEA benefits. As a PSOEA applicant, there MUST have been a previously approved PSOB death or disability claim for the applicable Public Safety Officer.
- Public Safety Officers' children are no longer eligible for assistance after their 27th birthday, absent a finding of extraordinary circumstances by the Attorney General.
- Assistance under the PSOEA Program is available for 45 months of full-time education or training or for a proportional period of time for a part-time program.

Application Instructions for PSOB Education Benefits:

STEP 1:

To begin your benefits application for the Public Safety Officers' Educational Assistance (PSOEA) Program, you must first complete the Education Benefits Prescreen. After clicking the "Prescreen" link below, you will be asked to provide the minimally required materials needed to confirm your eligibility for benefits prior to beginning your Education Benefits Application.

Prescreen ►

STEP 2:

After submitting your Prescreen and receiving notice that your form has been accepted, you will be granted access to complete the Education Application. To check the status of your Prescreen or to begin your Application/Term(s), navigate to [MyPSOB](#).

The BJA PSOB Office is honored to review the nearly 900 claims submitted each year on behalf of America's fallen and catastrophically disabled public safety heroes and their loved ones.



If you have questions about PSOB Benefits or wish to speak to a Customer Resource Center Representative, call 1-888-744-6513 between 8:00 a.m. - 4:30 p.m. Eastern Standard Time, or send a message to the PSOB Customer Resource Center using [Messages](#) in [MyPSOB](#).



Privacy Act Notice

Authority: 34 U.S.C. subtit. I, ch. 101, subch. XI, 42 U.S.C. 3796, and 44 U.S.C. 3103

Purpose: The information you submit in your claim is for official use by the U.S. Department of Justice for the purpose of determining your eligibility for, and the amount of, the benefit you may receive under your claim to the Public Safety Officers' Benefits Program and for the purpose of managing this Program.

Routine Uses: Information you submit regarding your claim may be disclosed by the Department of Justice only in accordance with the provisions of the Privacy Act, and for the routine uses indicated below:

- (a) To State and local agencies to verify and certify eligibility for benefits.
- (b) To researchers for the purpose of researching the cause and prevention of public safety officer line of duty deaths.
- (c) To appropriate Federal agencies to coordinate benefits paid under similar programs.
- (d) In a proceeding before a court or adjudicative body before which the OJP is authorized to appear, when i. The OJP, or any subdivision thereof, or ii. Any employee of the OJP in his or her official capacity, or iii. Any employee of the OJP in his or her individual capacity, where the Department of Justice has agreed to represent the employee, or iv. The United States, where the OJP determines that the litigation is likely to affect it or any of its subdivisions, is a party to litigation or has an interest in litigation and such records are determined by the OJP to be arguably relevant to the litigation.
- (e) To the news media and the public pursuant to 28 CFR 50.2 may be made available from systems of records maintained by the Department of Justice unless it is determined that release of the specific information in the context of a particular case would constitute an unwarranted invasion of personal privacy.

PUBLIC SAFETY OFFICERS' BENEFITS PROGRAM

Claim for Education Benefits – Pre-Screen



(f) To the National Archives and Records Administration (NARA) and to the General Services Administration in records management inspections conducted under the authority of 44 U.S.C. 2904 and 2906.

(g) To a Member of Congress or staff acting upon the Member's behalf when the Member or staff requests the information on behalf of and at the request of the individual who is the subject of the record.

(h) Pursuant to subsection (b)(3) of the Privacy Act, the Department of Justice may disclose relevant and necessary information to a former employee of the Department for purposes of: responding to an official inquiry by a federal, state, or local government entity or professional licensing authority, in accordance with applicable Department regulations; or facilitating communications with a former employee that may be necessary for personnel-related or other official purposes where the Department requires information and/or consultation assistance from the former employee regarding a matter within that person's former area of responsibility.

(i) To appropriate agencies, entities, and persons when (1) The Department suspects or has confirmed that there has been a breach of the system of records; (2) the Department has determined that as a result of the suspected or confirmed breach there is a risk of harm to individuals, DOJ (including its information systems, programs, and operations), the Federal Government, or national security; and (3) the disclosure made to such agencies, entities, and persons is reasonably necessary to assist in connection with the Department's efforts to respond to the suspected or confirmed breach or to prevent, minimize, or remedy such harm.

Effect: While providing this information is voluntary, failing to provide information may result in delays in processing or a claim being denied based on insufficient evidence.



Web Privacy Policy Notice

Pursuant to OMB 17-06, *Policies for Federal Agency Public Websites and Digital Services*, “agencies must post a link to [their] website’s Privacy Policy on any known, major entry points to the website as well as any webpage that collects PII.” OMB 17-06, *Policies for Federal Agency Public Websites and Digital Services*, Section 6, B. The PSOB 2.0 webpage will collect PII. Accordingly, OJP must add a link within the PSOB 2.0 webpage to the DOJ Privacy Policy pursuant to OMB 17-06, Section 6, B. OPCL recommends the following language under the Privacy Act Statement above: The Bureau of Justice Assistance, Office of Justice Programs will collect, process, disclose, and store your personal information that you submit through this online portal with the U.S. Department of Justice (DOJ) Privacy Policy and as stated on the Privacy Act Statement above. Your online submission of personally identifiable information constitutes your agreement to the DOJ Privacy Policy.

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In which capacity are you filing for education benefits?

Filing type *

- Student
- Student's Parent
- Authorized Representative
- Other (please describe)

If "other" selected, describe your filing type:

Next/Save



If filing as Student's Parent, Authorized Representative, or Other

Parent, Authorized Representative, or "Other" Information

Parent, Authorized Representative, or "Other" Prefix

Describe "other" here

Parent, Authorized Representative, or "Other" First Name *

Parent, Authorized Representative, or "Other" Last Name *

Parent, Authorized Representative, or "Other" Suffix

Parent, Authorized Representative, or "Other" Phone Number *

Parent, Authorized Representative, or "Other" Alternate Phone Number

Parent, Authorized Representative, or "Other" Email Address *

Previous

Next/Save

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Claim for Education Benefits – Pre-Screen



Enter the Student Information

Student Prefix

Describe "other" here

Student First Name *

Student Last Name *

Student Suffix

Student Date of Birth *

Student Phone Number *

Student Alternate Phone Number

Student Email Address *

Previous

Next/Save



Primary Contact Information

Are you the primary contact person for all matters related to the PSOE A Program? *

Yes No

Previous

Next/Save

PUBLIC SAFETY OFFICERS' BENEFITS PROGRAM

Claim for Education Benefits – Pre-Screen



If 'No'

Enter the Primary Contact Information

Primary Contact Person Prefix

Describe "other" here

Primary Contact Person First Name *

Primary Contact Person Last Name *

Primary Contact Person Suffix

Primary Contact Person Phone Number *

Primary Contact Person Alternate Phone Number

Primary Contact Person Email Address *

Previous

Next/Save



Student's Record of Education

Add information about your program of study at an institution of higher education (type of school, dates attended, etc...)

[Add School](#)

Name of School ↑	School State	Type of School	Dates Attended From	Dates Attended To	Degree/Certification Attempting or Achieved	Graduation or Expected Graduation Date
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There are no records to display.

[Previous](#)

[Next/Save](#)

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Claim for Education Benefits – Pre-Screen



Enter the Public Safety Officer's information

Prefix

Describe "other" here

Public Safety Officer First Name *

Public Safety Officer Last Name *

Public Safety Officer Suffix

Public Safety Officer's Employing Agency Name *

Public Safety Officer Date of Death or Injury

Was there an approved Death or Disability Claim?

- Yes No I don't know

Which type of claim was the approved claim?

Enter PSOB Death or Disability claim number, if known.

What is the Student's relationship to the Public Safety Officer? *

- Spouse
 Child
 Other (please describe)

Describe "other" here:

Previous

Next/Save



83%

PRESCREEN PREVIEW

Please Review and Confirm

The following is a summary of the information you have entered. Please review and make any necessary changes to this page before submitting your education Prescreen.

Previous

Next/Save

Required Documents

Based on your responses, a customized checklist has been generated. The following required documents must be uploaded for the Prescreen to be considered complete. If you have any questions, please contact the PSOB Customer Resource Center at 1-888-744-6513 between 8:00 a.m. - 4:30 p.m. Eastern Standard Time, or send a message using [Messages](#) in [MyPSOB](#).

Upload	Document Type ↑	Association	Date Requested ↑	Date Uploaded	Review Status	Instructions	Missing Document Justification
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Previous

Next/Save



87%

FINAL REVIEW FORM

Education Prescreen

OMB Form 1121-0220, Form Expiration Date: 10/31/2020

Please Review and Confirm

This final review form serves as the version of the Prescreen you are about to submit. If you wish to make edits, return to the editable preview screen to do so.

Previous

Next/Save

Public Safety Officers' Educational Assistance (PSOEA) Prescreen Successfully Submitted

You have successfully submitted your Education Benefits Prescreen, the initial step in applying for PSOEA Program Benefits.

An Education Specialist will review your Prescreen to confirm eligibility to apply. After submitting your Prescreen and receiving confirmation to apply, you will be granted access to complete the Public Safety Officers Education Benefits Application.

If you have questions about your Education Benefits Prescreen or any of the subsequent steps in filing for these benefits, please do not hesitate to call the PSOB Customer Resource Center at 1-888-744-6513 Monday through Friday between 8:00 AM and 4:30 PM Eastern Standard Time, or send a message using [Messages in MyPSOB](#).

