



DEPARTMENT OF THE AIR FORCE
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MEMORANDUM FOR DISTRIBUTION C
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FROM: SAF/MR
1660 Air Force Pentagon
Washington, DC 20330-1040

SUBJECT: Department of the Air Force Guidance Memorandum on Assisted Reproductive Technology (ART) Treatment

By order of the Secretary of the Air Force, this Department of the Air Force Guidance Memorandum (DAFGM) precedes a to-be published Manpower, Personnel and Services publication. It provides guidance on eligibility and criteria for requesting deferment from an assignment, deployment, and if necessary, TDY, while undergoing ART treatment (Attachment 1). Compliance with this guidance memorandum is mandatory. To the extent the guidance memorandum's directions are inconsistent with other Department of the Air Force publications, the information herein prevails, in accordance with DAFMAN 90-161, *Publishing Processes and Procedures*.

This guidance memorandum implements Department of the Air Force Policy Directive 36-21, *Utilization and Classification of Military Personnel*, and applies to uniformed members of the Regular Air Force and United States Space Force. If you have any questions, please contact the AFPC Contact Center at 800-525-0102/DSN 665-5000.

Ensure all records created as a result of processes prescribed in this publication are maintained in accordance with AFI 33-322, *Records Management and Information Governance Program*, and disposed of in accordance with the Air Force Records Disposition Schedule located in the Air Force Records Management System.

This memorandum becomes void after one year has elapsed from the date of this memorandum, or upon incorporation by interim change to, or upon publishing of a new publication permanently establishing this guidance, whichever is earlier.

GWENDOLYN R. DeFILIPPI, SES, DAF
Principal Deputy Assistant Secretary of the
Air Force for Manpower and Reserve Affairs

Attachment:
Attachment 1

Attachment 1

1.1. General Information. DAF has initiated a 2-year pilot program that aims to provide stability for service members (or their spouses) who are currently undergoing Assisted Reproductive Technology (ART) treatment. The intent of the program is to foster an environment that enables treatment success without hindering the career progression of the service member(s).

1.1.1. Undergoing ART treatment is defined as a service member (or their spouse) who is seeking medical assistance to conceive a child. ART treatment can involve various procedures, such as in vitro fertilization, intrauterine insemination, or ART medications, aimed at increasing the chances of conception. These treatments are often pursued by couples or individuals who face challenges such as infertility, hormonal imbalances, or other reasons affecting their ability to conceive a child. For these purposes, the start date of care is after initial consultation when a treatment plan has been agreed on by a licensed health care provider and the patient(s). A licensed health care provider must certify an active treatment plan is in place and the member is undergoing ART treatment.

1.1.2. The program will defer a member from assignments, deployments, and if necessary TDYs, for a period of 12 months. Refer to **paragraph 1.4.3** for TDY guidance.

1.1.3. Reassignment to initiate, continue, or complete ART healthcare treatments is not authorized.

1.2. Eligibility Criteria.

1.2.1. Applies to members of the RegAF and USSF.

1.2.2. Deferment for ART healthcare treatments may be granted to the service member and/or their spouse at their current permanent duty station (PDS), including civilian spouses and dual military couples.

1.2.3. Service members who are on the vulnerable to move list (VML) and have an assignment selection date are eligible to apply for deferment.

1.3. Ineligible Members.

1.3.1. Service members with authenticated orders that are within 6 months of the report no later than date are not eligible to apply for deferment.

1.3.2. Service members tasked for deployment are not eligible to apply for deferment.

1.4. Procedures. The ART treatment deferment will initially preclude a service member from assignment, deployments, and TDYs for the first 12 months. The service member may apply for an additional 12-month extension, subject to approval on a case-by-case basis. Although extensions can be non-consecutive, the total duration of deferment cannot exceed 24 months throughout a service member's career.

1.4.1. Dual Military Couples. If approved, both service members will be granted concurrent 12-month deferments. Each may request concurrent 12-month extensions, which will be assessed on a case-by-case basis. Refer to paragraph 1.4 for the total duration of deferment.

1.4.2. Expiration. An approved ART treatment deferment expires after 12 months (unless an extension is submitted and approved), at cessation of ART treatment, or upon confirmation of a pregnancy (an AF Form 469, *Duty Limiting Condition Report*, for the service member), whichever is sooner.

1.4.3. During the deferment period, commanders have the discretion to authorize TDYs based on individual circumstances, without necessitating the removal of the Assignment Availability Code (AAC) 30.

1.4.4. Service members who have been granted an ART treatment deferment have the option to request to terminate the deferment. This process involves a discussion between service members and their commander to evaluate all relevant factors. These factors may include the impact on the family or ART treatment, among others. Following the discussion, if a service member decides to proceed with ending their deferment, the member must contact AFPC/DPFXAA to have the AAC 30 removed.

1.5. Application Procedures. Deferment of a family for ART healthcare treatment will be processed as an exception to policy (ETP) under the Humanitarian Assignment and Deferment Program (**Attachment 15**).

1.5.1. An application for the ART treatment deferment may be submitted, along with all required documentation, through the Virtual Military Personnel Flight System (vMPF) to the unit commander for endorsement. The unit commander will provide their concurrence or nonconcurrence and include any pertinent information that may support the final decision. It is essential that any recommendations for disapproval are thoroughly justified. Following this, the application will be sent to AFPC/DPFXAA for additional processing.

1.5.2. In order to support a request for an ART treatment deferment, the following documentation must be provided: a letter from a licensed health care provider (such as a Primary Care Manager (PCM), reproductive endocrinologist, or obstetrician-gynecologist (OB-GYN)) confirming that the service member and/or their spouse is currently undergoing ART treatment, and specifying the start date of care. If the ETP is approved, the service member will be precluded from assignments, deployment, and TDYs (except as authorized in **paragraph 1.4.3**). An ETP is granted for 12 months from the start date of care or the ETP approval date, whichever occurs later. Extensions may be granted for up to 12 additional months, but will not exceed 24 months in a service member's career.

1.5.3. Dual Military Couples. A joint spouse intent letter must be included with the application in order to consider the spouse for inclusion in the deferment action. If the spouse is a member of another Military Service, the member will need to follow their respective Military Service's policy on deferments for ART treatments. If the other Military Service denies deferment for their service member, AFPC/DPFXAA will consider the Airman's or Guardian's request on an individual basis.

1.5.4. Approval Authority.

1.5.4.1. AFPC/DPFXAA is the approval authority for USAF members in the grade of Lt Col/O-5 (and below) except judge advocates, warrant officers, and SMSgt/E-8 (and below).

1.5.4.2. USSF/ETMO is the approval authority for USSF members in the grade of Lt Col/O-5 (and below) and MSgt/E-7 (and below).

1.5.4.3. AF/A1LG, AF/A1LO, AF/A1LE, AF/JAX and SF/S1L are the approval authorities for members in the grade of Brig Gen and above/O-7 to O-10, Col/O-6, CMSgt/E-9, judge advocates, and USSF SMSgt and above/E-8 to E-9. While requests are submitted initially to AFPC/DPFXAA, the final approval authorities are AF/A1LG, AF/A1LO, AF/A1LE, AF/JAX and SF/S1L, respectively.

1.5.4.4. A request for ART treatment deferment cannot be approved or denied at a lower level. Unit commanders can only concur or non-concur with the request, and may provide additional information that can assist the approval authority in making a fair decision. It is important that any recommendations for disapproval are supported by sufficient justification.