

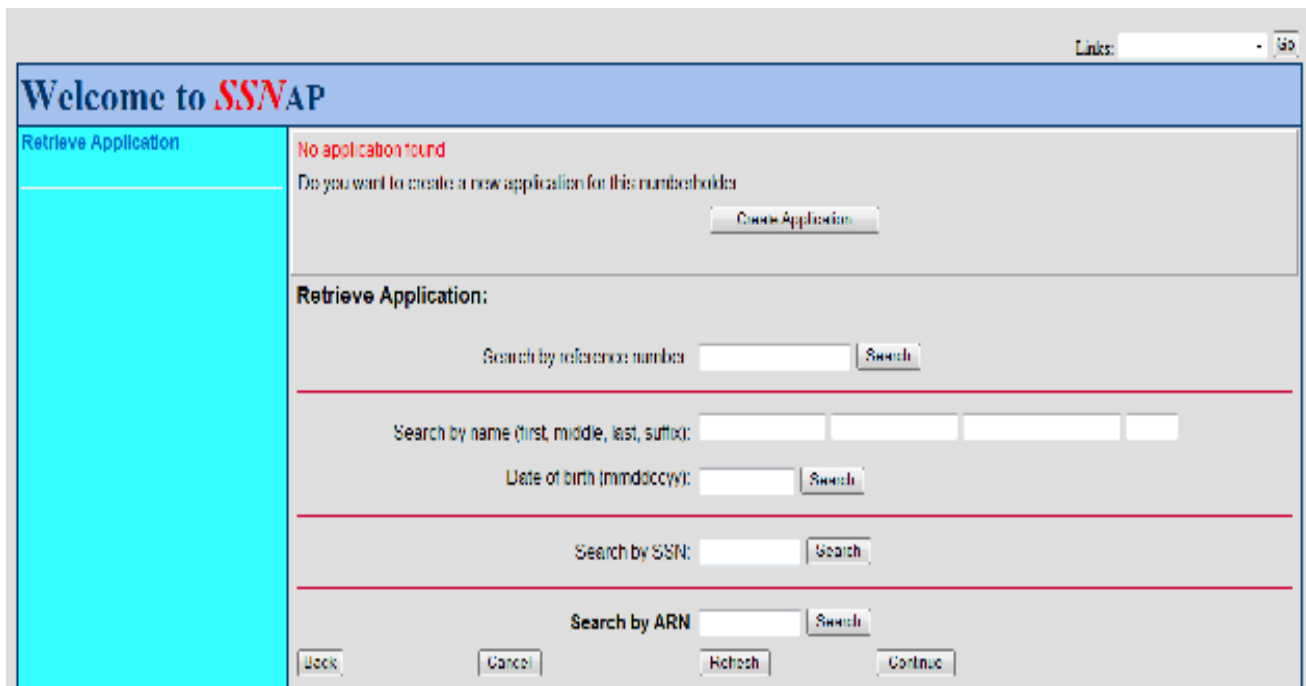
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Main Menu



Options in the left menu will depend on the user's profile.



This is an example of selecting Retrieve Application from the Main Menu and entering data for a person who has never applied for a SSN. The user is then given the opportunity to create a new application.

Applicant Info – Select Applicant

Reference Number: _____ Links: _____ Go

Applicant Info

Select Language for Attestation: English

If the applicant is present for the interview, read the following statement:
During this interview, we will ask you questions that will be used to process (your/ name of memberholder's) application. At the end of the interview, we will ask you to confirm the truthfulness of your answers under penalty of perjury and we will record your responses. You should be aware that you can be held legally responsible for giving us false information.

If the applicant is present for the interview, read the following statement:
Durante esta entrevista, le hacemos preguntas que se usarán para procesar la solicitud (su/ nombre de titular holder). Al final de la entrevista, le pediremos que confirme la veracidad de sus respuestas bajo pena de perjurio y documentaremos su respuesta. Debe estar consciente que de acuerdo con la ley podría ser legalmente responsable por dar una información falsa.

Application filed by: _____

U.S. Mailing Zip Code: _____ U.S. Mailing Zip Code not involved

Back Cancel Refresh Continue

The user is able to select the language of the attestation that is to be presented to the applicant. The corresponding attestation is presented on the screen. The US Mailing Zip Code is requested to ensure that the applicant is in the proper jurisdiction to best be served. SSA has Card Centers in major cities with their sole function to issue original and replacement SSNs.

SSNAP Links: _____ Go

Applicant Info

Application filed by: NONE OF THE ABOVE

- NONE OF THE ABOVE
- SELF
- SPOUSE
- MOTHER
- FATHER
- ADMINISTRATOR
- OFFSPRING
- STEPARENT
- FOSTER PARENT
- OTHER (SUPPORTIVE RELATIONSHIP AND RESPONSIBILITY)

Back Cancel Refresh Continue

This is the dropdown menu with the possible choices of a proper applicant.

Numberholder Information

SSN_{AP} Link:

Name: ZOE ARYANNE PHILLIPS, DOB: 05/06/2007 Reference Number: 11088016965

Applicant Info	Number Holder information
NIJ Info	<p>* Has numberholder ever filed for or received a Social Security Number? <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't know</p> <p>SSN last received on (MM/YY): <input type="text" value="05/09/2004"/></p> <p style="color: red;">SSN is now protected. If SSN is not correct, you will need to delete the application and re-apply.</p> <p>* Is this a single name? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>* Numberholder name (First, middle, last, suffix): <input type="text" value="ZOE"/> <input type="text" value="ARYANNE"/> <input type="text" value="PHILLIPS"/> <input type="text" value=""/></p> <p>* Date of birth (mm/dd/yy): <input type="text" value="05/06/2007"/></p> <p>Name on Numident (First, middle, last, suffix): <input type="text" value="ZOE, ARYANNE, PHILLIPS,"/></p> <p>Date of birth on Numident (mm/dd/yy): <input type="text" value="05/06/2007"/></p> <p>* Name to be shown on Card: <input type="text" value="ZOE ARYANNE"/> <input type="text" value="PHILLIPS"/></p> <p>Name to be shown on Card (Display only): <input type="text" value="ZOE ARYANNE"/> <input type="text" value="PHILLIPS"/></p> <p><input type="button" value="Copy Name"/></p> <p>* Citizenship: <input checked="" type="radio"/> U.S. <input type="radio"/> Lawful Alien <input type="radio"/> Other</p> <p>Update proof of age code: <input type="text" value=""/></p> <p>* Date Evidence Received: <input type="text" value="05/29/2011"/></p>
NH Address	<p>* Is the applicant requesting a new SSN in a U.S. citizen adoption case? <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>If any of these exclusions apply, this application will be processed for a replacement card:</p> <p>* Please Check all that apply: <input checked="" type="checkbox"/> Child is continuing to receive Title II auxiliary or Title XVI benefits <input type="checkbox"/> Child knows the previously assigned SSN <input type="checkbox"/> Child knows he or she is adopted <input type="checkbox"/> Adopting parent is a stepparent <input type="checkbox"/> Adopting parent is a grandparent <input type="checkbox"/> Child has worked <input type="checkbox"/> None of the above</p> <p>* Is the numberholder present for the interview? <input checked="" type="radio"/> Yes <input type="radio"/> No</p>

Numberholder Address

U.S. is Default Selection

The screenshot shows the SSNAP interface for a Numberholder Address. The header includes the SSNAP logo, a search bar with 'Link >' and a 'Go' button, and a blue bar with the text 'PH: Juan Last Name', 'DOB: 12/12/2000', and 'Reference: 999988877'. On the left, a navigation menu has 'Home', 'All info', 'All edit', and 'Main: add doc' (highlighted). The main form area has 'Main: add doc' selected, with radio buttons for 'U.S.' (checked), 'Foreign', and 'Military'. Below are four text boxes for 'Street address 1 (rd.)', '2 (rd.)', '3 (rd.)', and '4 (rd.)'. A 'City, State, zip' field has a dropdown for 'State' and two text boxes for 'City' and 'Zip'. At the bottom, there are radio buttons for 'Original phone number' (checked), 'Foreign', and 'New', followed by 'Number' and 'Ext.' text boxes. Action buttons 'Back', 'Cancel', 'Delete', and 'Continue' are at the bottom.

Foreign Address Selected

The screenshot shows the SSNAP interface with 'Foreign' selected. The header and navigation menu are identical to the previous screenshot. The radio buttons for 'Foreign' is checked. The 'City, State, zip' field is replaced by 'City', 'Province or Region', and 'Postal Code' text boxes. A 'Country' dropdown menu is set to 'Colombia', and a 'Consulate code' text box is present. The 'Original phone number' section remains the same. Action buttons 'Back', 'Cancel', 'Delete', and 'Continue' are at the bottom.

Military Address Selected

The screenshot shows the SSNAP interface with 'Military' selected. The header and navigation menu are identical. The radio buttons for 'Military' is checked. The 'City, State, zip' field is replaced by 'Location, air code, sub air' with dropdowns for 'AFPO' and 'Sub' and two text boxes. The 'Original phone number' section remains the same. Action buttons 'Back', 'Cancel', 'Delete', and 'Continue' are at the bottom.

12 or Older Interview Questions

U.S. Citizen 12 or Older Interview Questions

SSNAP Links: Go

NIE John LastName DOD: 04/13/1994 Reference: 999988877

<p>Applicant info</p> <p>Proof of Identity Other than Self</p> <p>NH Info</p> <p>NH Address</p> <p>12 or older</p>	<p>This screen pertains to individuals, age 12 or older, applying for a Social Security Number for the first time. Please ask questions similar to the following:</p> <p>Note: This list is not all inclusive. Depending on the situation, ask additional questions based on the individual circumstances to determine if an SSN has already been assigned or another identity has been used. (For additional information, see RM 10205.110.)</p> <p style="text-align: center;">Has John LastName ever:</p> <p><input type="checkbox"/> Held a full-time, part-time or temporary job in the U.S.? <input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="checkbox"/> Had a U.S. State-issued identification card or driver's license? <input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="checkbox"/> Taken the Scholastic Achievement Test or any other U.S. college related entrance exam? <input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="checkbox"/> Attended or applied for admittance to a U.S. college, university or technical/vocational school? <input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="checkbox"/> Had a U.S. savings or checking account in a bank, credit union, or other financial institution, or ever owned stocks or bonds? Did the parents or other relatives ever open an account or buy U.S. Savings Bonds for the applicant? <input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="checkbox"/> Filed a U.S. Federal or State income tax return or been claimed as a dependent on a U.S. Federal tax return of a parent or other relative? <input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="checkbox"/> Registered for the U.S. draft or to vote in the U.S.? <input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="checkbox"/> Applied for or received any type of U.S. governmental assistance such as TANF, Food Stamps, WIC, Medicaid, medical assistance, public job training or summer youth employment? <input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="checkbox"/> Lived outside the U.S. for a prolonged period of time? <input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="checkbox"/> Interviewer: Have you completed the investigation of the answers above? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>When you have completed your investigation, explain the answers provided above and describe the evidence you obtained:</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px; color: red; text-align: center;"> Answers in this box to propagate to the printed application </div> <p style="text-align: right; font-size: small;">remaining 400 char. Max. Length 400 Char</p> <p> <input type="button" value="Back"/> <input type="button" value="Cancel"/> <input type="button" value="Refresh"/> <input type="button" value="Continue"/> </p>
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Non U.S. Citizen 12 or Older Interview Questions

SSNAP Links: Go

NIE John LastName DOD: 04/13/1994 Reference: 999988877

<p>Applicant info</p> <p>Proof of Identity Other than Self</p> <p>NH Info</p> <p>NH Address</p> <p>12 or older</p>	<p>This screen pertains to individuals, age 12 or older, applying for a Social Security Number for the first time. Please ask questions similar to the following:</p> <p>Note: This list is not all inclusive. Depending on the situation, ask additional questions based on the individual circumstances to determine if an SSN has already been assigned or another identity has been used. (For additional information, see RM 10205.110.)</p> <p style="text-align: center;">Has John LastName ever:</p> <p><input type="checkbox"/> Held a full-time, part-time or temporary job in the U.S.? <input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="checkbox"/> Had a U.S. State-issued identification card or driver's license? <input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="checkbox"/> Taken the Scholastic Achievement Test or any other U.S. college related entrance exam? <input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="checkbox"/> Attended or applied for admittance to a U.S. college, university or technical/vocational school? <input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="checkbox"/> Had a U.S. savings or checking account in a bank, credit union, or other financial institution, or ever owned stocks or bonds? Did the parents or other relatives ever open an account or buy U.S. Savings Bonds for the applicant? <input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="checkbox"/> Filed a U.S. Federal or State income tax return or been claimed as a dependent on a U.S. Federal tax return of a parent or other relative? <input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="checkbox"/> Registered for the U.S. draft or to vote in the U.S.? <input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="checkbox"/> Applied for or received any type of U.S. governmental assistance such as TANF, Food Stamps, WIC, Medicaid, medical assistance, public job training or summer youth employment? <input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="checkbox"/> Ever visited or resided in the U.S.? <input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="checkbox"/> Interviewer: Have you completed the investigation of the answers above? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>When you have completed your investigation, explain the answers provided above and describe the evidence you obtained:</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px; color: red; text-align: center;"> Answers in this box to propagate to the printed application </div> <p style="text-align: right; font-size: small;">remaining 400 char. Max. Length 400 Char</p> <p> <input type="button" value="Back"/> <input type="button" value="Cancel"/> <input type="button" value="Refresh"/> <input type="button" value="Continue"/> </p>
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Additional Information

SSNAP
Links:

NI: Joann LastName
DOD: 12/12/1990
Reference: 999988877

Applicant info

NI info

NI Alerts

Valid address in person interview

Additional info

Is a new number being requested? Yes No

Reason for new number request:

Suppress card issuance? Yes No

Replacement card count: ANNUAL 3 FIFTEEN 7

Print Legend:

Limit mail - issue to deny:

Issue from third party:

Third party remarks:

Reason for name change: MINOR name correction Legal name change

MINOR name correction reason:

Numberholder's gender: Male Female

Numberholder's place of birth: L101 city Select State from the dropdown

(City, State or Country) Select from the foreign country dropdown list

Is this a single name? Yes No

Name used at birth, in different:

(first, middle, last, suffix)

Are there any other names used? Yes No

Is this a single name? Yes No

Other name used by numberholder:

(first, middle, last, suffix)

Is this a single name? Yes No

Alternate name used by numberholder:

(first, middle, last, suffix)

Parent / Mother's name unknown:

Is this a single name? Yes No

Parent / Mother's name at her birth:

(first, middle, last, suffix)

Parent / Mother's SSN: Unknown SSN Hide SSN

Parent / Father's name unknown:

Is this a single name? Yes No

Parent / Father's name:

(first, middle, last, suffix)

Parent / Father's SSN: Unknown SSN Hide SSN

I have verified all pre-populated information shown with the applicant

Verify and Sign

SSNAP Links

NH: DOB: Reference:

Applicant Info Proof of Identity Other than Self Bill Info Bill Address 12 and Older Additional Info Race and Ethnicity Proof of Age Proof of Identity Summary Verify Sign	<p>If the applicant is present for the interview, read the following statement: Here is a printed copy of the information that will be used to process (your/their name of number holder's) application. Please review all the information carefully and tell us if anything needs to be corrected.</p> <p>If the applicant is present for the interview, read the following statement: Aquí está una copia impresa de la información que se usará para procesar la solicitud (suya/de name of number holder). Favor de revisar toda la información cuidadosamente y díganos si hay algo que tengamos que corregir.</p> <p>If the applicant is present for the interview, ask the following questions: Do you understand that the information you provide and confirm will be used to process (your/ name of number holder's) application? Do you declare under penalty of perjury that this information is true and correct to the best of your knowledge?</p> <p>If the applicant is present for the interview, ask the following questions: Entiende que la información que nos dio y revisó se usará para procesar la solicitud (suya/de name of number holder)? Declara usted bajo pena de perjurio que esta información es cierta y verdadera según su mejor conciencia?</p> <p style="text-align: center;">*Type of signature: <input type="radio"/> Attestation <input type="radio"/> Signature on Application <input type="radio"/> Refusal</p> <p>Auxiliary/Foreign claim number (opt): <input type="text"/></p> <p>Notify office of SSN assignment? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <hr/> <p>*Do you want to clear this application? <input type="radio"/> Yes <input type="radio"/> No Reason: <input type="text" value="Multiple only"/> -</p> <hr/> <p>File application for another family member? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <ul style="list-style-type: none"><input type="checkbox"/> Same parents?<input type="checkbox"/> Same address?<input type="checkbox"/> Same Proper Applicant? <hr/> <p style="text-align: center;"><input type="button" value="Back"/> <input type="button" value="Cancel"/> <input type="button" value="Default"/> <input type="button" value="Continue"/></p>
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Voluntary Race and Ethnicity Identification

SSN_{AP} Links: [dropdown]

Name: JOSEPH LEON GOULET DOB: 02/17/1906 Reference Number: 11102001244

[Applicant Info](#)
[NH Info](#)
[NH Address](#)
[Additional Info](#)
[Race and Ethnicity](#)
[Proof Of US Citizenship](#)

Voluntary Race and Ethnicity Identification

The next two questions are about ethnicity and race.

To ensure that all of our customers are treated fairly, we are requesting information about your/his/her race and ethnicity. **Providing this information is voluntary**, and it will not affect decisions about your/his/her application. The information is being requested for research and statistical purposes only. The categories and definitions below are the same as those used by other Federal agencies. The information will be kept private and used for authorized Federal agency reporting purposes only.

[More Information](#)

Are you (is he/she) Hispanic or Latino? (Select one):
[Ethnicity Definitions](#)

Yes
 No
 No Response

What is your/his/her race? (Read list, select one or more):
[Race Definitions](#)

Alaska Native
 American Indian
 Asian
 Black/African American
 Native Hawaiian
 Other Pacific Islander
 White
 No Response: Race (do not use if actual race selected)

[More Information](#)

Done [Navigation icons] Local Internet | Protected Mode Off | 100%