Form Approved
OMB No. 0960-0757

GSO Website Account Modification/Deletion Form

Sponsors should complete this form to request modification or deletion of a GSO website user account. SSA sponsors should email the completed form to **UIT.eData.Mailbox@ssa.gov**. Sponsors will receive email notification when the request has been processed.

Please **tab** from field to field.

REQUEST INFORMATION

Date of Request:

Type of Request: **Select One**
(Note: Deletion requests for organizational shared accounts will delete the entire account where no one on that account will have access to the website.)

User ID to be changed:

Explanation:

MODIFICATION REQUEST

Select the utilities to which the user will need access:
(select all that apply to this user)

Select Utilities

Select Utilities

Select Utilities

Select Utilities

Comments:

USER ACCOUNT INFORMATION

User Name):

Select user type: **Select One**

Organization Name:

Organization ID or RID:

Email Address:

Phone (Include area code):

SPONSOR INFORMATION

Sponsor Name:	**Phone:** (Include area code)
Office:	
Email:	

ACCOUNT STATUS - For Completion By UIT

Status: Request Submitted	**Completion Date:**
Processed by:	**Phone:** (Include area code)
Comments:	

Form **SSA-160** (07-2010)

See Revised Paperwork Reduction Act Statement

SSA will insert the following revised PRA Statement into the form at its next scheduled reprinting:

Paperwork Reduction Act Statement - This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 15 minutes to read the instructions, gather the facts, and answer the questions. *Send **only** comments relating to our time estimate abo*ve to: *SSA, 6401 Security Blvd, Baltimore, MD 21235-6401.*

Privacy Act Statement
Collection and Use of Personal Information

Section 205(a), of the Social Security Act, as amended, and the Government Paperwork Elimination Act, authorize us to collect this information. We will use the information you provide to determine eligibility to access Government Services Online (GSO).

The information you furnish on this form is voluntary. However, failing to provide the requested information may prevent us from granting access to GSO.

We rarely use the information you supply for any purpose other than for determining eligibility for access. However, we may use it for the administration and integrity of our programs. We may also disclose information to another person or to another agency in accordance with approved routine uses, including, but are not limited to the following:

> 1. To comply with Federal laws requiring the release of information from Social Security records (e.g., to the Government Accountability Office and Department of Veterans Affairs);
>
> 2. To facilitate statistical research, audit, and investigatory activities necessary to assure the integrity of our programs (e.g., to the Bureau of the Census and to private entities under contract with us).

We may also use the information you provide in computer matching programs. Matching programs compare our records with records kept by other Federal, State, or local government agencies. We use the information from these programs to establish or verify a person's eligibility for federally funded or administered benefit programs and for repayment of incorrect payments or delinquent debts under these programs.

Additional information regarding this form, routine uses of information, and our programs and systems, is available on-line at www.socialsecurity.gov or at your local Social Security office.