Guidelines for Completing the
GSO Website Registration Form

> **The GSO registration form should be used to register one individual website user. Please use a separate form for each user.**
> *Input all fields unless otherwise specified.*

GSO USER CONTACT INFORMATION

Name	Enter the user's full name.
Organization Name	Enter the name of the organization the user represents.
Organization ID	For OCSE reporting and Direct Deposit: Three character abbreviation for the user's organization. For Prison Reporting, Fugitive Felon Reporting, and Totalization Death Data Exchange: Four character RID.
Street Address	Enter the user's address.
City	Enter the user's city.
State	Enter the user's state.
Zip Code	Enter the user's zip code.
Email Address	Enter the user's email address.
Phone	Enter the user's phone number. ***Include the area code.***
Select user type (SSA users only)	*Select Organizational Shared Account* only if multiple internal users at Social Security are requesting a single account assigned as a group account; otherwise select *Individual User(s)*.
Select the utilities the new user will need to access	Select the GSO services the user will need to use. Select the functions below that apply to every user on the application. ***Select all of the utilities that apply:*** *B* – State government agencies sending **Birth** records to SSA. *BL* – Federal/State government agencies sending **Black Lung** records to SSA. *D* – State government agencies sending **Death** records to SSA. *DDE* – Totalization Death Data Exchange with foreign totalization partners. *DE* – This user will exchange files via the **Data Exchange** application. *FF* – FBI, State government and law enforcement agencies send **Fugitive Felon** warrant information to SSA. *IAR* – State government agencies sending **Interim Assistance Reimbursement** files to SSA. *OCSE* – Federal government agencies sending **FPLS, New Hire, and Quarterly Wage** data to OCSE. *Prisons* – A **Prison** representative notifying SSA of incoming prisoners. *SM* – **Secure Messaging** users that require encryption of sensitive email messages. *SW* – **Sheltered Workshops** send payroll information to SSA Field Offices (FO). *OTHER* – Select this item for a newly established utility not yet displayed on the registration form. Annotate the utility name in the Sponsor Comments field.

SSA SPONSOR VERIFICATION

> **This section is to be completed by the SSA Sponsor after verification of the new website user information.**

Sponsor Name	Enter the Sponsor contact's full name.
Phone	Enter the Sponsor's phone number. ***Include the area code.***
Sponsor Organization:	Enter the Sponsor's SSA office/division/branch.
Sponsor Email:	Enter the sponsor's SSA email address.
Sponsor Comments	Enter any additional comments or details regarding the registration of these user(s). This field may also be used to identify a newly implemented utility for registration if not listed in the "Select Utilities field".
Enter trading partners	**Data Exchange, Sheltered Workshop, and Secure Messaging** require the selection of one or more trading partners. Enter the partner's name, GSO user id if known, and the organization or state the user is associated with. If this individual does not already have a GSO id, they will need to be registered for one.

> **Once the Sponsor completes the information above, forward the form in WORD format to: UIT.eData.Mailbox@ssa.gov**

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