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Main Menu

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Welcome to **SSNAP**

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

Links: Go

Welcome to **SSNAP**

[Retrieve Application](#)

No application found
Do you want to create a new application for this numberholder

Retrieve Application:

Search by reference number:

Search by name (first, middle, last, suffix):

Date of birth (mmddccyy):

Search by SSN:

Search by ARN

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

SSNAP

Links: Go

Reference Number:

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 numberholder'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 response. 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 haremos preguntas que se usarán para procesar la solicitud (suya/de name of number 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 conciente que de acuerdo con la ley podria ser legalmente responsable por darnos 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
- LEGAL GUARDIAN
- CUSTODIAL MOTHER
- CUSTODIAL FATHER
- ADMINISTRATOR OF ESTATE
- RELATIVE WITH CUSTODY
- AGENCY WITH LEGAL CUSTODY
- OTHER (CAN ESTABLISH RELATIONSHIP AND RESPONSIBILITY)

Back Cancel Refresh Continue

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

Numberholder Information

SSN_{AP}

Links:

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

Applicant Info

NH Info

[NH Address](#)

Number Holder Information

* Has numberholder ever filed for or received a Social Security Number? Yes No Don't know

SSN last received or used: 491-02-2104

SSN is now protected. If SSN is not correct, you will need to delete the application and re-key

* Is this a single name? Yes No

* Numberholder name (First, middle, last, suffix): ZOE ARYANNE PHILLIPS

* Date of birth (mddccyy): 05/06/2007

Name on Numident
(First, middle, last, suffix): ZOE , ARYANNE , PHILLIPS ,

Date of birth on Numident
(mddccyy): 05/06/2007

* Name to be shown on Card: ZOE ARYANNE PHILLIPS

Name to be shown on Card(Display only): ZOE ARYANNE PHILLIPS

* Citizenship: U.S. Lawful Alien Other

Update proof of age code:

* Date Evidence Received: 03/29/2011

* Is the applicant requesting a new SSN in a U.S. citizen adoption case? Yes No

If any of these exclusions apply, this application will be processed for a replacement card:

* Please Check all that apply: Child is continuing to receive Title II auxiliary or Title XVI benefits

Child knows the previously assigned SSN

Child knows he or she is adopted

Adopting parent is a stepparent

Adopting parent is a grandparent

Child has worked

None of the above

* Is the numberholder present for the interview? Yes No

Numberholder Address

U.S. is Default Selection

SSNAP Links:

NH: **Joann LastName** DOB: **12/12/2000** Reference: **999988877**

Applicant info Mailing address: U.S. Foreign Military

NH info Street address 1:

NH Alert Street address 2 (opt.):

Mailing address Street address 3 (opt.):

Street address 4 (opt.):

City, State, Zip, Sub zip:

Daytime phone number: U.S. Foreign None

Number: Ext:

Foreign Address Selected

SSNAP Links:

NH: **Joann LastName** DOB: **12/12/2000** Reference: **999988877**

NH info Mailing address: U.S. Foreign Military

Mailing address Street address 1:

Street address 2 (opt.):

Street address 3 (opt.):

City: Province or Region:

Country: Postal Code:

Consular Code:

Daytime phone number: U.S. Foreign None

Number: Ext:

Military Address Selected

SSNAP Links:

NH: **Joann LastName** DOB: **12/12/2000** Reference: **999988877**

NH info Mailing address: U.S. Foreign Military

Mailing address Street address 1:

Street address 2 (opt.):

Street address 3 (opt.):

Street address 4 (opt.):

Location, zip code, sub zip:

Daytime phone number: U.S. Foreign None

Number: Ext:

12 or Older Interview Questions

U.S. Citizen 12 or Older Interview Questions

SSNAP Links: Go

NH: John LastName DOB: 04/13/1994 Reference: 999988877

Applicant info
[Proof of Identity Other than Self](#)
[NH Info](#)
[NH Address](#)
12 or older

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:
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.)

Has John LastName ever:

- *Held a full-time, part-time or temporary job in the U.S.? Yes No
- *Had a U.S. State-issued identification card or driver's license? Yes No
- *Taken the Scholastic Achievement Test or any other U.S. college-related entrance exam? Yes No
- *Attended or applied for admittance to a U.S. college, university or technical/vocational school? Yes No
- *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? Yes No
- *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? Yes No
- *Registered for the U.S. draft or to vote in the U.S.? Yes No
- *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? Yes No
- *Lived outside the U.S. for a prolonged period of time? Yes No

*Interviewer: Have you completed the investigation of the answers above? Yes No

When you have completed your investigation, explain the answers provided above and describe the evidence you obtained:

Answers in this box to propagate to the printed application

remaining 400 char, Max. Length: 400 Chars

Back Cancel Refresh Continue

Non U.S. Citizen 12 or Older Interview Questions

SSNAP Links: Go

NH: John LastName DOB: 04/13/1994 Reference: 999988877

Applicant info
[Proof of Identity Other than Self](#)
[NH Info](#)
[NH Address](#)
12 or older

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:
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.)

Has John LastName ever:

- *Held a full-time, part-time or temporary job in the U.S.? Yes No
- *Had a U.S. State-issued identification card or driver's license? Yes No
- *Taken the Scholastic Achievement Test or any other U.S. college-related entrance exam? Yes No
- *Attended or applied for admittance to a U.S. college, university or technical/vocational school? Yes No
- *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? Yes No
- *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? Yes No
- *Registered for the U.S. draft or to vote in the U.S.? Yes No
- *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? Yes No
- *Ever visited or resided in the U.S. Yes No

*Interviewer: Have you completed the investigation of the answers above? Yes No

When you have completed your investigation, explain the answers provided above and describe the evidence you obtained:

Answers in this box to propagate to the printed application

remaining 400 char, Max. Length: 400 Chars

Back Cancel Refresh Continue

Additional Information

SSNAP Links:

NH: **Joann LastName** DOB: 12/12/1990 Reference: 999988877

[Applicant info](#)

[NH info](#)

[NH Alerts](#)

[Mailing 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 LIFETIME: 7

Prior Legend:

Limit met - issue or deny:

Letter from third party:

Third party remarks:

Reason for name change: NUMIDENT name correction Legal name change

NUMIDENT name correction reason:

Numberholder's gender: Male Female

Numberholder's place of birth: Enter 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, if 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 above with the applicant.

Verify and Sign

SSNAP

Links:

NH: Joann LastName DOB: 05/03/1976 Reference: 999988877

[Applicant info](#)

[Proof of Identity Other than Self](#)

[NH Info](#)

[NH Address](#)

[12 and Older](#)

[Additional Info](#)

[Race and Ethnicity](#)

[Proof of Age](#)

[Proof of Identity](#)

[Summary](#)

Verify Sign

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/name of numberholder's) application. Please review all the information carefully and tell us if anything needs to be corrected.

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.

If the applicant is present for the interview, ask the following questions:

Do you understand that the information you gave us and examined 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?

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 entender?

*Type of signature: Attestation Signature on Application Refusal

Auxiliary/Survivor claim number (opt.):

Notify office of SSN assigned? Yes No

*Do you want to clear this application? Yes No Reason:

Enter application for another family member? Yes No

Same parents?

Same address?

Same Proper Applicant?

Voluntary Race and Ethnicity Identification

Social Security Number Application Process - Windows Internet Explorer
http://s3dc00f.ba.ad.ssa.gov:9080/ssnapWeb/AdditionalInfo.do

SSN_{AP} Links: Go

Name: JOSEPH LEON GOULET DOB: 02/17/1905 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 Local intranet | Protected Mode: Off 100%