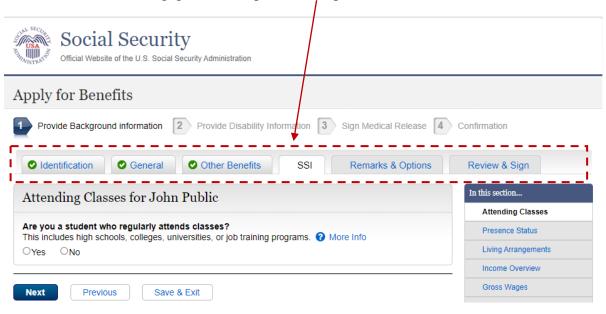
Screen #1

Applicants who entered the internet disability application and indicated they want to file for SSI will receive the following questions as part of their path.



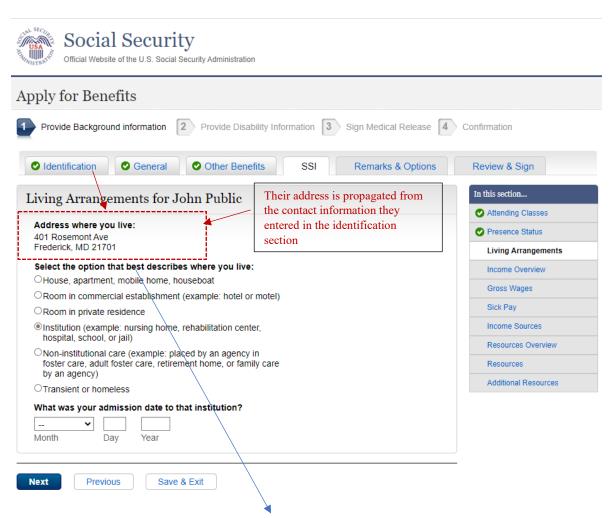
We ask applicants to let us know if they are students to evaluate if some of the income reported can be excluded (when applicable). We only collect their "yes" or "no" response.

Screen #2

We are requesting the lawful presence information as we are expanding the online services to non-US citizen claimants. This information is part of the SSI eligibility requirements.

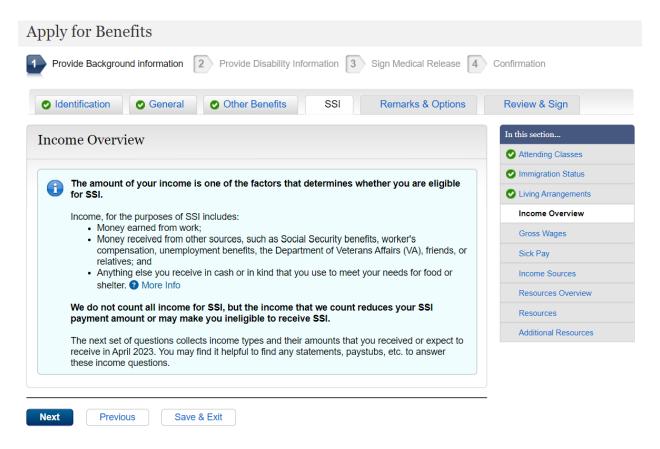


Screen #3



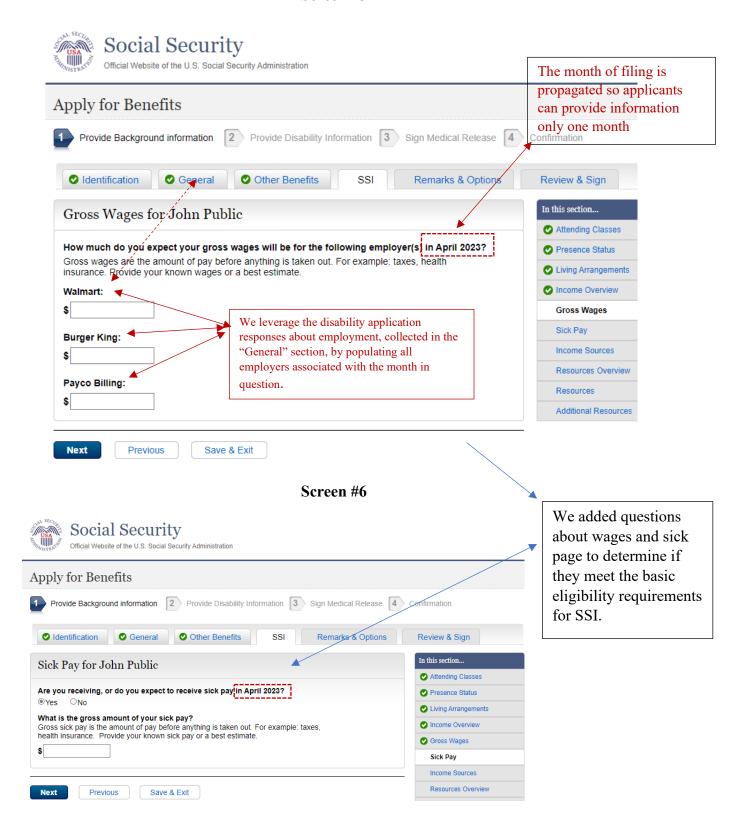
We added this question to determine their living arrangement as it is part of the SSI eligibility factors which technicians can review, and process as needed e.g., send claim for medical determination, or seek further clarification when applicable.

Screen #4

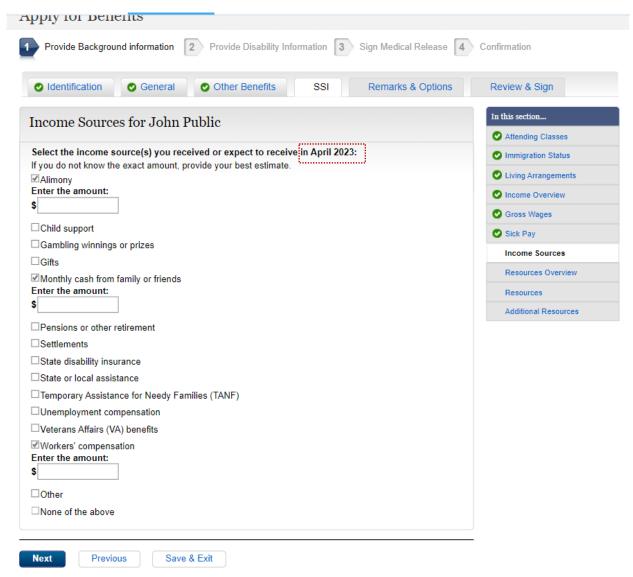


We added this informational page to explain what is considered income and provide guidance to individuals about what information may be needed.

Screen #5

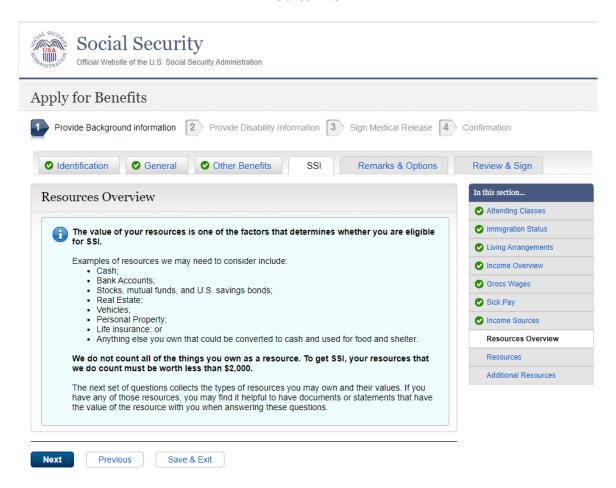


Screen #7



This screen is a continuation of the income resources information to determine basic eligibility requirements for SSI.

Screen# 8



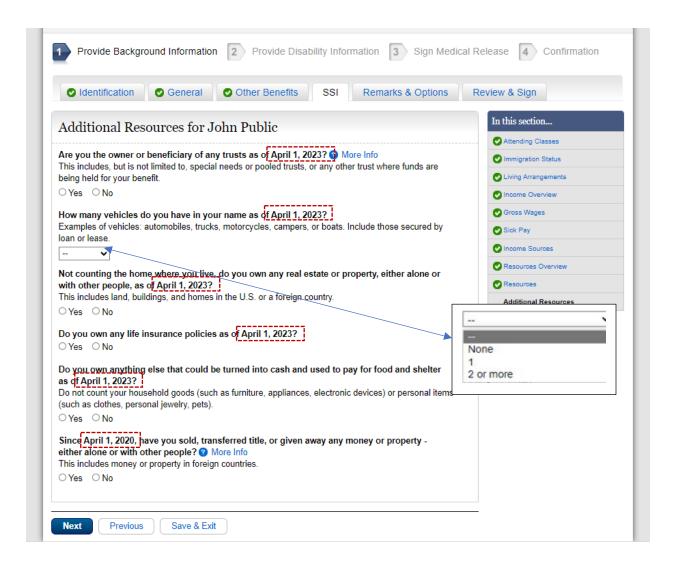
We added this informational page to explain what is considered resources and provide guidance to individuals about what information may be needed.

Screen #9

We added questions on screens #9 and #10 about resources to determine if the individual meets the basic eligibility requirements for SSI.

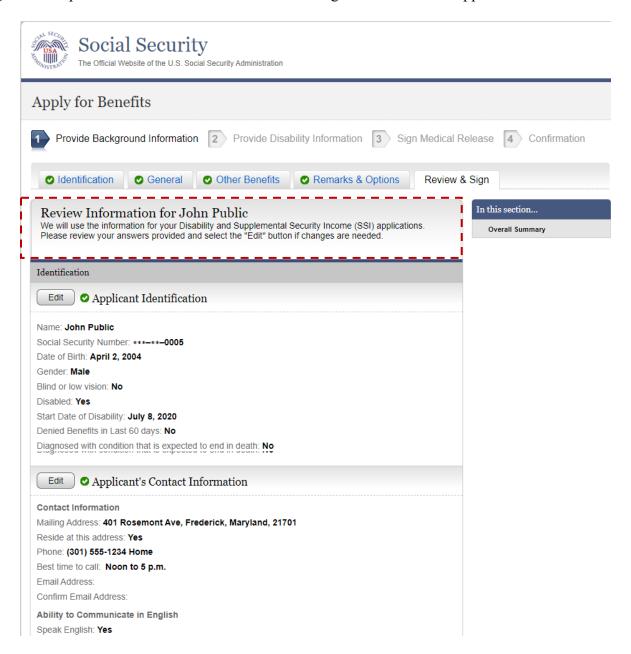


Screen #10



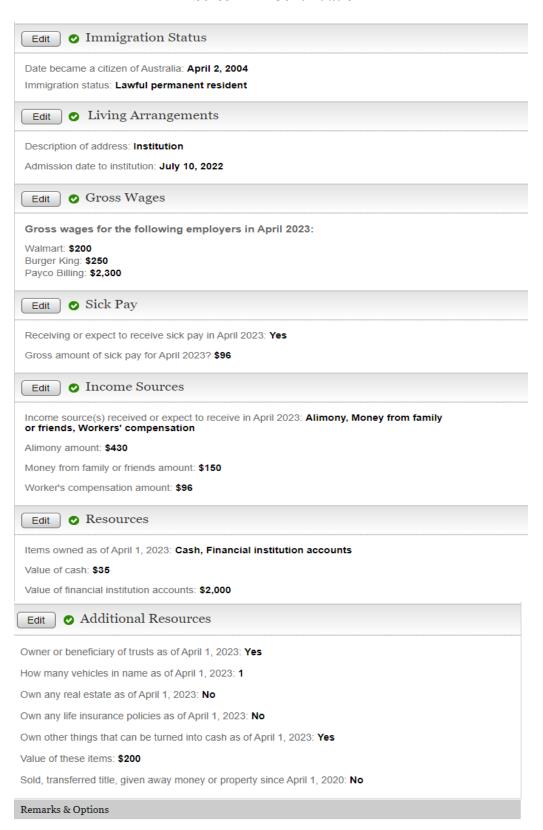
Screen #11

We added language to the "Review Information" page which will display the answers to the SSI questions*. The language informs applicants that the information will be used for both applications (DIB and SSI). Under the same page, we also updated the section about electronic signatures to provide relevant information about the signature for the SSI application.



^{*} Please note this is just an example, the length of the summary depends on the number of questions applicants answer depending on their unique situation (e.g., married or not, number of employers, etc.,)

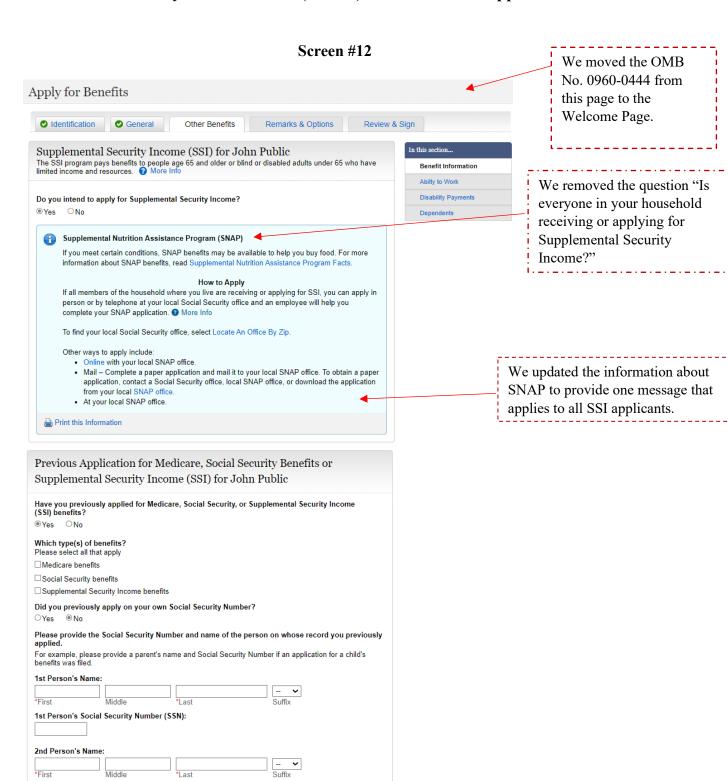
Screen #11 Continuation



Screen #11 Continuation

Electronic Signature Agreement Please read and accept the following statement before continuing the disability process. If you are helping someone apply, then the person filing for benefits must read and accept this agreement by checking the box themselves. I agree to notify the Social Security Administration promptly if I (or any person for whom I receive benefits) become employed or self-employed while outside the United States, change citizenship, or go (for 30 days or more) to any country other than the residence address I have entered in this application. I agree that, if the Social Security Administration determines that I am disabled for Supplemental Security Income (SSI) purposes, I will give the Social Security Administration information about my income, resources, living arrangements, and the other items listed here: https://www.ssa.gov/ssi/textreport-ussi.htm, so that the Social Security Administration can determine my SSI eligibility and payment I understand and agree that this information will be subject to verification. I agree to notify the Social Security Administration promptly of changes in this information while my application for SSI benefits is pending and at any time when I am eligible for SSI benefits I understand and agree that by selecting and clicking "Accept & Continue" below, I am electronically signing my applications for Disability, SSI, and the additional forms included in this online submission. I also understand that my electronic signature means that I intend to apply for benefits and have provided the Social Security Administration with accurate information. I declare under penalty of perjury that I have examined all the information on these applications and it is true and correct to the best of my knowledge. I understand that anyone who knowingly gives a false or misleading statement about a material fact in these electronic applications, or causes someone else to do so, commits a crime and may be sent to prison or may face other penalties, or both. ☐ I agree with the Electronic Signature Agreement above. You will no longer be able to change this information once you continue to the next step. When you select "Accept & Continue" below, you will electronically signing your applications and additional forms, and sending this completed information electronically to the Social Security Administration. Please make sure everything is correct before continuing. Once you complete the remaining steps in the process, you will receive a receipt containing all of the information you have provided. **Accept & Continue** Save & Exit Previous

We updated the "Electronic Signature Agreement" section to include language about the SSI application



2nd Person's Social Security Number (SSN):

Save & Exit

Previous

Next

Screen #13



We're sorry...



We cannot process your request.

We are sorry for the inconvenience, but we cannot process your request online.

If you live within the U.S., our territories or commonwealths, you may call our toll-free number, **1-800-772-1213**. If you are deaf or hard of hearing, call our toll-free "TTY" number, **1-800-325-0778**. Representatives are available Monday through Friday from 8 a.m. to 7 p.m.

Outside the United States

We offer a variety of servicing options for those living abroad. For more information, visit Service Around the World.

Exit

We updated this message to eliminate language regarding the number of attempts that can be made before an error stops the online process and requires contact with SSA.