

[Rep Portal \(Link\)](#)

Sign In Page



Sign In

Accounts created **before** September 18, 2021 should enter a Username and Password.

Username

[Forgot Username?](#)

Password

[Forgot Password?](#)

Sign in

Sign in with  LOGIN.GOV

Sign in with  ID.me

[Learn more](#)

[Create an account](#)

Are you now, or have you ever been a victim of domestic violence? Identity theft? Do you have other concerns?

You can [contact us](#) to block electronic access to your information at any time, for any reason.

[Privacy and Security](#)

[OMB No. 0960-0789](#) [Privacy Policy](#) [Privacy Act Statement](#) [Accessibility Help](#)

Forgot Username? Press link to access the following page.



Please tell us who you are

Email Address:

Social Security Number (SSN):

 [SHOW SSN](#)

Date of Birth:

| | | |
|-------------------------------|-------------------------------|-------------------------------|
| Month | Day | Year |
| <input type="text" value=""/> | <input type="text" value=""/> | <input type="text" value=""/> |

[Privacy and Security](#)

[OMB No. 0960-0789](#) [Privacy Policy](#) [Privacy Act Statement](#) [Accessibility Help](#)

Signing Using ID.me (set up process)
ID.me

You are leaving Social Security's website

If you select the "OK" button below, we will redirect you to ID.me's website.


ID.me is not a government entity but is federally certified to provide secure digital identity verification to government agencies.

ID.me is not under our control and may not follow SSA's privacy, or accessibility policies located on SSA's official website at <https://www.ssa.gov/privacy>.

ID.me's identity verification process may include facial recognition to match your face to the photo on your identity document. Collection and storage of personal and biometric information is subject to ID.me's policies that include its [terms of service](#), and [biometric privacy policy](#).

If you do not wish to agree to these terms, please select the "Cancel" button and choose a different registration option.

Create and ID.me account steps.

ID.me + 

Sign in to ID.me

New to ID.me?
[Create an ID.me account](#)

Email





Password

Remember me
For your security, select only on your devices.

Sign in

[Forgot password](#)

OR

[View more options](#)

Add email and create a password using at least 1 Upper Case, 1 lower case, 1 number and 1 symbol/special character.



Create an ID.me account



If you already have an ID.me account, do not create a new one. [Sign in to your existing account.](#)

* Indicates a required field

Email *

Enter your personal email address

Password *

Enter password

Confirm Password *

Reenter password

- Remember me**
For your security, select only on your devices.
- I accept the ID.me [Terms of Service](#) and [Privacy Policy](#). *

Create account

OR



Verify your email and PW.



Sign in to ID.me

New to ID.me?
[Create an ID.me account](#)

Email

Password

Remember me
For your security, select only on your devices.

[Sign in](#)

[Forgot password](#)

OR

[f](#) [G](#) [Apple](#) [in](#)

[View more options](#)

Confirm information steps sent to email address.



Welcome!

Thanks for creating an ID.me account!

ID.me simplifies how you verify and share your identity online, while helping keep your information safe.

You can confirm your email address by clicking the link below.

[Confirm your](#)

Please note: This link will expire in 15 minutes.

Can't click the button in this email?

Copy this code and enter it in your browser to complete the confirmation.

671456

Security Steps to Secure your Portal Account

ID.me +



SECURE YOUR ACCOUNT



Choose an MFA option

With multi-factor authentication (MFA), even if someone guesses your password, they won't be able to sign in as you.



[Text Message or Phone Call](#)

Get a 6-digit code by text message or phone call.



[Push Notification](#)

Approve sign-ins via push notifications sent to the ID.me Authenticator mobile app.



[Code Generator Application](#)

Generate verification codes via code generator apps like ID.me Authenticator.



[Security Key](#)

Use a physical security key (insert or tap) with your device.



[NFC-Enabled Mobile Security Key](#)

Tap a YubiKey™ security key to your phone using the ID.me Authenticator mobile app.

∨ [English](#)

Security Steps through your personal cell phone




SECURE YOUR ACCOUNT


1 — 2 — 3

Receive a code by phone


Please use a phone number you can access whenever you plan to sign in.

Phone Number





Text me



Call me

THE NUMBER PROVIDED WILL ONLY BE USED FOR ACCOUNT SECURITY. MESSAGE AND DATA RATES MAY APPLY.

[Go back](#) [Continue](#)

[English](#)

[What is ID.me?](#) | [Terms of Service](#) | [Privacy Policy](#)

Confirm Phone Number, with texted verification code.



SECURE YOUR ACCOUNT



Confirm your phone number

Please pick up the phone and follow the instructions to receive your 6-digit code.

Enter the 6-digit code *

Didn't receive it? [Resend my verification code](#)

[Go back](#)

[Continue](#)

English

Verification of Phone code



YOUR ACCOUNT IS NOW SECURE

Your phone number can now be used for multi-factor authentication.



Visit [ID.me My Account](#) to view and manage multi-factor authentication settings.

Recovery code

A recovery code can be used in the event you lose access to your multi-factor authentication device.

[Generate recovery code](#)

[Continue](#)

∨ [English](#)

[What is ID.me?](#) | [Terms of Service](#) | [Privacy Policy](#)

Submit ID (pictures)



VERIFYING IS FAST AND EASY

Choose how you verify your identity:

- Self-Service** (Fastest Option)
 - Requires Driver's License / State ID, Passport, or Passport Card and a selfie
 - Takes 5 - 10 minutes
 - Selfie and biometric data will be deleted in accordance with the ID.me [Privacy Policy](#)

- Video Chat Agent**
 - Requires a Driver's License / State ID, Passport, or Passport Card and a 5 minute recorded video chat
 - No selfie or biometric data collected
 - Video will be deleted in accordance with the ID.me [Privacy Policy](#)
 - Takes 10 - 15 minutes

[Continue](#)

[I don't live in the United States](#)

∨ [English](#)

[What is ID.me?](#) | [Terms of Service](#) | [Privacy Policy](#)

Picture scan on cell phone.



Consent for ID.me to collect Biometric Data and Sensitive Personal Information

CONSENT FOR ID.ME TO COLLECT BIOMETRIC INFORMATION AND SENSITIVE PERSONAL INFORMATION

In the event of any discrepancy between a non-English version of this document and the English version of this document, the English version shall prevail in all respects.

BIOMETRIC INFORMATION PRIVACY STATEMENT

ID.me will not sell, rent, or trade your Biometric Information, and after verification you may request we delete your Biometric Information. Your Biometric Information will only be used by ID.me to verify your identity in accordance with the guidelines published by the National Institute for Standards and Technology or as required for the prevention of fraud. ID.me will transfer your Biometric Information to our third party partners only when required by a subpoena, warrant, or other court ordered legal action.

Notice and Consent

This Notice and Consent for the collection of Biometric Information, Personal Information and Sensitive Personal Information ("Consent") describes how ID.me

I acknowledge that I have received, read, and agreed to these terms


Continue

[Cancel](#)


▼ [English](#)

[What is ID.me?](#) | [Terms of Service](#) | [Privacy Policy](#)


Wait for verification (15 seconds)

ID.me + 

WAITING FOR YOUR PHOTOS...



Text sent to '387



Please tap the link to upload photos.

Didn't receive the text message?

[Send it again](#)

∨ [English](#)

[What is ID.me?](#) | [Terms of Service](#) | [Privacy Policy](#)

Receive multifactor authentication.

ID.me



You have enabled multi-factor authentication

Multi-factor authentication (MFA) is an additional login step which better protects your account.

Now whenever you sign in, you can authenticate using the following MFA option:

Text Message or Phone Call — (***) ***-387

If this wasn't you, contact us immediately at account.security@id.me.

Visit [ID.me My Account](#) to view and manage multi-factor authentication settings.

Request Details

| Device | IP Location |
|--------------------|------------------------------------|
| Windows 10.0 | Baltimore, MD 21215, United States |
| Microsoft Edge 115 | 137.200.32.6 |

Questions? We're here to help.

[Visit ID.me Support](#)

Stay in Touch



ID.me

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Verify identity with your SSN.



VERIFY YOUR IDENTITY



Enter your Social Security number

Social Security Number (#####) *

#####

The Social Security number is used as a unique identifier to confirm identity. This will not affect your credit score.

[Back](#)

[Continue](#)

[I don't have a Social Security Number](#)

∨ [English](#)

[What is ID.me?](#) | [Terms of Service](#) | [Privacy Policy](#)

Review your identification information captured from picture ID



VERIFY YOUR IDENTITY

1 — 2 — 3 — 4 — **5**

Is your information displayed correctly?

We will securely use the following information to verify your identity against trusted sources.

What does this mean? ^

Personal Information

First Name

Middle Name

Last Name

Date of Birth

Home address

Street

City

State

Zip Code

Phone number

Mobile Phone

The information I've provided is correct, and I accept the use of [Fair Credit Reporting Act](#) data to verify my identity.

What is The Federal Fair Credit Reporting Act? ^

See our [Privacy Policy](#) for how we treat your data.

^ English

What is ID.me? | [Terms of Service](#) | [Privacy Policy](#)

Acknowledge you allow SSA authorization to use your information



AUTHORIZE SOCIAL SECURITY ADMINISTRATION

Before we send you back to Social Security Administration, we need your permission to share your verified identity information.

Please note that only information obtained from the verification process will be shared.

Social Security Administration will receive:

- ✓ Email
- ✓ Middle Name
- ✓ Street
- ✓ State
- ✓ Postal Code
- ✓ Birth Date
- ✓ First Name
- ✓ Last Name
- ✓ City
- ✓ Country
- ✓ SSN

You can remove this access at any time by changing your ID.me account settings.

[Allow](#)

[Deny](#)

∨ [English](#)

Portal Accept obtained, verify terms of service.



Terms of Service

The terms of service in this section apply to all Social Security online services. Depending on the specific Social Security online service you access, you may be asked to agree to added terms to use that service.

By checking I agree to the Terms of Service, I acknowledge the following conditions:

- I understand that I am accessing a U.S. Government system.
- I understand that my usage of this system may be monitored, recorded, and subject to audit.
- I understand that unauthorized or improper use of this system is prohibited and may result in administrative, civil, or criminal penalties and/or other actions.
- I understand that it is a federal crime to:
 - Give false or misleading statements to obtain information in Social Security records;
 - Give false or misleading information to obtain or alter Social Security benefits; or
 - Deceive the Social Security Administration about an individual's identity.
- I understand that the Social Security Administration may stop me from using Social Security online services if it finds or suspects fraud or misuse.
- I accept that I am responsible for properly protecting any information provided to me by the Social Security Administration.
- I agree that the Social Security Administration is not responsible for the improper disclosure of any information that the Social Security Administration has provided to me or any information that is on or from my computer or other device, whether due to my negligence or the wrongful acts of others.

I agree to the Terms of Service.

Next

Exit

[Privacy and Security](#)

[OMB No. 0960-0789](#) [Privacy Policy](#) [Privacy Act Statement](#) [Accessibility Help](#)

Portal Home Page

**Representative
Availability
Portal**

| | | |
|-------|--------|---------------------|
| Group | Region | Availability Period |
| -- | -- | -- |

Monthly Case Cap (optional) 

* Max Reqs Per Day 

Review DSG associated with your identification (only one should be associated with your ID).

Representative Availability Portal

Group: --
Region: --
Availability Period: --

SoloTestGroup
ConTestGroup
HarriettesGroup
GeoTestGroup
HybridTestGroup

Monthly Case Cap (optional) [Ⓞ]
[] x

* Max Reqs Per Day [Ⓞ]
[] x

Next

Solo DSG

Representative Availability Portal

Group: SoloTestGroup
Region: --
Availability Period: --

Region 1
Region 2
Region 3
Region 4
Region 5
Region 6
Region 7
Region 8
Region 9
Region 10

Monthly Case Cap (optional) [Ⓞ]
[] x

* Max Reqs Per Day [Ⓞ]
[] x

Next

Select Region for submission of Availability.

Representative Availability Portal

Group: SoloTestGroup
Region: Region 1
Availability Period: --

8/2023
9/2023
10/2023
11/2023
12/2023
1/2024
2/2024
3/2024
4/2024
5/2024

Monthly Case Cap (optional) [Ⓞ]
[] x

* Max Reqs Per Day [Ⓞ]
[] x

Next

Select the Availability Period for the TSM (Targeted Scheduling Month for submitting availability)

Representative Availability Portal

Group: SoloTestGroup | Region: Region 2 | Availability Period: 1/2024

| Monday | Tuesday | Wednesday | Thursday | Friday | Monthly Case Cap (optional) |
|--|--|--|--|--|--|
| 1 <input checked="" type="checkbox"/> Available | 2 <input type="checkbox"/> Unavailable | 3 <input checked="" type="checkbox"/> Available | 4 <input type="checkbox"/> Unavailable | 5 <input checked="" type="checkbox"/> Available | 60 <input type="text"/> |
| 8 <input type="checkbox"/> Unavailable | 9 <input checked="" type="checkbox"/> Available | 10 <input type="checkbox"/> Unavailable | 11 <input checked="" type="checkbox"/> Available | 12 <input type="checkbox"/> Unavailable | Max Reps Per Day 1 <input type="text"/> |
| 15 <input checked="" type="checkbox"/> Available | 16 <input type="checkbox"/> Unavailable | 17 <input checked="" type="checkbox"/> Available | 18 <input type="checkbox"/> Unavailable | 19 <input checked="" type="checkbox"/> Available | <input type="button" value="Next"/> |
| 22 <input type="checkbox"/> Unavailable | 23 <input checked="" type="checkbox"/> Available | 24 <input type="checkbox"/> Unavailable | 25 <input checked="" type="checkbox"/> Available | 26 <input type="checkbox"/> Unavailable | |
| 29 <input checked="" type="checkbox"/> Available | 30 <input type="checkbox"/> Unavailable | 31 <input type="checkbox"/> Unavailable | | | |

Add rep specific time and daily hearing caps.

Representative Availability Portal

Group: SoloTestGroup | Region: Region 1 | Availability Period: 1/2024 | Monthly Case Cap (optional) : 60

** Reminder: Submitted available hours must be for the time zone of the regional office of the region for which availability is provided.*

Monthly Remarks
(500 characters maximum)

Characters remaining: 500

1 - Monday (copy) [+ Add Rep](#)

| Rep | Full | Time Range | Cap | Remarks |
|-----|-------------------------------------|----------------------|----------------------|----------------------|
| 1 | <input checked="" type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2 | <input checked="" type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 3 | <input checked="" type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

2 - Tuesday

| Rep | Full | Time Range | Cap | Remarks |
|-----|--------------------------|----------------------|----------------------|----------------------|
| 1 | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2 | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 3 | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

3 - Wednesday (copy) [+ Add Rep](#)

| Rep | Full | Time Range | Cap | Remarks |
|-----|-------------------------------------|----------------------|----------------------|----------------------|
| 1 | <input checked="" type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2 | <input checked="" type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 3 | <input checked="" type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

4 - Thursday

| Rep | Full | Time Range | Cap | Remarks |
|-----|--------------------------|----------------------|----------------------|----------------------|
| 1 | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2 | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 3 | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

5 - Friday (copy) [+ Add Rep](#)

| Rep | Full | Time Range | Cap | Remarks |
|-----|-------------------------------------|----------------------|----------------------|----------------------|
| 1 | <input checked="" type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2 | <input checked="" type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 3 | <input checked="" type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

8 - Monday

| Rep | Full | Time Range | Cap | Remarks |
|-----|--------------------------|----------------------|----------------------|----------------------|
| 1 | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2 | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 3 | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

9 - Tuesday (copy) [+ Add Rep](#)

| Rep | Full | Time Range | Cap | Remarks |
|-----|-------------------------------------|----------------------|----------------------|----------------------|
| 1 | <input checked="" type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2 | <input checked="" type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 3 | <input checked="" type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

10 - Wednesday

| Rep | Full | Time Range | Cap | Remarks |
|-----|--------------------------|----------------------|----------------------|----------------------|
| 1 | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2 | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 3 | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

11 - Thursday (copy) [+ Add Rep](#)

| Rep | Full | Time Range | Cap | Remarks |
|-----|-------------------------------------|----------------------|----------------------|----------------------|
| 1 | <input checked="" type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2 | <input checked="" type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 3 | <input checked="" type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Solo Copy feature

| 1 - Monday (done) | | + Add Rep | | |
|--|--------------------------|---------------------------|-----|---------|
| Rep | Full | Time Range | Cap | Remarks |
| 1 <input checked="" type="checkbox"/> | <input type="checkbox"/> | 08:00-14:00 | 4 | |

Paste

| 3 - Wednesday (paste) | | + Add Rep | | |
|--|--------------------------|---------------------------|-----|---------|
| Rep | Full | Time Range | Cap | Remarks |
| 1 <input checked="" type="checkbox"/> | <input type="checkbox"/> | 08:00-14:00 | 4 | |

Done

| 1 - Monday (done) | | + Add Rep | | |
|--|--------------------------|---------------------------|-----|---------|
| Rep | Full | Time Range | Cap | Remarks |
| 1 <input checked="" type="checkbox"/> | <input type="checkbox"/> | 08:00-14:00 | 4 | |

Save or submit monthly availability.

Representative Availability Portal

Group SoloTestGroup
Region Region 2
Availability Period 1/2024
Monthly Case Cap (optional)

** Reminder: Submitted available hours must be for the time zone of the regional office of the region for which availability is provided.*

Monthly Remarks
 (500 characters maximum)

Characters remaining: 500

1 - Monday (done) [+ Add Rep](#)

| Rep | Full | Time Range | Cap | Remarks |
|-------------------------------------|--------------------------|-------------|-----|----------------------|
| 1 | <input type="checkbox"/> | 08:00-14:00 | 4 | <input type="text"/> |
| <input checked="" type="checkbox"/> | | | | |

2 - Tuesday

| Rep | Full | Time Range | Cap | Remarks |
|--------------------------|--------------------------|----------------------|----------------------|----------------------|
| 1 | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="checkbox"/> | | | | |

3 - Wednesday (paste) [+ Add Rep](#)

| Rep | Full | Time Range | Cap | Remarks |
|-------------------------------------|--------------------------|-------------|-----|----------------------|
| 1 | <input type="checkbox"/> | 08:00-14:00 | 4 | <input type="text"/> |
| <input checked="" type="checkbox"/> | | | | |

4 - Thursday

| Rep | Full | Time Range | Cap | Remarks |
|-------------------------------------|---------------------------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="button" value="Save"/> | <input type="button" value="Submit"/> | | | |

5 - Friday (paste) [+ Add Rep](#)

| Rep | Full | Time Range | Cap | Remarks |
|-------------------------------------|--------------------------|-------------|-----|----------------------|
| 1 | <input type="checkbox"/> | 08:00-14:00 | 4 | <input type="text"/> |
| <input checked="" type="checkbox"/> | | | | |

Successfully saved notification.

Representative Availability Portal

Group SoloTestGroup
Region Region 2
Availability Period 1/2024
Monthly Case Cap (optional)

** Reminder: Submitted available hours must be for the time zone of the regional office of the region for which availability is provided.*

Monthly Remarks
 (500 characters maximum)

Characters remaining: 500

1 - Monday (done) [+ Add Rep](#)

| Rep | Full | Time Range | Cap | Remarks |
|-------------------------------------|--------------------------|-------------|-----|----------------------|
| 1 | <input type="checkbox"/> | 08:00-14:00 | 4 | <input type="text"/> |
| <input checked="" type="checkbox"/> | | | | |

2 - Tuesday

| Rep | Full | Time Range | Cap | Remarks |
|--------------------------|--------------------------|----------------------|----------------------|----------------------|
| 1 | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="checkbox"/> | | | | |

3 - Wednesday (paste) [+ Add Rep](#)

| Rep | Full | Time Range | Cap | Remarks |
|-------------------------------------|--------------------------|-------------|-----|----------------------|
| 1 | <input type="checkbox"/> | 08:00-14:00 | 4 | <input type="text"/> |
| <input checked="" type="checkbox"/> | | | | |

4 - Thursday

| Rep | Full | Time Range | Cap | Remarks |
|-------------------------------------|---------------------------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="checkbox"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="button" value="Save"/> | <input type="button" value="Submit"/> | | | |

5 - Friday (paste) [+ Add Rep](#)

| Rep | Full | Time Range | Cap | Remarks |
|-------------------------------------|--------------------------|-------------|-----|----------------------|
| 1 | <input type="checkbox"/> | 08:00-14:00 | 4 | <input type="text"/> |
| <input checked="" type="checkbox"/> | | | | |

✔ Availability has been saved

Review/Confirmation screen and saved.

The screenshot shows a 'Confirmation' dialog box with a close button (X) in the top right corner. The main text reads: 'Choosing "Submit" will lock the availability submission for the month selected and you will be unable to make changes to your monthly availability selections. If you require modifications after submitting your response, please contact SSA's External Liaison Unit at 866-964-1714. Are you sure you want to submit your response?'. Below this is a 'Summary of Availability' section with a scrollable list of dates and their corresponding availability details. At the bottom of the dialog are 'Submit' and 'Cancel' buttons. The background interface shows a table with columns: Rep, Full, Time Range, Cap, Remarks. The table contains several rows, each with a 'Rep' dropdown set to '1' and a checked checkbox. At the bottom of the background interface, there are 'Save' and 'Submit' buttons, and a green notification banner that says 'Availability has been saved' with a close button (X).

| Rep | Full | Time Range | Cap | Remarks |
|-----|------|------------|-----|---------|
| 1 | | | | |
| 1 | | | | |
| 1 | | | | |
| 1 | | | | |
| 1 | | | | |
| 1 | | | | |
| 1 | | | | |

Confirmation

Choosing "Submit" will lock the availability submission for the month selected and you will be unable to make changes to your monthly availability selections. If you require modifications after submitting your response, please contact SSA's External Liaison Unit at 866-964-1714. Are you sure you want to submit your response?

Summary of Availability

- 1/1/2024**
Rep 1 - Available 08:00-14:00 (cap: 4)
- 1/3/2024**
Rep 1 - Available 08:00-14:00 (cap: 4)
- 1/5/2024**
Rep 1 - Available 08:00-14:00 (cap: 4)
- 1/9/2024**
Rep 1 - Available 08:00-14:00 (cap: 4)
- 1/11/2024**
Rep 1 - Available 08:00-14:00 (cap: 4)

✓ Availability has been saved ✕

Availability successfully submitted.

Representative Availability Portal

Group SoloTestGroup
 Region Region 2
 Availability Period 1/2024
 Monthly Case Cap (optional) 60

** Reminder: Submitted available hours must be for the time zone of the regional office of the region for which availability is provided.*

Monthly Remarks

--

| 1 - Monday | | | | | | 2 - Tuesday | | | | | | 3 - Wednesday | | | | | | 4 - Thursday | | | | | |
|------------|------|-------------|-----|---------|--|-------------|------|------------|-----|---------|--|---------------|------|-------------|-----|---------|--|--------------|------|------------|-----|---------|--|
| Rep | Full | Time Range | Cap | Remarks | | Rep | Full | Time Range | Cap | Remarks | | Rep | Full | Time Range | Cap | Remarks | | Rep | Full | Time Range | Cap | Remarks | |
| 1 | ☑ | 08:00-14:00 | 4 | -- | | 1 | ☑ | -- | -- | -- | | 1 | ☑ | 08:00-14:00 | 4 | -- | | 1 | ☑ | -- | -- | -- | |
| ✓ | | | | | | ☑ | | | | | | ✓ | | | | | | ☑ | | | | | |

| 5 - Friday | | | | | |
|------------|------|-------------|-----|---------|--|
| Rep | Full | Time Range | Cap | Remarks | |
| 1 | ☑ | 08:00-14:00 | 4 | -- | |
| ✓ | | | | | |

| 8 - Monday | | | | | | 9 - Tuesday | | | | | | 10 - Wednesday | | | | | | 11 - Thursday | | | | | |
|------------|------|------------|-----|---------|--|-------------|------|------------|-----|---------|--|----------------|------|-------------|-----|---------|--|---------------|------|------------|-----|---------|--|
| Rep | Full | Time Range | Cap | Remarks | | Rep | Full | Time Range | Cap | Remarks | | Rep | Full | Time Range | Cap | Remarks | | Rep | Full | Time Range | Cap | Remarks | |
| 1 | ☑ | -- | -- | -- | | 1 | ☑ | -- | -- | -- | | 1 | ☑ | 08:00-14:00 | 4 | -- | | 1 | ☑ | -- | -- | -- | |
| ✓ | | | | | | ✓ | | | | | | ✓ | | | | | | ✓ | | | | | |

Home screen after successful submission.

Representative Availability Portal

Group SoloTestGroup
 Region Region 2
 Availability Period 1/2024

| Monday | Tuesday | Wednesday | Thursday | Friday | Monthly Case Cap (optional) |
|-------------------|-------------------|-------------------|-------------------|-------------------|--|
| 1 Available | 2 Unavailable | 3 Available | 4 Unavailable | 5 Available | 60 |
| 8 Unavailable | 9 Available | 10 Unavailable | 11 Available | 12 Unavailable | Max Reps Per Day |
| 15 Available | 16 Unavailable | 17 Available | 18 Unavailable | 19 Available | 1 |
| 22 Unavailable | 23 Available | 24 Unavailable | 25 Available | 26 Unavailable | Next |
| 29 Available | 30 Unavailable | 31 Available | | | |

CONSOLIDATED DSG

Representative Availability Portal

Group:
 Region:
 Availability Period:

| Monday | Tuesday | Wednesday | Thursday | Friday |
|--|--|--|--|--|
| 1 <input checked="" type="checkbox"/> Available | 2 <input type="checkbox"/> Unavailable | 3 <input checked="" type="checkbox"/> Available | 4 <input type="checkbox"/> Unavailable | 5 <input checked="" type="checkbox"/> Available |
| 8 <input type="checkbox"/> Unavailable | 9 <input checked="" type="checkbox"/> Available | 10 <input type="checkbox"/> Unavailable | 11 <input checked="" type="checkbox"/> Available | 12 <input type="checkbox"/> Unavailable |
| 15 <input checked="" type="checkbox"/> Available | 16 <input type="checkbox"/> Unavailable | 17 <input checked="" type="checkbox"/> Available | 18 <input type="checkbox"/> Unavailable | 19 <input checked="" type="checkbox"/> Available |
| 22 <input type="checkbox"/> Unavailable | 23 <input checked="" type="checkbox"/> Available | 24 <input type="checkbox"/> Unavailable | 25 <input checked="" type="checkbox"/> Available | 26 <input type="checkbox"/> Unavailable |
| 29 <input checked="" type="checkbox"/> Available | 30 <input type="checkbox"/> Unavailable | 31 <input checked="" type="checkbox"/> Available | | |

Monthly Case Cap (optional)

* Max Reps Per Day

Copy

| 1 - Monday (copy) + Add Rep | | | | |
|---|-------------------------------------|-------------|-----|---------|
| Rep | Full | Time Range | Cap | Remarks |
| 1 <input checked="" type="checkbox"/> | <input type="checkbox"/> | 09:00-14:00 | 4 | |
| 2 <input checked="" type="checkbox"/> | <input type="checkbox"/> | 08:00-13:00 | 5 | |
| 3 <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | | |
| 4 <input checked="" type="checkbox"/> | <input type="checkbox"/> | 08:30-14:00 | 5 | |

Paste

| 3 - Wednesday (paste) + Add Rep | | | | |
|---|-------------------------------------|-------------|-----|---------|
| Rep | Full | Time Range | Cap | Remarks |
| 1 <input checked="" type="checkbox"/> | <input type="checkbox"/> | 09:00-14:00 | 4 | |
| 2 <input checked="" type="checkbox"/> | <input type="checkbox"/> | 08:00-13:00 | 5 | |
| 3 <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | | |
| 4 <input checked="" type="checkbox"/> | <input type="checkbox"/> | 08:30-14:00 | 5 | |

Done

| 1 - Monday (done) + Add Rep | | | | |
|---|-------------------------------------|-------------|-----|---------|
| Rep | Full | Time Range | Cap | Remarks |
| 1 <input checked="" type="checkbox"/> | <input type="checkbox"/> | 09:00-14:00 | 4 | |
| 2 <input checked="" type="checkbox"/> | <input type="checkbox"/> | 08:00-13:00 | 5 | |
| 3 <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | | |
| 4 <input checked="" type="checkbox"/> | <input type="checkbox"/> | 08:30-14:00 | 5 | |

+Add Rep

| | | 11 - Thursday (paste) | | + Add Rep |
|-------------------------------------|--------------------------|-----------------------|-----|-----------|
| Rep | Full | Time Range | Cap | Remarks |
| 1 | <input type="checkbox"/> | 09:00-14:00 | 4 | |
| <input checked="" type="checkbox"/> | | | | |
| 2 | <input type="checkbox"/> | 8:00-13:00 | 5 | |
| <input checked="" type="checkbox"/> | | | | |
| 3 | <input type="checkbox"/> | 09:00-14:00 | 3 | |
| <input checked="" type="checkbox"/> | | | | |
| 4 | <input type="checkbox"/> | 08:30-14:00 | 5 | |
| <input checked="" type="checkbox"/> | | | | |
| 5 | <input type="checkbox"/> | 09:00-13:30 | 3 | |
| <input checked="" type="checkbox"/> | | | | |

Confirmation review page.

Confirmation ✕

Choosing "Submit" will lock the availability submission for the month selected and you will be unable to make changes to your monthly availability selections. If you require modifications after submitting your response, please contact SSA's External Liaison Unit at 866-964-1714.

Are you sure you want to submit your response?

Summary of Availability

1/1/2024
Rep 1 - Available 09:00-14:00 (cap: 4)
Rep 2 - Available 08:00-13:00 (cap: 5)
Rep 3 - Available full day
Rep 4 - Available 08:30-14:00 (cap: 5)

1/3/2024
Rep 1 - Available 09:00-14:00 (cap: 4)
Rep 2 - Available 08:00-13:00 (cap: 5)
Rep 3 - Available full day
Rep 4 - Available 08:30-14:00 (cap: 5)

1/5/2024
Rep 1 - Available 09:00-14:00 (cap: 4)
Rep 2 - Available 08:00-13:00 (cap: 5)
Rep 3 - Available full day
Rep 4 - Available 08:30-14:00 (cap: 5)

1/9/2024
Rep 1 - Available 09:00-14:00 (cap: 4)
Rep 2 - Available 08:00-13:00 (cap: 5)
Rep 3 - Available full day
Rep 4 - Available 08:30-14:00 (cap: 5)

1/11/2024
Rep 1 - Available 09:00-14:00 (cap: 4)
Rep 2 - Available 08:00-13:00 (cap: 5)
Rep 3 - Available full day
Rep 4 - Available 08:30-14:00 (cap: 5)

Confirmation of submission through portal

Representative Availability Portal

Group: ConTestGroup Region: Region 1 Availability Period: 1/2024 Monthly Case Cap (optional): 200

** Reminder: Submitted available hours must be for the time zone of the regional office of the region for which availability is provided.*

Monthly Remarks: --

| 1 - Monday | | | | | 2 - Tuesday | | | | | 3 - Wednesday | | | | | 4 - Thursday | | | | | 5 - Friday | | | | |
|------------|------|-------------|-----|---------|-------------|------|------------|-----|---------|---------------|------|-------------|-----|---------|--------------|------|------------|-----|---------|------------|------|-------------|-----|---------|
| Rep | Full | Time Range | Cap | Remarks | Rep | Full | Time Range | Cap | Remarks | Rep | Full | Time Range | Cap | Remarks | Rep | Full | Time Range | Cap | Remarks | Rep | Full | Time Range | Cap | Remarks |
| 1 | ✓ | 09:00-14:00 | 4 | -- | 1 | ⊗ | -- | -- | -- | 1 | ⊗ | 09:00-14:00 | 4 | -- | 1 | ⊗ | -- | -- | -- | 1 | ⊗ | 09:00-14:00 | 4 | -- |
| 2 | ✓ | 08:00-13:00 | 5 | -- | 2 | ⊗ | -- | -- | -- | 2 | ⊗ | 08:00-13:00 | 5 | -- | 2 | ⊗ | -- | -- | -- | 2 | ⊗ | 08:00-13:00 | 5 | -- |
| 3 | ✓ | -- | -- | -- | 3 | ⊗ | -- | -- | -- | 3 | ✓ | -- | -- | -- | 3 | ⊗ | -- | -- | -- | 3 | ✓ | -- | -- | -- |
| 4 | ✓ | 08:30-14:00 | 5 | -- | 4 | ⊗ | -- | -- | -- | 4 | ⊗ | 08:30-14:00 | 5 | -- | 4 | ⊗ | -- | -- | -- | 4 | ⊗ | 08:30-14:00 | 5 | -- |

| 8 - Monday | | | | | 9 - Tuesday | | | | | 10 - Wednesday | | | | | 11 - Thursday | | | | | 12 - Friday | | | | |
|------------|------|------------|-----|---------|-------------|------|-------------|-----|---------|----------------|------|------------|-----|---------|---------------|------|-------------|-----|---------|-------------|------|------------|-----|---------|
| Rep | Full | Time Range | Cap | Remarks | Rep | Full | Time Range | Cap | Remarks | Rep | Full | Time Range | Cap | Remarks | Rep | Full | Time Range | Cap | Remarks | Rep | Full | Time Range | Cap | Remarks |
| 1 | ⊗ | -- | -- | -- | 1 | ✓ | 09:00-14:00 | 4 | -- | 1 | ⊗ | -- | -- | -- | 1 | ✓ | 09:00-14:00 | 4 | -- | 1 | ⊗ | -- | -- | -- |
| 2 | ⊗ | -- | -- | -- | 2 | ✓ | 08:00-13:00 | 5 | -- | 2 | ⊗ | -- | -- | -- | 2 | ✓ | 08:00-13:00 | 5 | -- | 2 | ⊗ | -- | -- | -- |
| 3 | ⊗ | -- | -- | -- | 3 | ✓ | -- | -- | -- | 3 | ⊗ | -- | -- | -- | 3 | ✓ | -- | -- | -- | 3 | ⊗ | -- | -- | -- |
| 4 | ⊗ | -- | -- | -- | 4 | ✓ | 08:30-14:00 | 5 | -- | 4 | ⊗ | -- | -- | -- | 4 | ✓ | 08:30-14:00 | 5 | -- | 4 | ⊗ | -- | -- | -- |
| | | | | | | | | | | | | | | | 5 | ✓ | 09:00-13:30 | 3 | -- | | | | | |

| 15 - Monday | | | | | 16 - Tuesday | | | | | 17 - Wednesday | | | | | 18 - Thursday | | | | | 19 - Friday | | | | |
|-------------|------|-------------|-----|---------|--------------|------|------------|-----|---------|----------------|------|-------------|-----|---------|---------------|------|------------|-----|---------|-------------|------|-------------|-----|---------|
| Rep | Full | Time Range | Cap | Remarks | Rep | Full | Time Range | Cap | Remarks | Rep | Full | Time Range | Cap | Remarks | Rep | Full | Time Range | Cap | Remarks | Rep | Full | Time Range | Cap | Remarks |
| 1 | ✓ | 09:00-14:00 | 4 | -- | 1 | ⊗ | -- | -- | -- | 1 | ⊗ | 09:00-14:00 | 4 | -- | 1 | ⊗ | -- | -- | -- | 1 | ⊗ | 09:00-14:00 | 4 | -- |
| 2 | ✓ | 08:00-13:00 | 5 | -- | 2 | ⊗ | -- | -- | -- | 2 | ⊗ | 08:00-13:00 | 5 | -- | 2 | ⊗ | -- | -- | -- | 2 | ⊗ | 08:00-13:00 | 5 | -- |
| 3 | ✓ | -- | -- | -- | 3 | ⊗ | -- | -- | -- | 3 | ⊗ | -- | -- | -- | 3 | ✓ | -- | -- | -- | 3 | ✓ | -- | -- | -- |

✓ Availability successfully submitted. Enter availability for another region ✗

Home screen after successful submission.

Representative Availability Portal

Group: ConTestGroup Region: Region 1 Availability Period: 1/2024

| Monday | Tuesday | Wednesday | Thursday | Friday |
|-------------------|-------------------|-------------------|-------------------|-------------------|
| 1 Available | 2 Unavailable | 3 Available | 4 Unavailable | 5 Available |
| 8 Unavailable | 9 Available | 10 Unavailable | 11 Available | 12 Unavailable |
| 15 Available | 16 Unavailable | 17 Available | 18 Unavailable | 19 Available |
| 22 Unavailable | 23 Available | 24 Unavailable | 25 Available | 26 Unavailable |
| 29 Available | 30 Unavailable | 31 Available | | |

Monthly Case Cap (optional): 200
 Max Reprs Per Day: 4
Next

GEOGRAPHIC DSG

Representative Availability Portal

Group: GeoTestGroup | Region: Region 1 | Availability Period: 1/2024

| Monday | Tuesday | Wednesday | Thursday | Friday | Monthly Case Cap (optional) |
|-------------------|-------------------|-------------------|-------------------|-------------------|---|
| 1 Unavailable | 2 Available | 3 Unavailable | 4 Available | 5 Unavailable | 200 <input type="text"/> |
| 8 Available | 9 Unavailable | 10 Available | 11 Unavailable | 12 Available | * Max Reps Per Day <input type="text"/> |
| 15 Unavailable | 16 Available | 17 Unavailable | 18 Available | 19 Unavailable | 3 <input type="text"/> |
| 22 Available | 23 Unavailable | 24 Available | 25 Unavailable | 26 Available | <input type="button" value="Next"/> |
| 29 Unavailable | 30 Available | 31 Unavailable | | | |

Copy

2 - Tuesday (copy) + Add Rep

| Rep | Full | Time Range | Cap | Locations | Remarks |
|-----|-------------------------------------|----------------------|-----|---|----------------------|
| 1 | <input checked="" type="checkbox"/> | <input type="text"/> | 5 | CT <input type="text"/> HARTFORD <input type="text"/> -- <input type="text"/> -- <input type="text"/> | <input type="text"/> |
| 2 | <input checked="" type="checkbox"/> | <input type="text"/> | 4 | MA <input type="text"/> BOSTON <input type="text"/> -- <input type="text"/> -- <input type="text"/> | <input type="text"/> |
| 3 | <input checked="" type="checkbox"/> | <input type="text"/> | 5 | ME <input type="text"/> PORTLAND ME <input type="text"/> -- <input type="text"/> -- <input type="text"/> | <input type="text"/> |

Paste

4 - Thursday (paste) + Add Rep

| Rep | Full | Time Range | Cap | Locations | Remarks |
|-----|-------------------------------------|----------------------|-----|---|----------------------|
| 1 | <input checked="" type="checkbox"/> | <input type="text"/> | 5 | CT <input type="text"/> HARTFORD <input type="text"/> -- <input type="text"/> -- <input type="text"/> | <input type="text"/> |
| 2 | <input checked="" type="checkbox"/> | <input type="text"/> | 4 | MA <input type="text"/> BOSTON <input type="text"/> -- <input type="text"/> -- <input type="text"/> | <input type="text"/> |
| 3 | <input checked="" type="checkbox"/> | <input type="text"/> | 5 | ME <input type="text"/> PORTLAND ME <input type="text"/> -- <input type="text"/> -- <input type="text"/> | <input type="text"/> |

Done

| 2 - Tuesday (done) | | | | | | + Add Rep |
|--------------------|-------------------------------------|----------------------|-----|---|----------------------|---------------------------|
| Rep | Full | Time Range | Cap | Locations | Remarks | |
| 1 | <input checked="" type="checkbox"/> | <input type="text"/> | 5 | CT <input type="text"/> HARTFORD <input type="text"/> -- <input type="text"/> -- <input type="text"/> | <input type="text"/> | |
| 2 | <input checked="" type="checkbox"/> | <input type="text"/> | 4 | MA <input type="text"/> BOSTON <input type="text"/> -- <input type="text"/> -- <input type="text"/> | <input type="text"/> | |
| 3 | <input checked="" type="checkbox"/> | <input type="text"/> | 5 | ME <input type="text"/> PORTLAND ME <input type="text"/> -- <input type="text"/> -- <input type="text"/> | <input type="text"/> | |

+Add Rep

| 8 - Monday (copy) | | | | | | + Add Rep |
|-------------------|-------------------------------------|----------------------|-----|---|----------------------|---------------------------|
| Rep | Full | Time Range | Cap | Locations | Remarks | |
| 1 | <input checked="" type="checkbox"/> | <input type="text"/> | 5 | RI <input type="text"/> PROVIDENCE <input type="text"/> -- <input type="text"/> -- <input type="text"/> | <input type="text"/> | |
| 2 | <input checked="" type="checkbox"/> | <input type="text"/> | 4 | NH <input type="text"/> MANCHESTER <input type="text"/> -- <input type="text"/> -- <input type="text"/> | <input type="text"/> | |
| 3 | <input checked="" type="checkbox"/> | <input type="text"/> | 5 | MA <input type="text"/> SPRINGFIELD <input type="text"/> -- <input type="text"/> -- <input type="text"/> | <input type="text"/> | |
| 4 | <input checked="" type="checkbox"/> | <input type="text"/> | 3 | CT <input type="text"/> NEW HAVEN <input type="text"/> -- <input type="text"/> -- <input type="text"/> | <input type="text"/> | |

Successfully saved information.

Representative Availability Portal

Group: GeoTestGroup Region: Region 1 Availability Period: 1/2024 Monthly Case Cap (optional): 200

** Reminder: Submitted available hours must be for the time zone of the regional office of the region for which availability is provided.*

Monthly Remarks (500 characters maximum)

 Characters remaining: 500

| 1 - Monday | | | | | | 2 - Tuesday (done) | | | | | | 3 - Wednesday | | | | | |
|------------|--------------------------|------------|-----|----------------|---------|--------------------|-------------------------------------|------------|-----|----------------|---------|---------------|--------------------------|------------|-----|-----------|---------|
| Rep | Full | Time Range | Cap | Locations | Remarks | Rep | Full | Time Range | Cap | Locations | Remarks | Rep | Full | Time Range | Cap | Locations | Remarks |
| 1 | <input type="checkbox"/> | | | CT HARTFORD | | 1 | <input checked="" type="checkbox"/> | | 5 | CT HARTFORD | | 1 | <input type="checkbox"/> | | | | |
| 2 | <input type="checkbox"/> | | | MA BOSTON | | 2 | <input checked="" type="checkbox"/> | | 4 | MA BOSTON | | 2 | <input type="checkbox"/> | | | | |
| 3 | <input type="checkbox"/> | | | ME PORTLAND ME | | 3 | <input checked="" type="checkbox"/> | | 5 | ME PORTLAND ME | | 3 | <input type="checkbox"/> | | | | |

| 4 - Thursday (paste) | | | | | | 5 - Friday | | | | | |
|----------------------|-------------------------------------|------------|-----|----------------|---------|------------|--------------------------|------------|-----|-----------|---------|
| Rep | Full | Time Range | Cap | Locations | Remarks | Rep | Full | Time Range | Cap | Locations | Remarks |
| 1 | <input checked="" type="checkbox"/> | | 5 | CT HARTFORD | | 1 | <input type="checkbox"/> | | | | |
| 2 | <input checked="" type="checkbox"/> | | 4 | MA BOSTON | | 2 | <input type="checkbox"/> | | | | |
| 3 | <input checked="" type="checkbox"/> | | 5 | ME PORTLAND ME | | 3 | <input type="checkbox"/> | | | | |

| 8 - Monday (paste) | | | | | | 9 - Tuesday | | | | | | 10 - Wednesday (paste) | | | | | |
|--------------------|-------------------------------------|------------|-----|---------------|---------|-------------|-------------------------------------|------------|-----|---------------|---------|------------------------|-------------------------------------|------------|-----|---------------|---------|
| Rep | Full | Time Range | Cap | Locations | Remarks | Rep | Full | Time Range | Cap | Locations | Remarks | Rep | Full | Time Range | Cap | Locations | Remarks |
| 1 | <input checked="" type="checkbox"/> | | 5 | RI PROVIDENCE | | 1 | <input checked="" type="checkbox"/> | | 5 | RI PROVIDENCE | | 1 | <input checked="" type="checkbox"/> | | 5 | RI PROVIDENCE | |

Availability has been saved

Confirmation review page.

Confirmation ✕

Choosing "Submit" will lock the availability submission for the month selected and you will be unable to make changes to your monthly availability selections. If you require modifications after submitting your response, please contact SSA's External Liaison Unit at 866-964-1714.

Are you sure you want to submit your response?

Summary of Availability

1/2/2024
 Rep 1 - Available full day (cap: 5) in CT(HARTFORD)
 Rep 2 - Available full day (cap: 4) in MA(BOSTON)
 Rep 3 - Available full day (cap: 5) in ME(PORTLAND ME)

1/4/2024
 Rep 1 - Available full day (cap: 5) in CT(HARTFORD)
 Rep 2 - Available full day (cap: 4) in MA(BOSTON)
 Rep 3 - Available full day (cap: 5) in ME(PORTLAND ME)

1/8/2024
 Rep 1 - Available full day (cap: 5) in RI(PROVIDENCE)
 Rep 2 - Available full day (cap: 4) in NH(MANCHESTER)
 Rep 3 - Available full day (cap: 5) in MA(SPRINGFIELD)
 Rep 4 - Available full day (cap: 3) in CT(NEW HAVEN)

1/10/2024
 Rep 1 - Available full day (cap: 5) in RI(PROVIDENCE)
 Rep 2 - Available full day (cap: 4) in NH(MANCHESTER)
 Rep 3 - Available full day (cap: 5) in MA(SPRINGFIELD)
 Rep 4 - Available full day (cap: 3) in CT(NEW HAVEN)

1/12/2024
 Rep 1 - Available full day (cap: 5) in RI(PROVIDENCE)
 Rep 2 - Available full day (cap: 4) in NH(MANCHESTER)
 Rep 3 - Available full day (cap: 5) in MA(SPRINGFIELD)
 Rep 4 - Available full day (cap: 3) in CT(NEW HAVEN)

1/16/2024

Successful submission through portal.

Representative Availability Portal

Group: GeoTestGroup Region: Region 1 Availability Period: 1/2024 Monthly Case Cap (optional): 200

**Reminder: Submitted available hours must be for the time zone of the regional office of the region for which availability is provided.*

Monthly Remarks: --

| 1 - Monday | | | | | | 2 - Tuesday | | | | | | 3 - Wednesday | | | | | | 4 - Thursday | | | | | | 5 - Friday | | | | | |
|------------|------|------------|-----|-----------|---------|-------------|------|------------|-----|---------------|---------|---------------|------|------------|-----|-----------|---------|--------------|------|------------|-----|---------------|---------|------------|------|------------|-----|-----------|---------|
| Rep | Full | Time Range | Cap | Locations | Remarks | Rep | Full | Time Range | Cap | Locations | Remarks | Rep | Full | Time Range | Cap | Locations | Remarks | Rep | Full | Time Range | Cap | Locations | Remarks | Rep | Full | Time Range | Cap | Locations | Remarks |
| 1 | ☑ | -- | -- | -- | -- | 1 | ✓ | -- | 5 | CTHARTFORD | -- | 1 | ☑ | -- | -- | -- | -- | 1 | ✓ | -- | 5 | CTHARTFORD | -- | 1 | ☑ | -- | -- | -- | -- |
| 2 | ☑ | -- | -- | -- | -- | 2 | ✓ | -- | 4 | MABOSTON | -- | 2 | ☑ | -- | -- | -- | -- | 2 | ✓ | -- | 4 | MABOSTON | -- | 2 | ☑ | -- | -- | -- | -- |
| 3 | ☑ | -- | -- | -- | -- | 3 | ✓ | -- | 5 | MEPORTLAND ME | -- | 3 | ☑ | -- | -- | -- | -- | 3 | ✓ | -- | 5 | MEPORTLAND ME | -- | 3 | ☑ | -- | -- | -- | -- |

| 8 - Monday | | | | | | 9 - Tuesday | | | | | | 10 - Wednesday | | | | | | 11 - Thursday | | | | | | 12 - Friday | | | | | |
|------------|------|------------|-----|---------------|---------|-------------|------|------------|-----|-----------|---------|----------------|------|------------|-----|---------------|---------|---------------|------|------------|-----|-----------|---------|-------------|------|------------|-----|---------------|---------|
| Rep | Full | Time Range | Cap | Locations | Remarks | Rep | Full | Time Range | Cap | Locations | Remarks | Rep | Full | Time Range | Cap | Locations | Remarks | Rep | Full | Time Range | Cap | Locations | Remarks | Rep | Full | Time Range | Cap | Locations | Remarks |
| 1 | ✓ | -- | 5 | RIPROVIDENCE | -- | 1 | ☑ | -- | -- | -- | -- | 1 | ✓ | -- | 5 | RIPROVIDENCE | -- | 1 | ☑ | -- | -- | -- | -- | 1 | ✓ | -- | 5 | RIPROVIDENCE | -- |
| 2 | ✓ | -- | 4 | NHMANCHESTER | -- | 2 | ☑ | -- | -- | -- | -- | 2 | ✓ | -- | 4 | NHMANCHESTER | -- | 2 | ☑ | -- | -- | -- | -- | 2 | ✓ | -- | 4 | NHMANCHESTER | -- |
| 3 | ✓ | -- | 5 | MASPRINGFIELD | -- | 3 | ☑ | -- | -- | -- | -- | 3 | ✓ | -- | 5 | MASPRINGFIELD | -- | 3 | ☑ | -- | -- | -- | -- | 3 | ✓ | -- | 5 | MASPRINGFIELD | -- |
| 4 | ✓ | -- | 3 | CTNEW HAVEN | -- | 4 | ☑ | -- | -- | -- | -- | 4 | ✓ | -- | 3 | CTNEW HAVEN | -- | 4 | ☑ | -- | -- | -- | -- | 4 | ✓ | -- | 3 | CTNEW HAVEN | -- |

| 15 - Monday | | | | | | 16 - Tuesday | | | | | | 17 - Wednesday | | | | | | 18 - Thursday | | | | | | 19 - Friday | | | | | |
|-------------|------|------------|-----|-----------|---------|--------------|------|------------|-----|---------------|---------|----------------|------|------------|-----|-----------|---------|---------------|------|------------|-----|---------------|---------|-------------|------|------------|-----|-----------|---------|
| Rep | Full | Time Range | Cap | Locations | Remarks | Rep | Full | Time Range | Cap | Locations | Remarks | Rep | Full | Time Range | Cap | Locations | Remarks | Rep | Full | Time Range | Cap | Locations | Remarks | Rep | Full | Time Range | Cap | Locations | Remarks |
| 1 | ☑ | -- | -- | -- | -- | 1 | ✓ | -- | 5 | CTHARTFORD | -- | 1 | ☑ | -- | -- | -- | -- | 1 | ✓ | -- | 5 | CTHARTFORD | -- | 1 | ☑ | -- | -- | -- | -- |
| 2 | ☑ | -- | -- | -- | -- | 2 | ✓ | -- | 4 | MABOSTON | -- | 2 | ☑ | -- | -- | -- | -- | 2 | ✓ | -- | 4 | MABOSTON | -- | 2 | ☑ | -- | -- | -- | -- |
| 3 | ☑ | -- | -- | -- | -- | 3 | ✓ | -- | 5 | MEPORTLAND ME | -- | 3 | ☑ | -- | -- | -- | -- | 3 | ✓ | -- | 5 | MEPORTLAND ME | -- | 3 | ☑ | -- | -- | -- | -- |

✓ Availability successfully submitted. Enter availability for another region ✕

Home screen after successful submission.

Representative Availability Portal

Group: GeoTestGroup Region: Region 1 Availability Period: 1/2024

| Monday | Tuesday | Wednesday | Thursday | Friday | Monthly Case Cap (optional) 200 |
|-------------------|-------------------|-------------------|-------------------|-------------------|---|
| 1 Unavailable | 2 Available | 3 Unavailable | 4 Available | 5 Unavailable | Max Reps Per Day 3 Next |
| 8 Available | 9 Unavailable | 10 Available | 11 Unavailable | 12 Available | |
| 15 Unavailable | 16 Available | 17 Unavailable | 18 Available | 19 Unavailable | |
| 22 Available | 23 Unavailable | 24 Available | 25 Unavailable | 26 Available | |
| 29 Unavailable | 30 Available | 31 Unavailable | | | |

HYBRID DSG

Representative Availability Portal

Group: HybridTestGroup | Region: Region 1 | Availability Period: 1/2024

| Monday | Tuesday | Wednesday | Thursday | Friday |
|--|--|--|--|--|
| 1 <input type="checkbox"/> Unavailable | 2 <input checked="" type="checkbox"/> Available | 3 <input type="checkbox"/> Unavailable | 4 <input type="checkbox"/> Unavailable | 5 <input checked="" type="checkbox"/> Available |
| 8 <input checked="" type="checkbox"/> Available | 9 <input type="checkbox"/> Unavailable | 10 <input checked="" type="checkbox"/> Available | 11 <input type="checkbox"/> Unavailable | 12 <input type="checkbox"/> Unavailable |
| 15 <input type="checkbox"/> Unavailable | 16 <input checked="" type="checkbox"/> Available | 17 <input type="checkbox"/> Unavailable | 18 <input checked="" type="checkbox"/> Available | 19 <input type="checkbox"/> Unavailable |
| 22 <input checked="" type="checkbox"/> Available | 23 <input type="checkbox"/> Unavailable | 24 <input checked="" type="checkbox"/> Available | 25 <input type="checkbox"/> Unavailable | 26 <input checked="" type="checkbox"/> Available |
| 29 <input type="checkbox"/> Unavailable | 30 <input checked="" type="checkbox"/> Available | 31 <input type="checkbox"/> Unavailable | | |

Monthly Case Cap (optional)

Max Reps Per Day *

[Next](#)

Copy

| 2 - Tuesday (copy) + Add Rep | | | | | |
|---|-------------------------------------|----------------------|-----|-------|----------------------|
| Rep | Full | Time Range | Cap | Name | Remarks |
| 1 | <input checked="" type="checkbox"/> | <input type="text"/> | 4 | Rep 1 | <input type="text"/> |
| 2 | <input type="checkbox"/> | 09:00-14:00 | 5 | Rep 2 | <input type="text"/> |
| 3 | <input checked="" type="checkbox"/> | <input type="text"/> | 4 | Rep3 | <input type="text"/> |

Paste

| 5 - Friday (paste) + Add Rep | | | | | |
|---|-------------------------------------|----------------------|-----|-------|----------------------|
| Rep | Full | Time Range | Cap | Name | Remarks |
| 1 | <input checked="" type="checkbox"/> | <input type="text"/> | 4 | Rep 1 | <input type="text"/> |
| 2 | <input type="checkbox"/> | 09:00-14:00 | 5 | Rep 2 | <input type="text"/> |
| 3 | <input checked="" type="checkbox"/> | <input type="text"/> | 4 | Rep 3 | <input type="text"/> |


Done

| 2 - Tuesday (done) + Add Rep | | | | | |
|--|-------------------------------------|----------------------|-----|-------|----------------------|
| Rep | Full | Time Range | Cap | Name | Remarks |
| 1 | <input checked="" type="checkbox"/> | <input type="text"/> | 4 | Rep 1 | <input type="text"/> |
| 2 | <input type="checkbox"/> | 09:00-14:00 | 5 | Rep 2 | <input type="text"/> |
| 3 | <input checked="" type="checkbox"/> | <input type="text"/> | 4 | Rep3 | <input type="text"/> |

+Add Rep

| 16 - Tuesday (paste) + Add Rep | | | | | |
|--|-------------------------------------|----------------------|-----|-------|----------------------|
| Rep | Full | Time Range | Cap | Name | Remarks |
| 1 | <input checked="" type="checkbox"/> | <input type="text"/> | 4 | Rep 1 | <input type="text"/> |
| 2 | <input type="checkbox"/> | 09:00-14:00 | 5 | Rep 2 | <input type="text"/> |
| 3 | <input checked="" type="checkbox"/> | <input type="text"/> | 4 | Rep 3 | <input type="text"/> |
| 4 | <input type="checkbox"/> | 09:30-15:00 | 5 | Rep 4 | <input type="text"/> |

Saved availability.


Representative Availability Portal

Group: HybridTestGroup Region: Region 1 Availability Period: 1/2024 Monthly Case Cap (optional) [Ⓢ]: 150

* Reminder: Submitted available hours must be for the time zone of the regional office of the region for which availability is provided.

Monthly Remarks [Ⓢ]
 (500 characters maximum)

Characters remaining: 500

| 1 - Monday | | | | | | 2 - Tuesday (done) + Add Rep | | | | | | 3 - Wednesday | | | | | |
|------------|--------------------------|------------|-----|------|---------|---|-------------------------------------|-------------|-----|-------|---------|---------------|--------------------------|------------|-----|------|---------|
| Rep | Full | Time Range | Cap | Name | Remarks | Rep | Full | Time Range | Cap | Name | Remarks | Rep | Full | Time Range | Cap | Name | Remarks |
| 1 | <input type="checkbox"/> | | | | | 1 | <input checked="" type="checkbox"/> | | 4 | Rep 1 | | 1 | <input type="checkbox"/> | | | | |
| 2 | <input type="checkbox"/> | | | | | 2 | <input type="checkbox"/> | 09:00-14:00 | 5 | Rep 2 | | 2 | <input type="checkbox"/> | | | | |
| 3 | <input type="checkbox"/> | | | | | 3 | <input checked="" type="checkbox"/> | | 4 | Rep 3 | | 3 | <input type="checkbox"/> | | | | |

| 4 - Thursday | | | | | | 5 - Friday (paste) + Add Rep | | | | | |
|--------------|--------------------------|------------|-----|------|---------|---|-------------------------------------|-------------|-----|-------|---------|
| Rep | Full | Time Range | Cap | Name | Remarks | Rep | Full | Time Range | Cap | Name | Remarks |
| 1 | <input type="checkbox"/> | | | | | 1 | <input checked="" type="checkbox"/> | | 4 | Rep 1 | |
| 2 | <input type="checkbox"/> | | | | | 2 | <input type="checkbox"/> | 09:00-14:00 | 5 | Rep 2 | |
| 3 | <input type="checkbox"/> | | | | | 3 | <input checked="" type="checkbox"/> | | 4 | Rep 3 | |

| 8 - Monday (paste) + Add Rep | | | | | | 9 - Tuesday | | | | | | 10 - Wednesday (paste) + Add Rep | | | | | |
|---|-------------------------------------|------------|-----|-------|---------|-------------|--------------------------|------------|-----|------|---------|---|-------------------------------------|-------------|-----|-------|---------|
| Rep | Full | Time Range | Cap | Name | Remarks | Rep | Full | Time Range | Cap | Name | Remarks | Rep | Full | Time Range | Cap | Name | Remarks |
| 1 | <input checked="" type="checkbox"/> | | 4 | Rep 1 | | 1 | <input type="checkbox"/> | | | | | 1 | <input checked="" type="checkbox"/> | | 4 | Rep 1 | |
| 2 | <input type="checkbox"/> | | 5 | Rep 2 | | 2 | <input type="checkbox"/> | | | | | 2 | <input type="checkbox"/> | 09:00-14:00 | 5 | Rep 2 | |

✔ Availability has been saved ✖

Review/Confirmation screen.

Confirmation ✕

Choosing "Submit" will lock the availability submission for the month selected and you will be unable to make changes to your monthly availability selections. If you require modifications after submitting your response, please contact SSA's External Liaison Unit at 866-964-1714.

Are you sure you want to submit your response?

Summary of Availability

1/2/2024
 Rep 1 - Available full day (cap: 4)
 Rep 2 - Available 09:00-14:00 (cap: 5)
 Rep 3 - Available full day (cap: 4)

1/5/2024
 Rep 1 - Available full day (cap: 4)
 Rep 2 - Available 09:00-14:00 (cap: 5)
 Rep 3 - Available full day (cap: 4)

1/8/2024
 Rep 1 - Available full day (cap: 4)
 Rep 2 - Available 09:00-14:00 (cap: 5)
 Rep 3 - Available full day (cap: 4)

1/10/2024
 Rep 1 - Available full day (cap: 4)
 Rep 2 - Available 09:00-14:00 (cap: 5)
 Rep 3 - Available full day (cap: 4)

1/16/2024
 Rep 1 - Available full day (cap: 4)
 Rep 2 - Available 09:00-14:00 (cap: 5)
 Rep 3 - Available full day (cap: 4)
 Rep 4 - Available 09:30-15:00 (cap: 5)

1/18/2024
 Rep 1 - Available full day
 Rep 2 - Available full day

After submission

Representative Availability Portal

Group: HybridTest(Group) Region: Region 1 Availability Period: 1/2024 Monthly Case Cap (optional): 150

** Reminder: Submitted available hours must be for the time zone of the regional office of the region for which availability is provided.*

Monthly Remarks

...

| 1 - Monday | | | | | 2 - Tuesday | | | | | 3 - Wednesday | | | | | 4 - Thursday | | | | | 5 - Friday | | | | |
|------------|------|------------|-----|------|-------------|------|-------------|-----|-------|---------------|------|------------|-----|------|--------------|------|------------|-----|------|------------|------|-------------|-----|-------|
| Rep | Full | Time Range | Cap | Name | Rep | Full | Time Range | Cap | Name | Rep | Full | Time Range | Cap | Name | Rep | Full | Time Range | Cap | Name | Rep | Full | Time Range | Cap | Name |
| 1 | ☉ | -- | -- | -- | 1 | ✓ | -- | 4 | Rep 1 | 1 | ☉ | -- | -- | -- | 1 | ☉ | -- | -- | -- | 1 | ✓ | -- | 4 | Rep 1 |
| 2 | ☉ | -- | -- | -- | 2 | ☉ | 09:00-14:00 | 5 | Rep 2 | 2 | ☉ | -- | -- | -- | 2 | ☉ | -- | -- | -- | 2 | ☉ | 09:00-14:00 | 5 | Rep 2 |
| 3 | ☉ | -- | -- | -- | 3 | ✓ | -- | 4 | Rep 3 | 3 | ☉ | -- | -- | -- | 3 | ☉ | -- | -- | -- | 3 | ✓ | -- | 4 | Rep 3 |


| 8 - Monday | | | | | 9 - Tuesday | | | | | 10 - Wednesday | | | | | 11 - Thursday | | | | | 12 - Friday | | | | |
|------------|------|-------------|-----|-------|-------------|------|------------|-----|------|----------------|------|-------------|-----|-------|---------------|------|------------|-----|------|-------------|------|------------|-----|------|
| Rep | Full | Time Range | Cap | Name | Rep | Full | Time Range | Cap | Name | Rep | Full | Time Range | Cap | Name | Rep | Full | Time Range | Cap | Name | Rep | Full | Time Range | Cap | Name |
| 1 | ✓ | -- | 4 | Rep 1 | 1 | ☉ | -- | -- | -- | 1 | ✓ | -- | 4 | Rep 1 | 1 | ☉ | -- | -- | -- | 1 | ☉ | -- | -- | -- |
| 2 | ☉ | 09:00-14:00 | 5 | Rep 2 | 2 | ☉ | -- | -- | -- | 2 | ☉ | 09:00-14:00 | 5 | Rep 2 | 2 | ☉ | -- | -- | -- | 2 | ☉ | -- | -- | -- |
| 3 | ✓ | -- | 4 | Rep 3 | 3 | ☉ | -- | -- | -- | 3 | ✓ | -- | 4 | Rep 3 | 3 | ☉ | -- | -- | -- | 3 | ☉ | -- | -- | -- |

| 15 - Monday | | | | | 16 - Tuesday | | | | | 17 - Wednesday | | | | | 18 - Thursday | | | | | 19 - Friday | | | | |
|-------------|------|------------|-----|------|--------------|------|-------------|-----|-------|----------------|------|------------|-----|------|---------------|------|------------|-----|------|-------------|------|------------|-----|------|
| Rep | Full | Time Range | Cap | Name | Rep | Full | Time Range | Cap | Name | Rep | Full | Time Range | Cap | Name | Rep | Full | Time Range | Cap | Name | Rep | Full | Time Range | Cap | Name |
| 1 | ☉ | -- | -- | -- | 1 | ✓ | -- | 4 | Rep 1 | 1 | ☉ | -- | -- | -- | 1 | ✓ | -- | -- | -- | 1 | ☉ | -- | -- | -- |
| 2 | ☉ | -- | -- | -- | 2 | ☉ | 09:00-14:00 | 5 | Rep 2 | 2 | ☉ | -- | -- | -- | 2 | ✓ | -- | -- | -- | 2 | ☉ | -- | -- | -- |
| 3 | ☉ | -- | -- | -- | 3 | ✓ | -- | 4 | Rep 3 | 3 | ☉ | -- | -- | -- | 3 | ✓ | -- | -- | -- | 3 | ☉ | -- | -- | -- |
| | | | | | 4 | ✓ | 09:30-15:00 | 5 | Rep 4 | | | | | | 4 | ✓ | -- | -- | -- | | | | | |

✓ Availability successfully submitted. [Enter availability for another region](#) ✕

22 - Monday 23 - Tuesday 24 - Wednesday 25 - Thursday 26 - Friday

Home screen after successful submission.

 **Representative Availability Portal**

Group: HybridTestGroup | Region: Region 1 | Availability Period: 1/2024

| Monday | Tuesday | Wednesday | Thursday | Friday | Monthly Case Cap (optional) ① |
|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------------------|
| 1 Unavailable | 2 Available | 3 Unavailable | 4 Unavailable | 5 Available | 150 |
| 8 Available | 9 Unavailable | 10 Available | 11 Unavailable | 12 Unavailable | Max Reqs Per Day ② |
| 15 Unavailable | 16 Available | 17 Unavailable | 18 Available | 19 Unavailable | 3 |
| 22 Available | 23 Unavailable | 24 Available | 25 Unavailable | 26 Available | Next |
| 29 Unavailable | 30 Available | 31 Unavailable | | | |