


# 2024 new language added to iClaim and i3368 screens alg001-1 – (first party) conditions compact notice



## Social Security

Official Website of the U.S. Social Security Administration

OMB No. 0960-0579  
Paperwork Reduction Act

### Apply for Benefits

- 1  Provide Background information
- 2  Provide Disability Information
- 3  Sign Medical Release
- 4  Confirmation

**⚠ We need additional information to determine whether you are eligible for benefits based on your disability.** Please complete as much information as you can.


#### Conditions for Cameron Ford

**Separately** list each physical and/or mental condition that limits your ability to work. (Example: Back Injury, Arthritis, Diabetes, Glaucoma, Depression, Blind). If you have cancer, please include the type and stage. We will consider these conditions whether or not you have been receiving treatment. Use your own words if you do not know the medical names. **Please enter only one condition per box.**

**1st Condition:**

#### In this section...

- Condition
- Other Contact
- Doctors
- Hospitals
- Tests
- Medicines
- Other Medical Information



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## Apply for Benefits

OMB No. 0960-0579  
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1  Provide Background information    2  Provide Disability Information    3  Sign Medical Release    4  Confirmation

Identification    Medical    Work/Education    Remarks    Review

**⚠ We need additional information to determine whether Cameron Ford is eligible for benefits based on their disability.** Please complete as much information as you can.

### Conditions for Cameron Ford


**Separately** list each physical and/or mental condition that limits Cameron Ford's ability to work. (Example: Back Injury, Arthritis, Diabetes, Glaucoma, Depression, Blind). If Cameron Ford has cancer, please include the type and stage. We will consider these conditions whether or not they have been receiving treatment. Use Cameron Ford's own words if they do not know the medical names. **Please enter only one condition per box.**

**1st Condition:** \_\_\_\_\_

#### In this section...

- [Condition](#)
- [Other Contact](#)
- [Doctors](#)
- [Hospitals](#)
- [Tests](#)
- [Medicines](#)
- [Other Medical Information](#)

win001-1 – (first party) work/education intro compact notice



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Identification    Medical    Work/Education    Remarks    Review

**⚠ We need additional information to determine whether you are eligible for benefits based on your disability.** Please complete as much information as you can.

### Work Status for Cameron Ford

In determining whether you meet the requirements for receiving disability benefits, we must consider your work experience and job skills. [More Info](#)


This section of the report asks for information about:

- when your condition(s) began to affect your ability to work;
- your work history; and

**In this section...**

- Work Status
- Work Activity
- Work History
- Education

win001-3 – (third party) work/education intro compact notice



# Social Security

Official Website of the U.S. Social Security Administration

## Apply for Benefits

1  Provide Background information   2  Provide Disability Information   3  Sign Medical Release   4  Confirmation

Identification    Medical   **Work/Education**    Remarks    Review

**⚠ We need additional information to determine whether Cameron Ford is eligible for benefits based on their disability.** Please complete as much information as you can.

### Work Status for Cameron Ford

In determining whether Cameron Ford meets the requirements for receiving disability benefits, we must consider their work experience and job skills. [More Info](#)

This section of the report asks for information about:

- when Cameron Ford's condition(s) began to affect their ability to work;
- their work history; and

**In this section...**

- Work Status**
- [Work Activity](#)
- [Work History](#)
- [Education](#)

msg152 (first party) – save and exit full notice



**Social Security**

Official Website of the U.S. Social Security Administration

## Apply for Benefits



### Are you sure you want to save and exit?

Before you save and exit, print this page or write down the re-entry number. You will need this number to return to your saved application later.

Re-entry number: **25679793**

If you lose or forget this number, you can recover it by signing into your [my Social Security](#) account, or registering for a [my Social Security](#) account. Without your re-entry number, you will need to start a new application. Social Security employees will never ask for your re-entry number and they do not have access to it.

When you return to your application, you will need to provide additional information that we will use to determine whether you are eligible for benefits based on your disability.

[Print this page](#)

**Yes, Save & Exit**

No, Return to Application

msg152 (third party) – save and exit full notice



**Social Security**

Official Website of the U.S. Social Security Administration

## Apply for Benefits



### Are you sure you want to save and exit?

Before you save and exit, print this page or write down the re-entry number. You will need this number to return to Cameron Ford's saved application later.

Re-entry number: **25679793**

If you lose or forget this number, you will need to start a new report. Social Security employees will never ask for your re-entry number and they do not have access to it.

When you return to Cameron Ford's application, you will need to provide additional information that we will use to determine whether Cameron Ford is eligible for benefits based on their disability.



[Print this page](#)

**Yes, Save & Exit**

No, Return to Application