



DESIGN SPECIFICATIONS DOCUMENT

OSSNAP SCREEN PACKAGE

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1. U.S. Original Self - Landing

 **Social Security**

Use Our Online Service To Obtain A Social Security Number Card

Online Social Security Number Application

Request a Social Security Number (SSN) card online and provide your documentation to the local Social Security Administration (SSA) office.

1. We will walk you through the guided steps needed to submit your request.
2. After you submit your online request, you must **visit** your [local Social Security office or card center](#) with your documentation within **45 calendar days**.

Acceptable documents **MUST** be original or copies certified by the issuing agency, unexpired and must show name, date of birth or age. [Find out which documents are required for your original or replacement card request.](#)

After SSA verifies your document(s) and completes your request, you will receive your social security card in the mail **within 14 business days**.

Apply Now

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2. All Paths - Privacy Act Statement

This screen appears after the landing page for ALL paths.

 **Social Security**

Use Our Online Service To Obtain A Social Security Number Card

Online Social Security Number Application

Privacy Act Statement
Collection and Use of Personal Information

Sections 205(c) and 702 of the Social Security Act (Act), as amended, allow us to collect this information, which we will assign a Social Security number and issue a Social Security card. Providing the information is voluntary; but not providing all or part of the information may prevent us from assisting you.

As law permits, we may use and share the information you submit, including with other Federal, State, and local agencies, contractors, student volunteers, and others, as outlined in the routine uses within System of Records Notices (SORN) 60-0058, Master Files of SSN Holders and SSN Applications, and 60-0104, Race and Ethnicity Collection System, and 60-0373; available at www.ssa.gov/privacy.

The information you submit may also be used in computer matching programs to establish or verify eligibility for Federal benefit programs and to recoup debts under these programs. The Act also allows us to collect race and ethnicity information, which we will use for research and statistical purposes. Furnishing us this information is voluntary and will not be used in decisions about your application.

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3. U.S. Original Self - Age 18 or Older

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

***You must be 18 or older to fill out this application. Are you 18 or older?**

☐ Yes ☐ No

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3.1. U.S. Original Self - Age 18 or Older – No

* The messaging and behavior in the screenshot below is the same in all paths and will not be shown in future paths.

 Social Security

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

***You must be 18 or older to fill out this application. Are you 18 or older?**

☐ Yes ☒ No

 You must be age 18 or over fill out this application. You can request a [Social Security Number card](#) through a [local office](#).

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4. U.S. Original Self - U.S. Mailing Address Available

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** Do you have a U.S. mailing address?**
This includes Fleet Post Office [FPO], Army Post Office [APO] and Diplomatic Post Office [DPO] addresses.
☐ Yes ☐ No

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4.1. U.S. Original Self - U.S. Mailing Address Available – No

* The messaging and behavior in the screenshot below is the same in all paths and will not be shown in future paths.

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** Do you have a U.S. mailing address?**
This includes Fleet Post Office [FPO], Army Post Office [APO] and Diplomatic Post Office [DPO] addresses.

☐ Yes ☒ No

 We're sorry. You must have a U.S. mailing address to request a [Social Security number card](#) online. You can request a [Social Security number card](#) through a [local office](#).

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5. U.S. Original Self - Have an SSN

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Does the person who the application is for already have a Social Security Number (SSN)?**

☐ Yes ☐ No

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6. U.S. Original Self - Citizenship

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Is the individual for whom you are applying a U.S. Citizen?**

☐ Yes ☐ No

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7. U.S. Original Self - Applying For

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

***Are you an adult applying for**

☐ Yourself
☐ Someone else

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8. U.S. Original Self - Date of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is your date of birth?

* Month

* Day

* Year

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9. U.S. Original Self - Place of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

Where is your place of birth?
☐ U.S. ☐ International

* City/Town

* State/Territory

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9.1. U.S. Original Self - Place of Birth - International

* The behavior in the screenshot below is the same for all Place of Birth fields in all paths and will not be shown in future paths.

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

Where is your place of birth?

☐ U.S. ☒ International

*City/Town

*Country

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10. U.S. Original Self - Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

How should your name appear on the card?

* First

Middle

* Last

Suffix

* Is the name above your full name at birth?

☐ Yes ☐ No

* Have you ever used any other names not listed above?

☐ Yes ☐ No

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10.1. U.S. Original Self – Name – Dynamic Content Expanded

* The non-expanded Name page preceding this one will be shown in all paths due to wording differences, but the expanded content shown in the screenshot below is the same in all paths and will not be shown in future paths.

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

How should your name appear on the card?

* First	Middle	* Last	Suffix
			--

*** Is the name above your full name at birth?**
☐ Yes ☒ No

What was your name at birth?

* First	Middle	* Last	Suffix
			--

*** Have you ever used any other names not listed above?**
☒ Yes ☐ No

What other name have you used?

* First	Middle	* Last	Suffix
			--

What alternate name have you used?

First	Middle	Last	Suffix
			--

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11. U.S. Original Self - Sex

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

***What is your sex?**

☐ Male ☐ Female

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12. U.S. Original Self - Parents Names

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

***What is your parent/mother's birth name?**

☐ Unknown

***First**

Middle

***Last**

Suffix

***What is your parent/father's name?**

☐ Unknown

***First**

Middle

***Last**

Suffix

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13. U.S. Original Self - U.S. Mailing Address

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is your mailing address?
Enter a valid U.S. address where the Social Security Administration can mail the card.

* Street Address

Apartment, Suite, Building, Etc.

* City/Town

* State/Territory

* ZIP Code

What is your daytime phone number?
10-digit Number

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14. U.S. Original Self – Race and Ethnicity



Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates Required Information

Race and Ethnicity

The next two questions are about race and ethnicity. **Providing this information is voluntary and will not affect your application.**

We are requesting this information for research and statistical purposes, to ensure we treat our customers fairly and equally. **We hope you will share this information with us.**

If you do not want to provide this information, select the “Next” button to go to the next page.

Are you Hispanic or Latino? (Select one)

▼ Ethnicity Definitions

☐ Yes

☐ No

What is your race? (Select one or more)

▼ Race Definitions

☐ Alaska Native

☐ American Indian

☐ Asian

☐ Black/African American

☐ Native Hawaiian

☐ Other Pacific Islander

☐ White

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Are you Hispanic or Latino? (Select one)[^ Ethnicity Definitions](#)

Answer ▼	Definition
Yes (Hispanic or Latino)	A person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin, regardless of race.
No (Not Hispanic or Latino)	A person who does not consider themselves to be Hispanic or Latino.

What is your race? (Select one or more)[^ Race Definitions](#)

Answer ▼	Definition
Alaska Native	A person descended from the original people of Alaska who maintains tribal affiliation or community attachment. For example: Aleuts, Athabascans, Haidas, Inupiat, Tlingits and Yupiks.
American Indian	A person descended from any of the original people of North (except Alaska), South, or Central America, and who maintain tribal affiliation or community attachment.
Asian	A person descended from any of the original people of the Far East, Southeast Asia, or the Indian subcontinent including for example: Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, The Philippine Islands, Thailand and Vietnam.
Black/African American	A person descended from any of the black racial groups of Africa. Includes those who describe themselves as Haitian.
Native Hawaiian	A person descended from any of the original people of Hawaii.
Other Pacific Islander	A person descended from any of the original people of Australia, Guam, Samoa, New Zealand, or Other Pacific Islands.
White	A person descended from any of the original people of Europe, the Middle East, or North Africa.

15. U.S. Original Self - U.S. Documentation – Age



Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application



What you need to know about documentation

- You must provide original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a U.S. passport as proof of both citizenship and identity.

Social Security Number Documentation

* Indicates required information

* Do you have a U.S. Birth Certificate that was issued before the age of 5?

If the Birth Certificate was issued after the age of 5, other documentation will be needed.

☐ Yes, I have a Birth Certificate issued before the age of 5.

☐ No, I will provide other documentation.

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*** Do you have a U.S. Birth Certificate that was issued before the age of 5?**

If the Birth Certificate was issued after the age of 5, other documentation will be needed.

☒ Yes, I have a Birth Certificate issued before the age of 5.

☐ No, I will provide other documentation.

*** Which State issued this document?***** What is the Certificate Number?**

You may see this labeled as *Document Number*

*** What is the Issue Date?**

Month

Day

Year

*** What is the Recordation Date?**

You may see this labeled as *Filing Date*.

Month

Day

Year

***Do you have a U.S. Birth Certificate that was issued before the age of 5?**

If the Birth Certificate was issued after the age of 5, other documentation will be needed.

☐ Yes, I have a Birth Certificate issued before the age of 5.

☒ No, I will provide other documentation.

***Other Proof of Age Options**

☐ U.S. Hospital Record of Birth

☐ Consular Report of Birth Abroad (FS-240)

☐ Certification of Birth Abroad (FS-545)

☐ Certification of Report of Birth (DS-1350)

*** Other Proof of Age Options**

☒ U.S. Hospital Record of Birth
☐ Consular Report of Birth Abroad (FS-240)
☐ Certification of Birth Abroad (FS-545)
☐ Certification of Report of Birth (DS-1350)

Additional Information for your **Hospital Record of Birth**.

*** Which State issued this document?**

-- ▼

*** What is the Issue Date?**

Month	Day	Year
-- ▼	-- ▼	

What is the Recordation Date?

You may see this labeled as *Filing Date*.

Month	Day	Year
-- ▼	-- ▼	

*** What is the Name of the Institution?**

You may see this labeled as *Name of Hospital, Clinic, etc.*

*** Other Proof of Age Options**

☐ U.S. Hospital Record of Birth
☒ Consular Report of Birth Abroad (FS-240)
☐ Certification of Birth Abroad (FS-545)
☐ Certification of Report of Birth (DS-1350)

Additional Information for your **Consular Report of Birth Abroad (FS-240)**.

*** Which Country issued this document?***** What is the Issue Date?**

Month

Day

Year

*** What is the Recordation Date?**

You may see this labeled as *Filing Date*.

Month

Day

Year

*** What is the Documentation Number?**

*** Other Proof of Age Options**

☐ U.S. Hospital Record of Birth
☐ Consular Report of Birth Abroad (FS-240)
☒ Certification of Birth Abroad (FS-545)
☐ Certification of Report of Birth (DS-1350)

Additional Information for your **Certification of Birth Abroad (FS-545)**.

*** Which Country issued this document?**

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▼

*** What is the Issue Date?**

Month

Day

Year

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▼

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*** What is the Recordation Date?**

You may see this labeled as *Filing Date*.

Month

Day

Year

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▼

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▼

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▼

What is the Documentation Number?

*** Other Proof of Age Options**

☐ U.S. Hospital Record of Birth
☐ Consular Report of Birth Abroad (FS-240)
☐ Certification of Birth Abroad (FS-545)
☒ Certification of Report of Birth (DS-1350)

Additional Information for your **Certification of Report of Birth (DS-1350)**.

*** Which Country issued this document?**

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▼

What is the Issue Date?

Month

Day

Year

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▼

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▼

What is the Recordation Date?

You may see this labeled as *Filing Date*.

Month

Day

Year

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▼

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▼

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▼

What is the Certificate Number?

You may see this labeled as *Document Number*.

16. U.S. Original Self – Citizenship



Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

i What you need to know about documentation

- You must provide original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a U.S. passport as proof of both citizenship and identity.

Social Security Number Documentation

* Indicates required information

* Choose a document to prove your Citizenship status.

Additional information is required because the document you provided for Proof of Age does not cover Citizenship.

☐ Certification of Naturalization (N-550/N570)
☐ U.S. Passport/Passport Card
☐ Certification of Citizenship (N-560/N561)
☐ Machine Readable Immigrant Visa (MRIV) showing a code of "IR3" or "IH3"
☐ U.S. Citizen Identification Card (I-179)
☐ American Indian Card (I-872) showing a class code of "KIC"
☐ Northern Mariana Card (I-873)
☐ Certificate Statement from a U.S. Consular Official
☐ None of the above

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• **Choose a document to prove your Citizenship status.**

Additional information is required because the document you provided for Proof of Age does not cover Citizenship.

☒ Certification of Naturalization (N-550/N570)
☐ U.S. Passport/Passport Card
☐ Certification of Citizenship (N-560/N561)
☐ Machine Readable Immigrant Visa (MRIV) showing a code of "IR3" or "IH3"
☐ U.S. Citizen Identification Card (I-179)
☐ American Indian Card (I-872) showing a class code of "KIC"
☐ Northern Mariana Card (I-873)
☐ Certificate Statement from a U.S. Consular Official
☐ None of the above

Additional information for your Certificate of Naturalization (N-550/N-570).

• **What is the name on the Department of Homeland Security (DHS) document?**

• **What is the Issue Date?**

Month	Day	Year
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What is the Recordation Date?

You may see this labeled as *Filing Date*.

Month	Day	Year
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• **What is the Alien Registration Number?**

• **What is the Certificate Number?**

You may see this labeled as *Document Number*.

*** Choose a document to prove your Citizenship status.**

Additional information is required because the document you provided for Proof of Age does not cover Citizenship.

☐ Certification of Naturalization (N-550/N570)
☒ U.S. Passport/Passport Card
☐ Certification of Citizenship (N-560/N561)
☐ Machine Readable Immigrant Visa (MRIV) showing a code of "IR3" or "IH3"
☐ U.S. Citizen Identification Card (I-179)
☐ American Indian Card (I-872) showing a class code of "KIC"
☐ Northern Mariana Card (I-873)
☐ Certificate Statement from a U.S. Consular Official
☐ None of the above

Additional information for your **U.S. Passport/Passport Card**.

*** What is the Issue Date?**

Month	Day	Year
--	--	--

*** What is the Expiration Date?**

Month	Day	Year
--	--	--

*** What is the Passport Number?**

*** Choose a document to prove your Citizenship status.**

Additional information is required because the document you provided for Proof of Age does not cover Citizenship.

☐ Certification of Naturalization (N-550/N570)
☐ U.S. Passport/Passport Card
☒ Certification of Citizenship (N-560/N561)
☐ Machine Readable Immigrant Visa (MRIV) showing a code of "IR3" or "IH3"
☐ U.S. Citizen Identification Card (I-179)
☐ American Indian Card (I-872) showing a class code of "KIC"
☐ Northern Mariana Card (I-873)
☐ Certificate Statement from a U.S. Consular Official
☐ None of the above

Additional information for your **Certification of Citizenship (N-560/N-561)**.

*** What is the name on the Department of Homeland Security (DHS) document?**

*** What is the Issue Date?**

Month

Day

Year

*** What is the Alien Registration Number?**

*** What is the Certificate Number?**

You may see this labeled as *Document Number*.

• **Choose a document to prove your Citizenship status.**

Additional information is required because the document you provided for Proof of Age does not cover Citizenship.

☐ Certification of Naturalization (N-550/N570)
☐ U.S. Passport/Passport Card
☐ Certification of Citizenship (N-560/N561)
☒ Machine Readable Immigrant Visa (MRIV) showing a code of "IR3" or "IH3"
☐ U.S. Citizen Identification Card (I-179)
☐ American Indian Card (I-872) showing a class code of "KIC"
☐ Northern Mariana Card (I-873)
☐ Certificate Statement from a U.S. Consular Official
☐ None of the above

Additional information for your **Machine Readable Immigrant Visa (MRIV)**.

• **What is the name on the Department of Homeland Security (DHS) document?**

What is the Issue Date?

Month

Day

Year

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• **What is the Alien Registration Number?**

• **What is the Passport Number?**

• **Which country Issued the Passport?**

• **What is the Passport Expiration Date?**

Month

Day

Year

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*** Choose a document to prove your Citizenship status.**

Additional information is required because the document you provided for Proof of Age does not cover Citizenship.

☐ Certification of Naturalization (N-550/N570)
☐ U.S. Passport/Passport Card
☐ Certification of Citizenship (N-560/N561)
☐ Machine Readable Immigrant Visa (MRIV) showing a code of "IR3" or "IH3"
☒ U.S. Citizen Identification Card (I-179)
☐ American Indian Card (I-872) showing a class code of "KIC"
☐ Northern Mariana Card (I-873)
☐ Certificate Statement from a U.S. Consular Official
☐ None of the above

Additional information for your **U.S. Citizen Identification Card (I-179)**.

*** What is the Identification Number?**

*** What is the Issue Date?**

Month

Day

Year

What is the Alien Registration Number?

*** Choose a document to prove your Citizenship status.**

Additional information is required because the document you provided for Proof of Age does not cover Citizenship.

☐ Certification of Naturalization (N-550/N570)
☐ U.S. Passport/Passport Card
☐ Certification of Citizenship (N-560/N561)
☐ Machine Readable Immigrant Visa (MRIV) showing a code of "IR3" or "IH3"
☐ U.S. Citizen Identification Card (I-179)
☒ American Indian Card (I-872) showing a class code of "KIC"
☐ Northern Mariana Card (I-873)
☐ Certificate Statement from a U.S. Consular Official
☐ None of the above

Additional information for your **American Indian Card (I-872)**.

What is the Issue Date?

Month

Day

Year

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*** What is the Expiration Date?**

Month

Day

Year

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*** What is the Alien Registration Number?**

*** Choose a document to prove your Citizenship status.**

Additional information is required because the document you provided for Proof of Age does not cover Citizenship.

☐ Certification of Naturalization (N-550/N570)
☐ U.S. Passport/Passport Card
☐ Certification of Citizenship (N-560/N561)
☐ Machine Readable Immigrant Visa (MRIV) showing a code of "IR3" or "IH3"
☐ U.S. Citizen Identification Card (I-179)
☐ American Indian Card (I-872) showing a class code of "KIC"
☒ Northern Mariana Card (I-873)
☐ Certificate Statement from a U.S. Consular Official
☐ None of the above

Additional information for your **Northern Mariana Card (I-873)**.

What is the Issue Date?

Month	Day	Year
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*** What is the Expiration Date?**

Month	Day	Year
--	--	--

*** What is the Alien Registration Number?**

*** Choose a document to prove your Citizenship status.**

Additional information is required because the document you provided for Proof of Age does not cover Citizenship.

☐ Certification of Naturalization (N-550/N570)
☐ U.S. Passport/Passport Card
☐ Certification of Citizenship (N-560/N561)
☐ Machine Readable Immigrant Visa (MRIV) showing a code of "IR3" or "IH3"
☐ U.S. Citizen Identification Card (I-179)
☐ American Indian Card (I-872) showing a class code of "KIC"
☐ Northern Mariana Card (I-873)
☒ Certificate Statement from a U.S. Consular Official
☐ None of the above

Additional information for your **Certificate Statement from a U.S. Consular Official**.

What is the Issue Date?

Month

Day

Year

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What is the name of the Consul?

*** Choose a document to prove your Citizenship status.**

Additional information is required because the document you provided for Proof of Age does not cover Citizenship.

☐ Certification of Naturalization (N-550/N570)
☐ U.S. Passport/Passport Card
☐ Certification of Citizenship (N-560/N561)
☐ Machine Readable Immigrant Visa (MRIV) showing a code of "IR3" or "IH3"
☐ U.S. Citizen Identification Card (I-179)
☐ American Indian Card (I-872) showing a class code of "KIC"
☐ Northern Mariana Card (I-873)
☐ Certificate Statement from a U.S. Consular Official
☒ None of the above

*** Other Proof of Citizenship Options**

☐ U.S. Religious Record
☐ Final Adoption Decree showing a U.S. place of birth and the applicant's name
☐ Early School Record
☐ Military Record (DD-214)

*** Other Proof of Citizenship Options**

☒ U.S. Religious Record
☐ Final Adoption Decree showing a U.S. place of birth and the applicant's name
☐ Early School Record
☐ Military Record (DD-214)

Additional information for your **U.S Religious Record**.

*** Please select the type of Religious Record:**

--

▼

*** What is the name of the Religious Institution?**

Which State issued this document?

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▼

*** What is the Recordation Date?**

You may see this labeled as *Filing Date*.

Month

Day

Year

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▼

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▼

What is the Issue Date?

Month

Day

Year

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▼

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▼

*** Other Proof of Citizenship Options**

☐ U.S. Religious Record
☒ Final Adoption Decree showing a U.S. place of birth and the applicant's name
☐ Early School Record
☐ Military Record (DD-214)

Additional information for your **Final Adoption Decree showing a U.S. place of birth and the applicant's name**

*** What is the Issue Date?**

Month	Day	Year
--	--	--

*** Which State issued this document?****What is the Recordation Date?**

You may see this labeled as *Filing Date*.

Month	Day	Year
--	--	--

What is the Document Number?

*** Other Proof of Citizenship Options**

☐ U.S. Religious Record
☐ Final Adoption Decree showing a U.S. place of birth and the applicant's name
☒ Early School Record
☐ Military Record (DD-214)

Additional information for your **Early School Record**

*** What is the Issue Date?**

Month

Day

Year

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*** What is the Date of Admission?**

Month

Day

Year

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*** Which State issued this document?**

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*** Other Proof of Citizenship Options**

☐ U.S. Religious Record
☐ Final Adoption Decree showing a U.S. place of birth and the applicant's name
☐ Early School Record
☒ Military Record (DD-214)

Additional information for your **Military Record (DD-214)**.

What is the Issue Date?

Month

Day

Year

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What is the Recordation Date?

You may see this labeled as *Filing Date*.

Month

Day

Year

--	--	--
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Which Military Branch issued the DD-214?

17. U.S. Original Self – Documentation – Identity



Use Our Online Service To Obtain a Social Security Number Card

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What you need to know about documentation

- You must provide original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a U.S. passport as proof of both citizenship and identity.

Social Security Number Documentation

• Indicates required information

• Proof of Identity

Please select one document from the list

- | |
|---|
| ☐ U.S. driver's license |
| ☐ State-issued non-driver identification card |
| ☐ U.S. passport |
| ☐ None of the above |

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***Proof of Identity**

Please select one document from the list

☒ U.S. driver's license
☐ State-issued non-driver identification card
☐ U.S. passport
☐ None of the above

Additional information for your **U.S. driver's license**.*** Which State or Territory issued the Driver's License?***** What is the Driver's License Number?***** What is the Issue Date?**

Month

Day

Year

*** What is the Expiration Date?**

Month

Day

Year

*** Proof of Identity**

Please select one document from the list

☐ U.S. driver's license
☒ State-issued non-driver identification card
☐ U.S. passport
☐ None of the above

Additional information for your **State-issued non-driver identification card**.

*** Which State or Territory issued the Non-driver Identification Card?**

--

▼

*** What is the state-issued Non-driver Identification Card number?***** What is the Issue Date?**

Month

Day

Year

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▼

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▼

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▼

*** What is the Expiration Date?**

Month

Day

Year

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▼

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▼

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▼

***Proof of Identity**

Please select one document from the list

☐ U.S. driver's license
☐ State-issued non-driver identification card
☒ U.S. passport
☐ None of the above

Additional information for your **U.S. Passport**.

*** What is the U.S. Passport Number?**

*** What is the Issue Date?**

Month	Day	Year
--	--	--

*** What is the Expiration Date?**

Month	Day	Year
--	--	--

***Proof of Identity**

Please select one document from the list

☐ U.S. driver's license
☐ State-issued non-driver identification card
☐ U.S. passport
☒ None of the above

*** Other Proof of Identity Options**

If you do not have one of the above identity documents or you cannot get a replacement for one of the above identity documents within 10 days, you may select from the list below. Any documents you select from the list must be current (not expired) and show [the] name, identifying information (date of birth or age) and preferably a recent photograph.

☐ Medical Record - Clinic or Hospital
☐ Medical Record - Immunization
☐ Medical Record - Physician
☐ Adoption Combination of Documents
☐ Health Insurance Card
☐ Certificate of Citizenship (N-560/N-561)
☐ School Record
☐ School ID
☐ Certificate of Naturalization (N-550/N-570)

*** Other Proof of Identity Options**

If you do not have one of the above identity documents or you cannot get a replacement for one of the above identity documents within 10 days, you may select from the list below. Any documents you select from the list must be current (not expired) and show [the] name, identifying information (date of birth or age) and preferably a recent photograph.

☒ Medical Record - Clinic or Hospital
☐ Medical Record - Immunization
☐ Medical Record - Physician
☐ Adoption Combination of Documents
☐ Health Insurance Card
☐ Certificate of Citizenship (N-560/N-561)
☐ School Record
☐ School ID
☐ Certificate of Naturalization (N-550/N-570)

Additional information for your **Medical Record - Clinic or Hospital**.

☒ U.S.	☐ Foreign
---------------------------------------	-------------------------------

* **What is the Name of the Institution?**

You may see this labeled as *Name of the Hospital, Clinic, etc.*

* **Which State issued the document?**

* **What is the Issue Date?**

Month

Day

Year

What is the Document Number?

What is the Patient or Chart Number?

Additional information for your **Medical Record - Clinic or Hospital**.

☐ U.S.	☒ Foreign
----------------------------	--

* **What is the Name of the Institution?**

You may see this labeled as *Name of the Hospital, Clinic, etc.*

* **Which Country issued the record?**

* **What is the Issue Date?**

Month

Day

Year

What is the Document Number?

What is the Patient or Chart Number?

*** Other Proof of Identity Options**

If you do not have one of the above identity documents or you cannot get a replacement for one of the above identity documents within 10 days, you may select from the list below. Any documents you select from the list must be current (not expired) and show [the] name, identifying information (date of birth or age) and preferably a recent photograph.

☐ Medical Record - Clinic or Hospital
☒ Medical Record - Immunization
☐ Medical Record - Physician
☐ Adoption Combination of Documents
☐ Health Insurance Card
☐ Certificate of Citizenship (N-560/N-561)
☐ School Record
☐ School ID
☐ Certificate of Naturalization (N-550/N-570)

Additional information for your **Medical Record - Immunization**.

☒ U.S.	☐ Foreign
---------------------------------------	-------------------------------

*** What is the Name of the Institution?**

You may see this labeled as *Name of the Hospital, Clinic, etc.*

*** Which State issued the document?**

*** What is the Issue Date?**

Month	Day	Year

What is the Document Number?

What is the Medical Record Number or Admission Number?

Additional information for your **Medical Record - Immunization**.

☐ U.S.	☒ Foreign
----------------------------	--

* **What is the Name of the Institution?**

You may see this labeled as *Name of the Hospital, Clinic, etc.*

* **Which Country issued the record?**

* **What is the Issue Date?**

Month

Day

Year

What is the Document Number?

What is the Medical Record Number or Admission Number?

* **Other Proof of Identity Options**

If you do not have one of the above identity documents or you cannot get a replacement for one of the above identity documents within 10 days, you may select from the list below. Any documents you select from the list must be current (not expired) and show [the] name, identifying information (date of birth or age) and preferably a recent photograph.

☐ Medical Record - Clinic or Hospital
☐ Medical Record - Immunization
☒ Medical Record - Physician
☐ Adoption Combination of Documents
☐ Health Insurance Card
☐ Certificate of Citizenship (N-560/N-561)
☐ School Record
☐ School ID
☐ Certificate of Naturalization (N-550/N-570)

Additional information for your **Medical Record - Physician**.

☒ U.S.	☐ Foreign
---------------------------------------	-------------------------------

* **What is the Name of the Institution?**

You may see this labeled as *Name of the Hospital, Clinic, etc.*

* **Which State issued the document?**

* **What is the Issue Date?**

Month	Day	Year

What is the Patient or Chart Number?

Additional information for your **Medical Record - Physician**.

☐ U.S.	☒ Foreign
----------------------------	--

* **What is the Name of the Institution?**

You may see this labeled as *Name of the Hospital, Clinic, etc.*

* **Which Country issued the record?**

* **What is the Issue Date?**

Month	Day	Year

What is the Patient or Chart Number?

• **Other Proof of Identity Options**

If you do not have one of the above identity documents or you cannot get a replacement for one of the above identity documents within 10 days, you may select from the list below. Any documents you select from the list must be current (not expired) and show [the] name, identifying information (date of birth or age) and preferably a recent photograph.

☐ Medical Record - Clinic or Hospital
☐ Medical Record - Immunization
☐ Medical Record - Physician
☒ Adoption Combination of Documents
☐ Health Insurance Card
☐ Certificate of Citizenship (N-560/N-561)
☐ School Record
☐ School ID
☐ Certificate of Naturalization (N-550/N-570)

Additional information for your **Adoption Combination of Documents**.

• **What is the Name on the Document?**

• **What is the Issue Date?**

Month	Day	Year
--	--	--

Which State issued this document?

What is the name of the Agency that issued the document?

Which County/District issued the document?

What is the Document Number?

• **Other Proof of Identity Options**

If you do not have one of the above identity documents or you cannot get a replacement for one of the above identity documents within 10 days, you may select from the list below. Any documents you select from the list must be current (not expired) and show [the] name, identifying information (date of birth or age) and preferably a recent photograph.

☐ Medical Record - Clinic or Hospital
☐ Medical Record - Immunization
☐ Medical Record - Physician
☐ Adoption Combination of Documents
☒ Health Insurance Card
☐ Certificate of Citizenship (N-560/N-561)
☐ School Record
☐ School ID
☐ Certificate of Naturalization (N-550/N-570)

Additional information for your **Health Insurance Card**.

• **What is the Name of Institution (or Company Name)?**

• **What is the Health Insurance Card Number?**

What is the Issue Date?

Month

Day

Year

• **Other Proof of Identity Options**

If you do not have one of the above identity documents or you cannot get a replacement for one of the above identity documents within 10 days, you may select from the list below. Any documents you select from the list must be current (not expired) and show [the] name, identifying information (date of birth or age) and preferably a recent photograph.

☐ Medical Record - Clinic or Hospital
☐ Medical Record - Immunization
☐ Medical Record - Physician
☐ Adoption Combination of Documents
☐ Health Insurance Card
☒ Certificate of Citizenship (N-560/N-561)
☐ School Record
☐ School ID
☐ Certificate of Naturalization (N-550/N-570)

Additional information for your **Certificate of Citizenship (N-560/N-561)**.

• **What is the Issue Date?**

Month	Day	Year
--	--	--

• **What is the Certificate Number?**

You may see this labeled as Document Number.

What is the Alien Registration Number?

• **Other Proof of Identity Options**

If you do not have one of the above identity documents or you cannot get a replacement for one of the above identity documents within 10 days, you may select from the list below. Any documents you select from the list must be current (not expired) and show [the] name, identifying information (date of birth or age) and preferably a recent photograph.

☐ Medical Record - Clinic or Hospital
☐ Medical Record - Immunization
☐ Medical Record - Physician
☐ Adoption Combination of Documents
☐ Health Insurance Card
☐ Certificate of Citizenship (N-560/N-561)
☒ School Record
☐ School ID
☐ Certificate of Naturalization (N-550/N-570)

Additional information for your **School Record**.

☒ U.S.	☐ Foreign
---------------------------------------	-------------------------------

• **What is the Name of the School?**

• **Which State issued this document?**

• **What is the Issue Date?**

Month	Day	Year

What is the Document Number?

Additional information for your **School Record**.

☐ U.S.	☒ Foreign
----------------------------	--

★ **What is the Name of the School?**

★ **Which Country issued the document?**

★ **What is the Issue Date?**

Month	Day	Year

What is the Document Number?

★ **Other Proof of Identity Options**

If you do not have one of the above identity documents or you cannot get a replacement for one of the above identity documents within 10 days, you may select from the list below. Any documents you select from the list must be current (not expired) and show [the] name, identifying information (date of birth or age) and preferably a recent photograph.

☐ Medical Record - Clinic or Hospital
☐ Medical Record - Immunization
☐ Medical Record - Physician
☐ Adoption Combination of Documents
☐ Health Insurance Card
☐ Certificate of Citizenship (N-560/N-561)
☐ School Record
☒ School ID
☐ Certificate of Naturalization (N-550/N-570)

Additional information for your **School ID**.

☒ U.S.	☐ Foreign
---------------------------------------	-------------------------------

* **What is the Name of the School?**

* **Which State issued the ID?**

* **What is the Issue Date?**

Month	Day	Year

* **What is the Expiration Date?**

Month	Day	Year

What is the ID number?

Additional information for your **School ID**.

☐ U.S.	☒ Foreign
----------------------------	--

* **What is the name of the School?**

* **Which Country issued the ID?**

* **What is the Issue Date?**

Month	Day	Year

* **What is the Expiration Date?**

Month	Day	Year

What is the ID number?

• **Other Proof of Identity Options**

If you do not have one of the above identity documents or you cannot get a replacement for one of the above identity documents within 10 days, you may select from the list below. Any documents you select from the list must be current (not expired) and show [the] name, identifying information (date of birth or age) and preferably a recent photograph.

☐ Medical Record - Clinic or Hospital
☐ Medical Record - Immunization
☐ Medical Record - Physician
☐ Adoption Combination of Documents
☐ Health Insurance Card
☐ Certificate of Citizenship (N-560/N-561)
☐ School Record
☐ School ID
☒ Certificate of Naturalization (N-550/N-570)

Additional information for your **Certificate of Naturalization (N-550/N-570)**.

• **What is the Issue Date?**

Month	Day	Year
--	--	--

• **What is the Certificate Number?**

You may see this labeled as Document Number.

What is the Alien Registration Number?

18. U.S. Original Self - Review and Edit

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Review and Edit
Please review the answers you provided. If you need to make any changes, please select "Edit" to return to that part of the application and make the correction.

 **Age**

Edit

You must be 18 or older to fill out this application. Are you 18 or older?: **Yes**

 **U.S. Mailing Address**

Edit

Do you have a U.S. mailing address?: **Yes**

 **Social Security Number**

Edit

Does the person who the application is for already have a Social Security Number (SSN)?: **No**

 **Citizenship Status**

Edit

Is the individual for whom you are applying a U.S. citizen?: **Yes**

 **Applying For**

Edit

Are you an adult applying for: **Yourself**

 **Date of Birth**

Edit

What is your date of birth?: **January 1, 1980**

 **Place of Birth**

Edit

Where is your place of birth?: **Fairhope, Alabama**

✓ Name

Edit

How should your name appear on the new card?: **John Smith**
Is the name above your full name at birth?: **Yes**
Have you ever used any other names not listed above?: **No**

✓ Sex

Edit

What is your sex?: **Male**

✓ Parent's Name

Edit

What is your parent/mother's birth name?: **Not Answered**
What is your parent/father's name?: **Not Answered**

✓ U.S. Mailing Address and Phone Number

Edit

What is your mailing address?
Street Address: **123 Main St.**
City/Town: **Anytown**
State: **Alaska**
ZIP Code: **12345**
What is your daytime phone number?: **Not Answered**

✓ Race and Ethnicity

Edit

Are you Hispanic or Latino?: **Not answered**
What is your race?: **Not answered**

✓ Documentation

Edit

Proof of Citizenship: **U.S. Public Birth Certificate**
Proof of Identity: **Certification of Report of Birth (DS-1350)**
Proof of Age: **U.S. Hospital Record of Birth**

Next

Edit

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19. U.S. Original Self - Attestation

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Next Steps

The original card request is not complete. In order for the card to be processed:

1. Gather the documentation you selected to provide as evidence to the [local SSA office](#).
2. Call your [local SSA office](#) for additional guidance for completing your application.

☐ ***I acknowledge that I have read the 'Next Steps' and understand that I must contact my local SSA office within 45 calendar days to complete the application process.**

Electronic Signature

Please read and accept the following statement to finish the application.

I understand and agree that my application will be signed electronically, which is the legal equivalent of my handwritten signature, when I select the SUBMIT APPLICATION PACKAGE button below. I also understand that my electronic signature means that I intend to apply for an original SSN card and have provided the Social Security Administration with accurate information.

I declare under penalty of perjury that I have examined all the information on this application 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 this electronic application, or causes someone else to do so, commits a crime and may be sent to prison or may face other penalties, or both.

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19.1. U.S. Original Self – Attestation – Acknowledgement Checked

* The dynamic behavior shown in the screenshot below is the same in all paths and will not be shown in future paths.

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Next Steps

The original card request is not complete. In order for the card to be processed:

1. Gather the documentation you selected to provide as evidence to the [local SSA office](#).
2. Call your [local SSA office](#) for additional guidance for completing your application.

☒ ***I acknowledge that I have read the 'Next Steps' and understand that I must contact my local SSA office within 45 calendar days to complete the application process.**

Electronic Signature

Please read and accept the following statement to finish the application.

I understand and agree that my application will be signed electronically, which is the legal equivalent of my handwritten signature, when I select the SUBMIT APPLICATION PACKAGE button below. I also understand that my electronic signature means that I intend to apply for an original SSN card and have provided the Social Security Administration with accurate information.

I declare under penalty of perjury that I have examined all the information on this application 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 this electronic application, or causes someone else to do so, commits a crime and may be sent to prison or may face other penalties, or both.

Submit Application Package

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20. U.S. Original Self - Success

Success – Non-ESS:

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

 You successfully submitted your application! The Online Control Number for your application is 0111111111111111. Please write this number down and/or print this screen for your records.

IMPORTANT: Your Social Security card request is not complete until you show the document(s) below to a [local Social Security office](#) or card center. You need to provide the documents within 45 days of submission or you will need to submit a new application.

- U.S. driver's license
- Marriage document/U.S. only

PREPARING FOR YOUR VISIT:

- We don't schedule appointments to complete Social Security card applications. However, we can complete your in-office interview quickly because you submitted your application online today.
- If you have questions before you visit, please call your local Social Security office or our National 800 Number at 1-800-772-1213.
- You must wear a mask and follow physical distancing requirements, even if you are vaccinated.
- You may need to wait outside because space in our offices is limited due to physical distancing requirements. Please plan for cold or bad weather.
- We ask that you come alone unless you require help with your visit. If you require help, we can only permit one person to join you.
- Please follow directions for check-in when you arrive.

 **Will Social Security contact me about my application?**

We will use the address you provided below if we need to contact you regarding your application. Don't wait to hear from Social Security before visiting an office to show your documents.

123 Main St.
Anytown, Maryland 12345

Print

Done

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Success - Banned:

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

 **You successfully submitted your application! The Online Control Number for your application is O1111111111111111. Please write this number down and/or print this screen for your records.**

IMPORTANT: Your Social Security card request is not complete until you provide the document(s) listed below to a local [Social Security office](#) or card center. You need to mail the original documents within 45 days of submission or you will need to submit a new application.

- U.S. driver's license
- Marriage document/U.S. only

If you have questions about your social security card application, please call your local Social Security office or our National 800 Number at 1-800-772-1213.

 **Will Social Security contact me about my application?**

We will use the address you provided below if we need to contact you regarding your application. Don't wait to hear from Social Security before mailing your original documents to a local [Social Security office](#) or card center.

123 Main St.
Anytown, Maryland 12345

Print

Done

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 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

 **You successfully submitted your application! The Online Control Number for your application is O1111111111111111. Please write this number down and/or print this screen for your records.**

IMPORTANT: Your Social Security card request is not complete until you show the document(s) below to a [local Social Security office](#) or card center. You must schedule your appointment within 45 days, or you will need to submit a new application.

- U.S. driver's license
- Marriage document/U.S. only

PREPARING FOR YOUR VISIT:

- Please gather the documents before you visit and bring them with you. We can't complete your application without them.
- If you have questions before you visit, please call your local Social Security office or our National 800 Number at 1-800-772-1213.
- You must wear a mask and follow physical distancing requirements, even if you are vaccinated.
- You may need to wait outside because space in our offices is limited due to physical distancing requirements. Please plan for cold or bad weather.
- We ask that you come alone unless you require help with your visit. If you require help, we can only permit one person to join you.
- Please follow directions for check-in when you arrive.

 **Will Social Security contact me about my application?**

We will use the address you provided below if we need to contact you regarding your application. Don't wait to hear from Social Security before visiting an office to show your documents.

123 Main St.
Anytown, Maryland 12345

Print

Schedule an Appointment

Done

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21. U.S. Original Someone Else Adult - Landing

 **Social Security**

Use Our Online Service To Obtain A Social Security Number Card

Online Social Security Number Application

Request a Social Security Number (SSN) card online and provide your documentation to the local Social Security Administration (SSA) office.

1. We will walk you through the guided steps needed to submit your request.
2. After you submit your online request, you must **visit** your [local Social Security office or card center](#) with your documentation within **45 calendar days**.

Acceptable documents **MUST** be original or copies certified by the issuing agency, unexpired and must show name, date of birth or age. [Find out which documents are required for your original or replacement card request.](#)

After SSA verifies your document(s) and completes your request, you will receive your social security card in the mail **within 14 business days**.

Apply Now

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22. U.S. Original Someone Else Adult - Age 18 or Older

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

***You must be 18 or older to fill out this application. Are you 18 or older?**

☐ Yes ☐ No

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23. U.S. Original Someone Else Adult - U.S. Mailing Address Available

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** Do you have a U.S. mailing address?**
This includes Fleet Post Office [FPO], Army Post Office [APO] and Diplomatic Post Office [DPO] addresses.
☐ Yes ☐ No

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24. U.S. Original Someone Else Adult - Have an SSN

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Does the person who the application is for already have a Social Security Number (SSN)?**

☐ Yes ☐ No

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25. U.S. Original Someone Else Adult - Citizenship

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Is the individual for whom you are applying a U.S. Citizen?**

☐ Yes ☐ No

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26. U.S. Original Someone Else Adult - Applying For

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

***Are you an adult applying for**

☐ Yourself

☐ Someone else

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27. U.S. Original Someone Else Adult - Applying For Someone Else Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

If you are applying for someone else, what is YOUR name?

* First

Middle

* Last

Suffix

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28. U.S. Original Someone Else Adult – Individual's Date of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is the individual's date of birth?

*Month

*Day

*Year

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29. U.S. Original Someone Else Adult - Relationship Adult

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** What is YOUR relationship to the individual?**

☐ Court Appointed Legal Guardian
☐ Administrator of Estate
☐ State Agency or State Licensed Agency with Legal Custody
☐ Individual who can Establish Relationship and Responsibility
☐ None of the Above

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29.1. U.S. Original Someone Else Adult - Relationship Adult – None of the Above

* The messaging and behavior in the screenshot below is the same in all Someone Else Adult/Child paths and will not be shown in future paths.

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** What is YOUR relationship to the individual?**

☐ Court Appointed Legal Guardian
☐ Administrator of Estate
☐ State Agency or State Licensed Agency with Legal Custody
☐ Individual who can Establish Relationship and Responsibility
☒ None of the Above

 If you do not have a relationship to and responsibility for the individual you are applying for, you cannot continue this online process. Questions? Please call us toll-free at 1-800-772-1213 (TTY 1-800-325-0778).

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30. U.S. Original Someone Else Adult - Individual Capabilities

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Is the individual for whom you are applying physically or mentally able to file an application on his or her own?**

☐ Yes ☐ No

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30.1. U.S. Original Someone Else Adult - Individual Capabilities – Yes

* The messaging and behavior in the screenshot below is the same in all Someone Else Adult paths and will not be shown in future paths.

 Social Security

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Is the individual for whom you are applying physically or mentally able to file an application on his or her own?**

☒ Yes ☐ No

 The individual you are applying for must apply for himself/herself.

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31. U.S. Original Someone Else Adult - Individual's Place of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

Where is the individual's place of birth?
☐ U.S. ☐ International

* City/Town

* State/Territory

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32. U.S. Original Someone Else Adult - Individual's Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

How should the individual's name appear on the card?

* First

Middle

* Last

Suffix

* Is the name above the individual's full name at birth?

☐ Yes ☐ No

* Has the individual ever used any other names not listed above?

☐ Yes ☐ No

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33. U.S. Original Someone Else Adult - Individual's Sex

 Social Security

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Online Social Security Number Application

* Indicates required information

***What is the individual's sex?**

☐ Male ☐ Female

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34. U.S. Original Someone Else Adult - Individual's Parents Names

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

***What is the individual's parent/mother's birth name?**
☐ Unknown

***First**

Middle

***Last**

Suffix

***What is the individual's parent/father's name?**
☐ Unknown

***First**

Middle

***Last**

Suffix

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35. U.S. Original Someone Else Adult - U.S. Mailing Address

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is YOUR mailing address?
Enter a valid U.S. address where the Social Security Administration can mail the card.

* Street Address

Apartment, Suite, Building, Etc.

* City/Town

* State/Territory

* ZIP Code

What is your daytime phone number?
10-digit Number

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36. U.S. Original Someone Else – Adult – Race and Ethnicity



Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates Required Information

Race and Ethnicity

The next two questions are about race and ethnicity. **Providing this information is voluntary and will not affect your application.**

We are requesting this information for research and statistical purposes, to ensure we treat our customers fairly and equally. **We hope you will share this information with us.**

If you do not want to provide this information, select the “Next” button to go to the next page.

Is the individual Hispanic or Latino? (Select one)

▼ Ethnicity Definitions

☐ Yes

☐ No

What is the individual's race? (Select one or more)

▼ Race Definitions

☐ Alaska Native

☐ American Indian

☐ Asian

☐ Black/African American

☐ Native Hawaiian

☐ Other Pacific Islander

☐ White

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37. U.S. Original Someone Else – Adult – Proof of Identity

*The Field Level Data collection is the same as U.S. Original Self Documentation screens and will not be repeated in most cases.

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

i **What you need to know about documentation**

- You must provide original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a U.S. passport as proof of both citizenship and identity.

Social Security Number Documentation

* Indicates required information

*** Proof of Identity for you**
Please select one document from the list

☒ U.S. driver's license
☐ State-issued non-driver identification card
☐ U.S. passport
☐ None of the above

Additional information for **U.S. driver's license**.

*** Which State or Territory issued the Driver's License?**

--

*** What is the Driver's License Number?**

*** What is the Issue Date?**

Month Day Year

-- -- --

*** What is the Expiration Date?**

Month Day Year

-- -- --

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38. U.S. Original Someone Else – Adult – Proof of Age for Individual


Social Security

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

i
What you need to know about documentation

- You must provide original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a U.S. passport as proof of both citizenship and identity.

Social Security Number Documentation

* Indicates required information

*** Does the Individual have a U.S. Birth Certificate that was issued before the age of 5?**
If the Birth Certificate was issued after the age of 5, other documentation will be needed.

☒ Yes, I have a Birth Certificate issued before the age of 5.

☐ No, I will provide other documentation.

*** Which State issued this document?**

--

*** What is the Certificate Number?**
You may see this labeled as *Document Number*

*** What is the Issue Date?**

Month
Day
Year

--

--

*** What is the Recordation Date?**
You may see this labeled as *Filing Date*.

Month
Day
Year

--

--

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** Proof of Age Field Level Data and other options are identical to U.S. Original Self and will not be repeated here.

39. U.S. Original Someone Else – Adult – Proof of Citizenship for Individual


Social Security

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

i What you need to know about documentation

- You must provide original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a U.S. passport as proof of both citizenship and identity.

Social Security Number Documentation

• Indicates required information

• Choose a document to prove the individual's Citizenship status.

Additional information is required because the document you provided for Proof of Age does not cover Citizenship.

☐ Certification of Naturalization (N-550/N570)
☐ U.S. Passport/Passport Card
☐ Certification of Citizenship (N-560/N561)
☐ Machine Readable Immigrant Visa (MRIV) showing a code of "IR3" or "IH3"
☐ U.S. Citizen Identification Card (I-179)
☐ American Indian Card (I-872) showing a class code of "KIC"
☐ Northern Mariana Card (I-873)
☐ Certificate Statement from a U.S. Consular Official
☐ None of the above

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**** Proof of Citizenship Field Level Data and other options are identical to U.S. Original Self and will not be repeated here.**

40. U.S. Original Someone Else – Adult – Proof of Identity for Individual


Social Security

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

i
What you need to know about documentation

- You must provide original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a U.S. passport as proof of both citizenship and identity.

Social Security Number Documentation

* Indicates required information

***Proof of Identity for the Individual**
Please select one document from the list

☒ U.S. driver's license
 ☐ State-issued non-driver identification card
 ☐ U.S. passport
 ☐ None of the above

Additional information for **U.S. driver's license**.

*** Which State or Territory issued the Driver's License?**

*** What is the Driver's License Number?**

*** What is the Issue Date?**

Month Day Year

*** What is the Expiration Date?**

Month Day Year

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* Other Proof of Identity Options are identical to U.S. Original Self and will not be repeated here.

41. U.S. Original Someone Else Adult - Review and Edit

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Review and Edit

Please review the answers you provided. If you need to make any changes, please select "Edit" to return to that part of the application and make the correction.

 **Age**

Edit

You must be 18 or older to fill out this application. Are you 18 or older?: **Yes**

 **U.S. Mailing Address**

Edit

Do you have a U.S. mailing address?: **Yes**

 **Social Security Number**

Edit

Does the person who the application is for already have a Social Security Number (SSN)?: **No**

 **Citizenship Status**

Edit

Is the individual for whom you are applying a U.S. citizen?: **Yes**

 **Applying For**

Edit

Are you an adult applying for: **Someone Else**

 **Your Name**

Edit

If you are applying for someone else, what is YOUR name?: **John Smith**

 **Date of Birth**

Edit

What is the individual's date of birth?: **January 1, 1980**

U.S. Original Someone Else Adult - Review and Edit – Continued

 Relationship	Edit
What is YOUR relationship to the individual?: Court Appointed Legal Guardian	
 Individual's Capability	Edit
Is the individual for whom you are applying physically or mentally able to file an application on his or her own?: No	
 Place of Birth	Edit
Where is the individual's place of birth?: Fairhope, Alabama	
 Name	Edit
How should the individual's name appear on the new card?: Jake Smith	
Is the name above the individual's full name at birth?: Yes	
Has the individual ever used any other names not listed above?: No	
 Sex	Edit
What is the individual's sex?: Male	
 Parent's Name	Edit
What is the individual's parent/mother's birth name?: Not Answered	
What is the individual's parent/father's name?: Not Answered	

U.S. Original Someone Else Adult - Review and Edit - Continued

✓ U.S. Mailing Address and Phone Number

Edit

What is YOUR mailing address?
Street Address: **123 Main St.**
City/Town: **Anytown**
State: **Alaska**
ZIP Code: **12345**

What is your daytime phone number?: **Not Answered**

✓ Race and Ethnicity

Edit

Are you Hispanic or Latino? (Select one): **No response**
What is your race? (Select one or more): **No response**

✓ Documentation

Edit

Identity Documentation for You: **U.S. driver's license**
Proof of Citizenship for the individual: **U.S. Public Birth Certificate**
Proof of Identity for the individual: **Certification of Report of Birth (DS-1350)**
Proof of Age for the individual: **U.S. Hospital Record of Birth**
Custody and Responsibility Documentation: **Other document(s) that show your relationship and responsibility**
Physical or Mental incapacity Documentation: **Documentation that the individual is physically or mentally unable to file an application on his or her behalf (e.g., doctor's certification)**

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42. U.S. Original Someone Else Adult - Attestation

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Next Steps

The original card request is not complete. In order for the card to be processed:

1. Gather the documentation you selected to provide as evidence to the [local SSA office](#).
2. Call your [local SSA office](#) for additional guidance for completing your application.

☐ ***I acknowledge that I have read the 'Next Steps' and understand that I must contact my local SSA office within 45 calendar days to complete the application process.**

Electronic Signature

Please read and accept the following statement to finish the application.

I understand and agree that my application will be signed electronically, which is the legal equivalent of my handwritten signature, when I select the SUBMIT APPLICATION PACKAGE button below. I also understand that my electronic signature means that I intend to apply for an original SSN card and have provided the Social Security Administration with accurate information.

I declare under penalty of perjury that I have examined all the information on this application 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 this electronic application, or causes someone else to do so, commits a crime and may be sent to prison or may face other penalties, or both.

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43. U.S. Original Someone Else Adult - Success

Success – Non-ESS:

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

 **You successfully submitted your application! The Online Control Number for your application is 0111111111111111. Please write this number down and/or print this screen for your records.**

IMPORTANT: Your Social Security card request is not complete until you show the document(s) below to a [local Social Security office](#) or card center. You need to provide the documents within 45 days of submission or you will need to submit a new application.

- U.S. driver's license
- Marriage document/U.S. only

PREPARING FOR YOUR VISIT:

- We don't schedule appointments to complete Social Security card applications. However, we can complete your in-office interview quickly because you submitted your application online today.
- If you have questions before you visit, please call your local Social Security office or our National 800 Number at 1-800-772-1213.
- You must wear a mask and follow physical distancing requirements, even if you are vaccinated.
- You may need to wait outside because space in our offices is limited due to physical distancing requirements. Please plan for cold or bad weather.
- We ask that you come alone unless you require help with your visit. If you require help, we can only permit one person to join you.
- Please follow directions for check-in when you arrive.

 **Will Social Security contact me about my application?**

We will use the address you provided below if we need to contact you regarding your application. Don't wait to hear from Social Security before visiting an office to show your documents.

123 Main St.
Anytown, Maryland 12345

Print

Done

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44. U.S. Original Someone Else Child - Landing

 **Social Security**

Use Our Online Service To Obtain A Social Security Number Card

Online Social Security Number Application

Request a Social Security Number (SSN) card online and provide your documentation to the local Social Security Administration (SSA) office.

1. We will walk you through the guided steps needed to submit your request.
2. After you submit your online request, you must **visit** your [local Social Security office or card center](#) with your documentation within **45 calendar days**.

Acceptable documents **MUST** be original or copies certified by the issuing agency, unexpired and must show name, date of birth or age. [Find out which documents are required for your original or replacement card request.](#)

After SSA verifies your document(s) and completes your request, you will receive your social security card in the mail **within 14 business days**.

Apply Now

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45. U.S. Original Someone Else Child - Age 18 or Older

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

***You must be 18 or older to fill out this application. Are you 18 or older?**

☐ Yes ☐ No

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46. U.S. Original Someone Else Child - U.S. Mailing Address Available

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** Do you have a U.S. mailing address?**
This includes Fleet Post Office [FPO], Army Post Office [APO] and Diplomatic Post Office [DPO] addresses.
☐ Yes ☐ No

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47. U.S. Original Someone Else Child - Have an SSN

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** Does the person who the application is for already have a Social Security Number (SSN)?**
☐ Yes ☐ No

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48. U.S. Original Someone Else Child - Citizenship

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Is the individual for whom you are applying a U.S. Citizen?**

☐ Yes ☐ No

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49. U.S. Original Someone Else Child - Applying For

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

***Are you an adult applying for**

☐ Yourself
☐ Someone else

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50. U.S. Original Someone Else Child - Applying For Someone Else Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

If you are applying for someone else, what is YOUR name?

* First

Middle

* Last

Suffix

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51. U.S. Original Someone Else Child – Individual's Date of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is the individual's date of birth?

*Month

*Day

*Year

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52. U.S. Original Someone Else Child - Relationship Child

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** What is your relationship to and responsibility for the individual?**

☐ Court Appointed Legal Guardian
☐ Custodial Mother
☐ Custodial Father
☐ Administrator of Estate
☐ Relative with Custody of Child
☐ State Agency or State Licensed Agency with Legal Custody
☐ Individual who can Establish Relationship and Responsibility
☐ None of the Above

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53. U.S. Original Someone Else Child - Individual's Place of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

Where is the individual's place of birth?
☐ U.S. ☐ International

* City/Town

* State/Territory

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54. U.S. Original Someone Else Child - Individual's Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

How should the individual's name appear on the card?

* First

Middle

* Last

Suffix

* Is the name above the individual's full name at birth?

☐ Yes ☐ No

* Has the individual ever used any other names not listed above?

☐ Yes ☐ No

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55. U.S. Original Someone Else Child - Individual's Sex

 Social Security

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

***What is the individual's sex?**

☐ Male ☐ Female

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56. U.S. Original Someone Else Child - Individual's Parents Names

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

***What is the individual's parent/mother's birth name?**
☐ Unknown

***First**

Middle

***Last**

Suffix

***What is the individual's parent/father's name?**
☐ Unknown

***First**

Middle

***Last**

Suffix

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57. U.S. Original Someone Else Child - U.S. Mailing Address

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is YOUR mailing address?
Enter a valid U.S. address where the Social Security Administration can mail the card.

* Street Address

Apartment, Suite, Building, Etc.

* City/Town

* State/Territory

* ZIP Code

What is your daytime phone number?
10-digit Number

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58. U.S. Original Someone Else Child – Race and Ethnicity



Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates Required Information

Race and Ethnicity

The next two questions are about race and ethnicity. **Providing this information is voluntary and will not affect your application.**

We are requesting this information for research and statistical purposes, to ensure we treat our customers fairly and equally. **We hope you will share this information with us.**

If you do not want to provide this information, select the "Next" button to go to the next page.

Is the child Hispanic or Latino? (Select one)

▼ Ethnicity Definitions

☐ Yes

☐ No

What is the child's race? (Select one or more)

▼ Race Definitions

☐ Alaska Native

☐ American Indian

☐ Asian

☐ Black/African American

☐ Native Hawaiian

☐ Other Pacific Islander

☐ White

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59. U.S. Original Someone Else Child - Individual's Identity



Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application



What you need to know about documentation

- You must provide original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a U.S. passport as proof of both citizenship and identity.

Social Security Number Documentation

* Indicates required information

* Proof of identity for you

Please select one document from the list

☐ U.S. driver's license
☐ State-issued non-driver identification card
☐ U.S. passport
☐ None of the above

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**** Field Level data and other options are identical to U.S. Original Self and will not be repeated here.**

60. U.S. Original Someone Else Child – Proof of Age for Child

 Social Security

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

 **What you need to know about documentation**

- You must provide original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a U.S. passport as proof of both citizenship and identity.

Social Security Number Documentation

* Indicates required information

*** Does the Child have a U.S. Birth Certificate that was issued before the age of 5?**

If the Birth Certificate was issued after the age of 5, other documentation will be needed.

☒ Yes, I have a Birth Certificate issued before the age of 5.

☐ No, I will provide other documentation.

****Field level data and other options are identical to U.S. Original Self and will not be repeated here.**

61. U.S. Original Someone Else Child – Proof of Citizenship for Child



Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application



What you need to know about documentation

- You must provide original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a U.S. passport as proof of both citizenship and identity.

Social Security Number Documentation

* Indicates required information

* Choose a document to prove the child's Citizenship status.

Additional information is required because the document you provided for Proof of Age does not cover Citizenship.

- | |
|---|
| ☐ Certification of Naturalization (N-550/N570) |
| ☐ U.S. Passport/Passport Card |
| ☐ Certification of Citizenship (N-560/N561) |
| ☐ Machine Readable Immigrant Visa (MRIV) showing a code of "IR3" or "IH3" |
| ☐ U.S. Citizen Identification Card (I-179) |
| ☐ American Indian Card (I-872) showing a class code of "KIC" |
| ☐ Northern Mariana Card (I-873) |
| ☐ Certificate Statement from a U.S. Consular Official |
| ☐ None of the above |

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****Field level data and other options are identical to U.S. Original Self and will not be repeated here.**

62. U.S. Original Someone Else Child – Proof of Identity for Child



Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application



What you need to know about documentation

- You must provide original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a U.S. passport as proof of both citizenship and identity.

Social Security Number Documentation

* Indicates required information

* Proof of identity for the child

Please select one document from the list

- | |
|---|
| ☐ U.S. driver's license |
| ☐ State-issued non-driver identification card |
| ☐ U.S. passport |
| ☐ None of the above |

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****Field level data and other options are identical to U.S. Original Self and will not be repeated here.**

63. U.S. Original Someone Else Child - Review and Edit

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Review and Edit

Please review the answers you provided. If you need to make any changes, please select "Edit" to return to that part of the application and make the correction.

 **Age**

Edit

You must be 18 or older to fill out this application. Are you 18 or older?: **Yes**

 **U.S. Mailing Address**

Edit

Do you have a U.S. mailing address?: **Yes**

 **Social Security Number**

Edit

Does the person who the application is for already have a Social Security Number (SSN)?: **No**

 **Citizenship Status**

Edit

Is the individual for whom you are applying a U.S. citizen?: **Yes**

 **Applying For**

Edit

Are you an adult applying for: **Someone Else**

 **Your Name**

Edit

If you are applying for someone else, what is YOUR name?: **John Smith**

 **Date of Birth**

Edit

What is the individual's date of birth?: **January 1, 2017**

U.S. Original Someone Else Child - Review and Edit - Continued

 Relationship	Edit
What is YOUR relationship to and responsibility for the individual?: Custodial Father	
 Place of Birth	Edit
Where is the individual's place of birth?: Fairhope, Alabama	
 Name	Edit
How should the individual's name appear on the new card?: Jake Smith	
Is the name above the individual's full name at birth?: Yes	
Has the individual ever used any other names not listed above?: No	
 Sex	Edit
What is the individual's sex?: Male	
 Parent's Name	Edit
What is the individual's parent/mother's birth name?: Not Answered	
What is the individual's parent/father's name?: Not Answered	
 U.S. Mailing Address and Phone Number	Edit
What is YOUR mailing address?	
Street Address: 123 Main St.	
City/Town: Anytown	
State: Alaska	
ZIP Code: 12345	
What is your daytime phone number?: Not Answered	

U.S. Original Someone Else Child - Review and Edit - Continued

 **Race and Ethnicity**

Edit

Are you Hispanic or Latino? (Select one): **No response**
What is your race? (Select one or more): **No response**

 **Documentation**

Edit

Identity Documentation for You: **U.S. driver's license**
Proof of Citizenship for the individual: **U.S. Public Birth Certificate**
Proof of Identity for the individual: **Certification of Report of Birth (DS-1350)**
Proof of Age for the individual: **U.S. Hospital Record of Birth**
Custody and Responsibility Documentation: **Court custody documentation**

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64. U.S. Original Someone Else Child - Attestation



Social Security

Use Our Online Service To Obtain a Social Security Number Card

Next Steps

The original card request is not complete. In order for the card to be processed:

1. Gather the documentation you selected to provide as evidence to the [local SSA office](#).
2. Call your [local SSA office](#) for additional guidance for completing your application.

☐ ***I acknowledge that I have read the 'Next Steps' and understand that I must contact my local SSA office within 45 calendar days to complete the application process.**

Electronic Signature

Please read and accept the following statement to finish the application.

I understand and agree that my application will be signed electronically, which is the legal equivalent of my handwritten signature, when I select the SUBMIT APPLICATION PACKAGE button below. I also understand that my electronic signature means that I intend to apply for an original SSN card and have provided the Social Security Administration with accurate information.

I declare under penalty of perjury that I have examined all the information on this application 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 this electronic application, or causes someone else to do so, commits a crime and may be sent to prison or may face other penalties, or both.

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65. U.S. Original Someone Else Child - Success

Success – Non-ESS:

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

 **You successfully submitted your application! The Online Control Number for your application is O1111111111111111. Please write this number down and/or print this screen for your records.**

IMPORTANT: Your Social Security card request is not complete until you show the document(s) below to a [local Social Security office](#) or card center. You need to provide the documents within 45 days of submission or you will need to submit a new application.

- U.S. driver's license
- Marriage document/U.S. only

PREPARING FOR YOUR VISIT:

- We don't schedule appointments to complete Social Security card applications. However, we can complete your in-office interview quickly because you submitted your application online today.
- If you have questions before you visit, please call your local Social Security office or our National 800 Number at 1-800-772-1213.
- You must wear a mask and follow physical distancing requirements, even if you are vaccinated.
- You may need to wait outside because space in our offices is limited due to physical distancing requirements. Please plan for cold or bad weather.
- We ask that you come alone unless you require help with your visit. If you require help, we can only permit one person to join you.
- Please follow directions for check-in when you arrive.

 **Will Social Security contact me about my application?**

We will use the address you provided below if we need to contact you regarding your application. Don't wait to hear from Social Security before visiting an office to show your documents.

123 Main St.
Anytown, Maryland 12345

Print

Done

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66. U.S. Replacement Self - Landing

 **Social Security**

Use Our Online Service To Obtain A Social Security Number Card

Online Social Security Number Application

Request a Social Security Number (SSN) card online and provide your documentation to the local Social Security Administration (SSA) office.

1. We will walk you through the guided steps needed to submit your request.
2. After you submit your online request, you must **visit** your [local Social Security office or card center](#) with your documentation within **45 calendar days**.

Acceptable documents **MUST** be original or copies certified by the issuing agency, unexpired and must show name, date of birth or age. [Find out which documents are required for your original or replacement card request.](#)

After SSA verifies your document(s) and completes your request, you will receive your social security card in the mail **within 14 business days**.

Apply Now

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67. U.S. Replacement Self - Age 18 or Older

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

***You must be 18 or older to fill out this application. Are you 18 or older?**

☐ Yes ☐ No

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68. U.S. Replacement Self - U.S. Mailing Address Available

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Do you have a U.S. mailing address?**

This includes Fleet Post Office [FPO], Army Post Office [APO] and Diplomatic Post Office [DPO] addresses.

☐ Yes ☐ No

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69. U.S. Replacement Self - Have an SSN

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Does the person who the application is for already have a Social Security Number (SSN)?**

☐ Yes ☐ No

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70. U.S. Replacement Self - Citizenship

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

***** Indicates required information

*** Is the individual for whom you are applying a U.S. Citizen?**

☐ Yes ☐ No

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71. U.S. Replacement Self - Applying For

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

***Are you an adult applying for**

☐ Yourself
☐ Someone else

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72. U.S. Replacement Self - Date of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is your date of birth?

* Month

* Day

* Year

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73. U.S. Replacement Self - Name Change

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Are you requesting a name change?**

☐ Yes ☐ No

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74. U.S. Replacement Self - Place of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

Where is your place of birth?
☐ U.S. ☐ International

* City/Town

* State/Territory

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75. U.S. Replacement Self - SSN

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

* **What is your Social Security Number (SSN)?**

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76. U.S. Replacement Self - Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

How should your name appear on the card?

* First

Middle

* Last

Suffix

* Is the name above your full name at birth?

☐ Yes ☐ No

* Have you used any other names not listed above?

☐ Yes ☐ No

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65. U.S. Replacement Self - Parents Names

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

***What is your parent/mother's birth name?**

☐ Unknown

***First**

Middle

***Last**

Suffix

***What is your parent/father's name?**

☐ Unknown

***First**

Middle

***Last**

Suffix

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66. U.S. Replacement Self - U.S. Mailing Address

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is your mailing address?
Enter a valid U.S. address where the Social Security Administration can mail the card.

* Street Address

Apartment, Suite, Building, Etc.

* City/Town

* State/Territory

* ZIP Code

What is your daytime phone number?
10-digit Number

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67. U.S. Replacement Self - U.S. Documentation



Social Security

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application



What you need to know about documentation

- You must provide original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a U.S. passport as proof of both citizenship and identity.
- If U.S. citizenship has not already been established with us, we will need to see proof of citizenship.

Social Security Number Documentation

* Indicates required information

* Identity Documentation

Please select one document from the list

- | |
|---|
| ☐ U.S. driver's license |
| ☐ State-issued non-driver identification card |
| ☐ U.S. passport |
| ☐ None of the above |

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68. U.S. Replacement Self - U.S. Documentation - Name Change



Social Security

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application



What you need to know about documentation

- You must provide original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a U.S. passport as proof of both citizenship and identity.
- If U.S. citizenship has not already been established with us, we will need to see proof of citizenship.

Social Security Number Documentation

* Indicates required information

If the document you provide as evidence of a legal name change does not give us enough information to identify you in our records or if you changed your name more than two years ago (four years ago if you are under 18 years of age), you must show us an identity document in your prior name (as shown in our records). We will accept an identity document in your old name that has expired.

If you do not have an identity document in your prior name, we may accept an unexpired identity document in your new name, as long as we can properly establish your identity in our records.

* Identity Documentation

Please select one document from the list

- ☐ U.S. driver's license
- ☐ State-issued non-driver identification card
- ☐ U.S. passport
- ☐ None of the above

* Name Change Documentation for You

Please select one document from the list

- ☐ Amended birth certificate
- ☐ Court order for name change

☐ Court order for a name change	
☐ Marriage document/U.S. only	
☐ Divorce decree	

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68.1. U.S. Replacement Self - U.S. Documentation - Name Change – Amended Birth Certificate

* In the Name Change Documentation for You field in the screenshot below, Amended Birth Certificate dynamic fields are the same in all paths and will not be shown in future paths.

***Name Change Documentation for You**
Please select one document from the list

☒ Amended birth certificate
☐ Court order for a name change
☐ Marriage document/U.S. only
☐ Divorce decree

***What is your birth certificate number?**

***In which state or territory was your birth certificate issued?**

What is the issue date?

*Month *Day *Year

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68.2. U.S. Replacement Self - U.S. Documentation - Name Change – Court Order for a Name Change

* In the Name Change Documentation for You field in the screenshot below, Court order for a name change dynamic fields are the same in all paths and will not be shown in future paths.

***Name Change Documentation for You**
Please select one document from the list

☐ Amended birth certificate

☒ Court order for a name change

☐ Marriage document/U.S. only

☐ Divorce decree

What is the event date?

***Month**

***Day**

***Year**

--

--

--

***In which state or territory was your court order issued?**

--

What was your former name?

***First**

Middle

***Last**

Suffix

What is your new name?

***First**

Middle

***Last**

Suffix

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68.3. U.S. Replacement Self - U.S. Documentation - Name Change – Marriage Document/U.S. only

* In the Name Change Documentation for You field in the screenshot below, Marriage document/U.S. only dynamic fields are the same in all paths and will not be shown in future paths.

***Name Change Documentation for You**
Please select one document from the list

☐ Amended birth certificate

☐ Court order for a name change

☒ Marriage document/U.S. only

☐ Divorce decree

What is the issue date?

*Month

*Day

*Year

--

--

What is the event date?

*Month

*Day

*Year

--

--

***In which state or territory was your marriage document issued?**

--

What is the marriage record identification/filing number?

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68.4. U.S. Replacement Self - U.S. Documentation - Name Change – Divorce decree

* In the Name Change Documentation for You field in the screenshot below, Divorce decree dynamic fields are the same in all paths and will not be shown in future paths.

*** Name Change Documentation for You**
Please select one document from the list

☐ Amended birth certificate

☐ Court order for a name change

☐ Marriage document/U.S. only

☒ Divorce decree

What is the issue date?

*Month

--

*Day

--

*Year

What is the event date?

*Month

--

*Day

--

*Year

*** In which state or territory was your divorce decree issued?**

--

What is the divorce decree record identification/filing number?

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69. U.S. Replacement Self - Review and Edit

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Review and Edit

Please review the answers you provided. If you need to make any changes, please select "Edit" to return to that part of the application and make the correction.

 **Age**

Edit

You must be 18 or older to fill out this application. Are you 18 or older?: **Yes**

 **U.S. Mailing Address**

Edit

Do you have a U.S. mailing address?: **Yes**

 **Social Security Number**

Edit

Does the person who the application is for already have a Social Security Number (SSN)?: **Yes**

 **Citizenship Status**

Edit

Is the individual for whom you are applying a U.S. citizen?: **Yes**

 **Applying For**

Edit

Are you an adult applying for: **Yourself**

 **Date of Birth**

Edit

What is your date of birth?: **January 1, 1980**

 **Name Change**

Edit

Are you requesting a name change?: **No**

U.S. Replacement Self - Review and Edit - Continued

 Place of Birth	Edit
Where is your place of birth?: Fairhope, Alabama	
 Assigned Social Security Number	Edit
What is your Social Security Number (SSN)?: 123-45-8976	
 Name	Edit
How should your name appear on the new card?: John Smith	
Is the name above your full name at birth?: Yes	
Have you used any other names not listed above?: No	
 Parent's Name	Edit
What is your parent/mother's birth name?: Not Answered	
What is your parent/father's name?: Not Answered	
 U.S. Mailing Address and Phone Number	Edit
What is your mailing address?	
Street Address: 123 Main St.	
City/Town: Anytown	
State: Alaska	
ZIP Code: 12345	
What is your daytime phone number?: Not Answered	

U.S. Replacement Self - Review and Edit - Continued

 **Race and Ethnicity**

Edit

Are you Hispanic or Latino? (Select one): **No response**

What is your race? (Select one or more): **No response**

 **Documentation**

Edit

Identity Documentation: **Health insurance identification card**

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70. U.S. Replacement Self - Attestation



Social Security

Use Our Online Service To Obtain a Social Security Number Card

Next Steps

The replacement card request is not complete. In order for the card to be processed:

1. Gather the documentation you selected to provide as evidence to the [local SSA office](#).
2. Call your [local SSA office](#) for additional guidance for completing your application.

☐ ***I acknowledge that I have read the 'Next Steps' and understand that I must contact my local SSA office within 45 calendar days to complete the application process.**

Electronic Signature

Please read and accept the following statement to finish the application.

I understand and agree that my application will be signed electronically, which is the legal equivalent of my handwritten signature, when I select the SUBMIT APPLICATION PACKAGE button below. I also understand that my electronic signature means that I intend to apply for a replacement SSN card and have provided the Social Security Administration with accurate information.

I declare under penalty of perjury that I have examined all the information on this application 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 this electronic application, or causes someone else to do so, commits a crime and may be sent to prison or may face other penalties, or both.

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71. U.S. Replacement Self - Success

Success – Non-ESS:

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

 **You successfully submitted your application! The Online Control Number for your application is 0111111111111111. Please write this number down and/or print this screen for your records.**

IMPORTANT: Your Social Security card request is not complete until you show the document(s) below to a [local Social Security office](#) or card center. You need to provide the documents within 45 days of submission or you will need to submit a new application.

- U.S. driver's license
- Marriage document/U.S. only

PREPARING FOR YOUR VISIT:

- We don't schedule appointments to complete Social Security card applications. However, we can complete your in-office interview quickly because you submitted your application online today.
- If you have questions before you visit, please call your local Social Security office or our National 800 Number at 1-800-772-1213.
- You must wear a mask and follow physical distancing requirements, even if you are vaccinated.
- You may need to wait outside because space in our offices is limited due to physical distancing requirements. Please plan for cold or bad weather.
- We ask that you come alone unless you require help with your visit. If you require help, we can only permit one person to join you.
- Please follow directions for check-in when you arrive.

 **Will Social Security contact me about my application?**

We will use the address you provided below if we need to contact you regarding your application. Don't wait to hear from Social Security before visiting an office to show your documents.

123 Main St.
Anytown, Maryland 12345

Print

Done

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Success - Banned:

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

 **You successfully submitted your application! The Online Control Number for your application is O1111111111111111. Please write this number down and/or print this screen for your records.**

IMPORTANT: Your Social Security card request is not complete until you provide the document(s) listed below to a local [Social Security office](#) or card center. You need to mail the original documents within 45 days of submission or you will need to submit a new application.

- U.S. driver's license
- Marriage document/U.S. only

If you have questions about your social security card application, please call your local Social Security office or our National 800 Number at 1-800-772-1213.

 **Will Social Security contact me about my application?**

We will use the address you provided below if we need to contact you regarding your application. Don't wait to hear from Social Security before mailing your original documents to a local [Social Security office](#) or card center.

123 Main St.
Anytown, Maryland 12345

Print

Done

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 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

 **You successfully submitted your application! The Online Control Number for your application is O1111111111111111. Please write this number down and/or print this screen for your records.**

IMPORTANT: Your Social Security card request is not complete until you show the document(s) below to a [local Social Security office](#) or card center. You must schedule your appointment within 45 days, or you will need to submit a new application.

- U.S. driver's license
- Marriage document/U.S. only

PREPARING FOR YOUR VISIT:

- Please gather the documents before you visit and bring them with you. We can't complete your application without them.
- If you have questions before you visit, please call your local Social Security office or our National 800 Number at 1-800-772-1213.
- You must wear a mask and follow physical distancing requirements, even if you are vaccinated.
- You may need to wait outside because space in our offices is limited due to physical distancing requirements. Please plan for cold or bad weather.
- We ask that you come alone unless you require help with your visit. If you require help, we can only permit one person to join you.
- Please follow directions for check-in when you arrive.

 **Will Social Security contact me about my application?**

We will use the address you provided below if we need to contact you regarding your application. Don't wait to hear from Social Security before visiting an office to show your documents.

123 Main St.
Anytown, Maryland 12345

Print

Schedule an Appointment

Done

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72. U.S. Replacement Someone Else Adult - Landing

 **Social Security**

Use Our Online Service To Obtain A Social Security Number Card

Online Social Security Number Application

Request a Social Security Number (SSN) card online and provide your documentation to the local Social Security Administration (SSA) office.

1. We will walk you through the guided steps needed to submit your request.
2. After you submit your online request, you must **visit** your [local Social Security office or card center](#) with your documentation within **45 calendar days**.

Acceptable documents **MUST** be original or copies certified by the issuing agency, unexpired and must show name, date of birth or age. [Find out which documents are required for your original or replacement card request.](#)

After SSA verifies your document(s) and completes your request, you will receive your social security card in the mail **within 14 business days**.

Apply Now

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73. U.S. Replacement Someone Else Adult - Age 18 or Older

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

***You must be 18 or older to fill out this application. Are you 18 or older?**

☐ Yes ☐ No

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74. U.S. Replacement Someone Else Adult - U.S. Mailing Address Available

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** Do you have a U.S. mailing address?**
This includes Fleet Post Office [FPO], Army Post Office [APO] and Diplomatic Post Office [DPO] addresses.
☐ Yes ☐ No

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75. U.S. Replacement Someone Else Adult - Have an SSN

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Does the person who the application is for already have a Social Security Number (SSN)?**

☐ Yes ☐ No

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76. U.S. Replacement Someone Else Adult - Citizenship

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Is the individual for whom you are applying a U.S. Citizen?**

☐ Yes ☐ No

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77. U.S. Replacement Someone Else Adult - Applying For

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

***Are you an adult applying for**

☐ Yourself
☐ Someone else

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78. U.S. Replacement Someone Else Adult - Applying For Someone Else Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

If you are applying for someone else, what is YOUR name?

* First

Middle

* Last

Suffix

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79. U.S. Replacement Someone Else Adult – Individual's Date of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is the individual's date of birth?

*Month

*Day

*Year

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80. U.S. Replacement Someone Else Adult - Relationship Adult

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** What is YOUR relationship to the individual?**

☐ Court Appointed Legal Guardian
☐ Administrator of Estate
☐ State Agency or State Licensed Agency with Legal Custody
☐ Individual who can Establish Relationship and Responsibility
☐ None of the Above

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81. U.S. Replacement Someone Else Adult - Individual Capabilities

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Is the individual for whom you are applying physically or mentally able to file an application on his or her own?**

☐ Yes ☐ No

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82. U.S. Replacement Someone Else Adult - Name Change

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

* Are you requesting a name change for the individual?

☐ Yes ☐ No

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83. U.S. Replacement Someone Else Adult - Individual's Place of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

Where is the individual's place of birth?
☐ U.S. ☐ International

* City/Town

* State/Territory

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84. U.S. Replacement Someone Else Adult - Individual's SSN

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** What is the individual's Social Security Number (SSN)?**

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85. U.S. Replacement Someone Else Adult - Individual's Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

How should the individual's name appear on the card?

* First	Middle	* Last	Suffix
			--

* Is the name above the individual's full name at birth?

☐ Yes ☐ No

* Has the individual used any other names not listed above?

☐ Yes ☐ No

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86. U.S. Replacement Someone Else Adult - Individual's Parents Names

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

***What is the individual's parent/mother's birth name?**
☐ Unknown

***First**

Middle

***Last**

Suffix

***What is the individual's parent/father's name?**
☐ Unknown

***First**

Middle

***Last**

Suffix

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87. U.S. Replacement Someone Else Adult - U.S. Mailing Address

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is YOUR mailing address?
Enter a valid U.S. address where the Social Security Administration can mail the card.

* Street Address

Apartment, Suite, Building, Etc.

* City/Town

* State/Territory

* ZIP Code

What is your daytime phone number?
10-digit Number

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88. U.S. Replacement Someone Else Adult - Individual's U.S. Documentation



Social Security

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application



What you need to know about documentation

- You must provide original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a U.S. passport as proof of both citizenship and identity.
- If U.S. citizenship has not already been established with us, we will need to see proof of citizenship.

Social Security Number Documentation

* Indicates required information

* Identity Documentation for you

Please select one document from the list

- ☐ U.S. driver's license
- ☐ State-issued non-driver identification card
- ☐ U.S. passport
- ☐ None of the above

* Custody and Responsibility Documentation

Please select one document from the list

- ☐ Court custody documentation
- ☐ Letter from state social service placing the individual in your household
- ☐ Other document(s) that show your relationship and responsibility

* Physical or Mental incapacity Documentation

- ☐ Documentation that the individual is physically or mentally unable to file an application on his or her behalf (e.g., doctor's certification)

89. U.S. Replacement Someone Else Adult - Individual's U.S. Documentation - Name Change



Social Security

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application



What you need to know about documentation

- You must provide original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a U.S. passport as proof of both citizenship and identity.
- If U.S. citizenship has not already been established with us, we will need to see proof of citizenship.

Social Security Number Documentation

* Indicates required information

If the document you provide as evidence of a legal name change does not give us enough information to make a proper identification based on what we have in our records or if the new name changed more than two years ago (four years ago if they are under 18 years of age), you must show us an identity document in the prior name (as shown in our records). We will accept an identity document in the old name that has expired.

If you do not have an identity document in the prior name, we may accept an unexpired identity document in the new name, as long as we can properly establish the identity in our records.

* Identity Documentation for you

Please select one document from the list

- | |
|---|
| ☐ U.S. driver's license |
| ☐ State-issued non-driver identification card |
| ☐ U.S. passport |
| ☐ None of the above |

* Custody and Responsibility Documentation

Please select one document from the list

- | |
|---|
| ☐ Court custody documentation |
|---|

☐ Letter from state social service placing the individual in your household

☐ Other document(s) that show your relationship and responsibility

***Physical or Mental incapacity Documentation**

☐ Documentation that the individual is physically or mentally unable to file an application on his or her behalf (e.g., doctor's certification)

***Identity Documentation for the individual**

Please select one document from the list

☐ U.S. driver's license

☐ State-issued non-driver identification card

☐ U.S. passport

☐ None of the above

***Name Change Documentation for Adult**

Please select one document from the list

☐ Amended birth certificate

☐ Court order for a name change

☐ Marriage document/U.S. only

☐ Divorce decree

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90. U.S. Replacement Someone Else Adult - Review and Edit

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Review and Edit

Please review the answers you provided. If you need to make any changes, please select "Edit" to return to that part of the application and make the correction.

 **Age**

Edit

You must be 18 or older to fill out this application. Are you 18 or older?: **Yes**

 **U.S. Mailing Address**

Edit

Do you have a U.S. mailing address?: **Yes**

 **Social Security Number**

Edit

Does the person who the application is for already have a Social Security Number (SSN)?: **Yes**

 **Citizenship Status**

Edit

Is the individual for whom you are applying a U.S. citizen?: **Yes**

 **Applying For**

Edit

Are you an adult applying for: **Someone Else**

 **Your Name**

Edit

If you are applying for someone else, what is YOUR name?: **John Smith**

 **Date of Birth**

Edit

What is the individual's date of birth?: **January 1, 1980**

U.S. Replacement Someone Else Adult - Review and Edit - Continued

 Relationship	Edit
What is YOUR relationship to the individual?: Court Appointed Legal Guardian	
 Individual's Capability	Edit
Is the individual for whom you are applying physically or mentally able to file an application on his or her own?: No	
 Name Change	Edit
Are you requesting a name change for the individual?: No	
 Place of Birth	Edit
Where is the individual's place of birth?: Fairhope, Alabama	
 Assigned Social Security Number	Edit
What is the individual's Social Security Number (SSN)?: 123-45-8976	
 Name	Edit
How should the individual's name appear on the new card?: Jake Smith	
Is the name above the individual's full name at birth?: Yes	
Has the individual used any other names not listed above?: No	
 Parent's Name	Edit
What is the individual's parent/mother's birth name?: Not Answered	
What is the individual's parent/father's name?: Not Answered	

U.S. Replacement Someone Else Adult - Review and Edit - Continued

✓ U.S. Mailing Address and Phone Number

Edit

What is YOUR mailing address?

Street Address: **123 Main St.**
City/Town: **Anytown**
State: **Alaska**
ZIP Code: **12345**

What is your daytime phone number?: **Not Answered**

✓ Race and Ethnicity

Edit

Are you Hispanic or Latino? (Select one): **No response**

What is your race? (Select one or more): **No response**

✓ Documentation

Edit

Identity Documentation for You: **School identification card**

Custody and Responsibility Documentation: **Other document(s) that show your relationship and responsibility**

Physical or Mental incapacity Documentation: **Documentation that the individual is physically or mentally unable to file an application on his or her behalf (e.g., doctor's certification)**

Identity Documentation for the individual: **Health insurance identification card**

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91. U.S. Replacement Someone Else Adult - Attestation



Social Security

Use Our Online Service To Obtain a Social Security Number Card

Next Steps

The replacement card request is not complete. In order for the card to be processed:

1. Gather the documentation you selected to provide as evidence to the [local SSA office](#).
2. Call your [local SSA office](#) for additional guidance for completing your application.

☐ ***I acknowledge that I have read the 'Next Steps' and understand that I must contact my local SSA office within 45 calendar days to complete the application process.**

Electronic Signature

Please read and accept the following statement to finish the application.

I understand and agree that my application will be signed electronically, which is the legal equivalent of my handwritten signature, when I select the SUBMIT APPLICATION PACKAGE button below. I also understand that my electronic signature means that I intend to apply for a replacement SSN card and have provided the Social Security Administration with accurate information.

I declare under penalty of perjury that I have examined all the information on this application 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 this electronic application, or causes someone else to do so, commits a crime and may be sent to prison or may face other penalties, or both.

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92. U.S. Replacement Someone Else Adult - Success

Success - ESS

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

 You successfully submitted your application! The Online Control Number for your application is 0111111111111111. Please write this number down and/or print this screen for your records.

IMPORTANT: Your Social Security card request is not complete until you show the document(s) below to a [local Social Security office](#) or card center. You must schedule your appointment within 45 days, or you will need to submit a new application.

- U.S. driver's license
- Marriage document/U.S. only

PREPARING FOR YOUR VISIT:

- Please gather the documents before you visit and bring them with you. We can't complete your application without them.
- If you have questions before you visit, please call your local Social Security office or our National 800 Number at 1-800-772-1213.
- You must wear a mask and follow physical distancing requirements, even if you are vaccinated.
- You may need to wait outside because space in our offices is limited due to physical distancing requirements. Please plan for cold or bad weather.
- We ask that you come alone unless you require help with your visit. If you require help, we can only permit one person to join you.
- Please follow directions for check-in when you arrive.

 **Will Social Security contact me about my application?**

We will use the address you provided below if we need to contact you regarding your application. Don't wait to hear from Social Security before visiting an office to show your documents.

123 Main St.
Anytown, Maryland 12345

Print

Schedule an Appointment

Done

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93. U.S. Replacement Someone Else Child - Landing

 **Social Security**

Use Our Online Service To Obtain A Social Security Number Card

Online Social Security Number Application

Request a Social Security Number (SSN) card online and provide your documentation to the local Social Security Administration (SSA) office.

1. We will walk you through the guided steps needed to submit your request.
2. After you submit your online request, you must **visit** your [local Social Security office or card center](#) with your documentation within **45 calendar days**.

Acceptable documents **MUST** be original or copies certified by the issuing agency, unexpired and must show name, date of birth or age. [Find out which documents are required for your original or replacement card request.](#)

After SSA verifies your document(s) and completes your request, you will receive your social security card in the mail **within 14 business days**.

Apply Now

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94. U.S. Replacement Someone Else Child - Age 18 or Older

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

***You must be 18 or older to fill out this application. Are you 18 or older?**

☐ Yes ☐ No

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95. U.S. Replacement Someone Else Child - U.S. Mailing Address Available

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** Do you have a U.S. mailing address?**
This includes Fleet Post Office [FPO], Army Post Office [APO] and Diplomatic Post Office [DPO] addresses.
☐ Yes ☐ No

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96. U.S. Replacement Someone Else Child - Have an SSN

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Does the person who the application is for already have a Social Security Number (SSN)?**

☐ Yes ☐ No

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97. U.S. Replacement Someone Else Child - Citizenship

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Is the individual for whom you are applying a U.S. Citizen?**

☐ Yes ☐ No

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98. U.S. Replacement Someone Else Child - Applying For

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*Are you an adult applying for

☐ Yourself

☐ Someone else

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99. U.S. Replacement Someone Else Child - Applying For Someone Else Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

If you are applying for someone else, what is YOUR name?

* First

Middle

* Last

Suffix

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100. U.S. Replacement Someone Else Child – Individual's Date of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is the individual's date of birth?

*Month

*Day

*Year

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101. U.S. Replacement Someone Else Child - Relationship Child

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** What is your relationship to and responsibility for the individual?**

☐ Court Appointed Legal Guardian
☐ Custodial Mother
☐ Custodial Father
☐ Administrator of Estate
☐ Relative with Custody of Child
☐ State Agency or State Licensed Agency with Legal Custody
☐ Individual who can Establish Relationship and Responsibility
☐ None of the Above

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102. U.S. Replacement Someone Else Child - Name Change

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

* Are you requesting a name change for the individual?

☐ Yes ☐ No

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103. U.S. Replacement Someone Else Child - Individual's Place of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

Where is the individual's place of birth?
☐ U.S. ☐ International

* City/Town

* State/Territory

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104. U.S. Replacement Someone Else Child - Individual's SSN

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** What is the individual's Social Security Number (SSN)?**

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105. U.S. Replacement Someone Else Child - Individual's Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

How should the individual's name appear on the card?

* First

Middle

* Last

Suffix

* Is the name above the individual's full name at birth?

☐ Yes ☐ No

* Has the individual used any other names not listed above?

☐ Yes ☐ No

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106. U.S. Replacement Someone Else Child - Individual's Parents Names

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

***What is the individual's parent/mother's birth name?**
☐ Unknown

***First**

Middle

***Last**

Suffix

***What is the individual's parent/father's name?**
☐ Unknown

***First**

Middle

***Last**

Suffix

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107. U.S. Replacement Someone Else Child - U.S. Mailing Address

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is YOUR mailing address?
Enter a valid U.S. address where the Social Security Administration can mail the card.

* Street Address

Apartment, Suite, Building, Etc.

* City/Town

* State/Territory

* ZIP Code

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108. U.S. Replacement Someone Else Child - Individual's U.S. Documentation



Social Security

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application



What you need to know about documentation

- You must provide original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a U.S. passport as proof of both citizenship and identity.
- If U.S. citizenship has not already been established with us, we will need to see proof of citizenship.

Social Security Number Documentation

* Indicates required information

* Identity Documentation for you

Please select one document from the list

- | |
|---|
| ☐ U.S. driver's license |
| ☐ State-issued non-driver identification card |
| ☐ U.S. passport |
| ☐ None of the above |

* Custody and Responsibility Documentation

Please select one document from the list

- | |
|---|
| ☐ Court custody documentation |
| ☐ You are listed as the parent in SSA records |
| ☐ Letter from state social service placing the individual in your household |
| ☐ School records indicating that you have responsibility for the child |
| ☐ Rental agreement listing the child in your household |

*** Identity Documentation for the Child**

Please select one document from the list

- | |
|---|
| ☐ U.S. driver's license |
| ☐ State-issued non-driver identification card |
| ☐ U.S. passport |
| ☒ None of the above |

*** Other Identity Documentation Options**

If you do not have one of the above identity documents or you cannot get a replacement for one of the above identity documents within 10 days, you may select from the list below. Any documents you select from the list must be current (not expired) and show [the] name, identifying information (date of birth or age) and preferably a recent photograph.

- | |
|---|
| ☐ Medical Record - Clinic or Hospital |
| ☐ Medical Record - Immunization |
| ☐ Adoption Combination of Documents |
| ☐ Medical Record - Physician |
| ☐ Health Insurance Card |
| ☐ Certificate of Citizenship (N-560/N-561) |
| ☐ School Record |
| ☐ School ID |
| ☐ Certificate of Naturalization (N-550/N-570) |

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109. U.S. Replacement Someone Else Child - Individual's U.S. Documentation - Name Change



Social Security

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application



What you need to know about documentation

- You must provide original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a U.S. passport as proof of both citizenship and identity.
- If U.S. citizenship has not already been established with us, we will need to see proof of citizenship.

Social Security Number Documentation

* Indicates required information

If the document you provide as evidence of a legal name change does not give us enough information to make a proper identification based on what we have in our records or if the new name changed more than two years ago (four years ago if they are under 18 years of age), you must show us an identity document in the prior name (as shown in our records). We will accept an identity document in the old name that has expired.

If you do not have an identity document in the prior name, we may accept an unexpired identity document in the new name, as long as we can properly establish the identity in our records.

* Identity Documentation for you

Please select one document from the list

- | |
|---|
| ☐ U.S. driver's license |
| ☐ State-issued non-driver identification card |
| ☐ U.S. passport |
| ☐ None of the above |

* Custody and Responsibility Documentation

Please select one document from the list

- | |
|---|
| ☐ Court custody documentation |
| |

☐ You are listed as the parent in SSA records	
☐ Letter from state social service placing the individual in your household	
☐ School records indicating that you have responsibility for the child	
☐ Rental agreement listing the child in your household	

***Identity Documentation for the Child**
Please select one document from the list

☐ U.S. driver's license
☐ State-issued non-driver identification card
☐ U.S. passport
☐ None of the above

***Name Change Documentation for Child**
Please select one document from the list

☐ Amended birth certificate
☐ Court order for a name change
☐ Marriage document/U.S. only
☐ Divorce decree

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110. U.S. Replacement Someone Else Child - Review and Edit

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Review and Edit

Please review the answers you provided. If you need to make any changes, please select "Edit" to return to that part of the application and make the correction.

 **Age**

Edit

You must be 18 or older to fill out this application. Are you 18 or older?: **Yes**

 **U.S. Mailing Address**

Edit

Do you have a U.S. mailing address?: **Yes**

 **Social Security Number**

Edit

Does the person who the application is for already have a Social Security Number (SSN)?: **Yes**

 **Citizenship Status**

Edit

Is the individual for whom you are applying a U.S. citizen?: **Yes**

 **Applying For**

Edit

Are you an adult applying for: **Someone Else**

 **Your Name**

Edit

If you are applying for someone else, what is YOUR name?: **John Smith**

 **Date of Birth**

Edit

What is the individual's date of birth?: **January 1, 2017**

 **Relationship**

Edit

What is YOUR relationship to and responsibility for the individual?: **Custodial Father**

U.S. Replacement Someone Else Child - Review and Edit – Continued

 Relationship	Edit
What is YOUR relationship to and responsibility for the individual?: Custodial Father	
 Name Change	Edit
Are you requesting a name change for the individual?: No	
 Place of Birth	Edit
Where is the individual's place of birth?: Fairhope, Alabama	
 Assigned Social Security Number	Edit
What is the individual's Social Security Number (SSN)?: 123-45-8976	
 Name	Edit
How should the individual's name appear on the new card?: Jake Smith	
Is the name above the individual's full name at birth?: Yes	
Has the individual used any other names not listed above?: No	
 Parent's Name	Edit
What is the individual's parent/mother's birth name?: Not Answered	
What is the individual's parent/father's name?: Not Answered	
 U.S. Mailing Address and Phone Number	Edit
What is YOUR mailing address?	
Street Address: 123 Main St.	
City/Town: Anytown	
State: Alaska	
ZIP Code: 12345	
What is your daytime phone number?: Not Answered	

U.S. Replacement Someone Else Child - Review and Edit – Continued

 **Race and Ethnicity**

Edit

Are you Hispanic or Latino? (Select one): **No response**

What is your race? (Select one or more): **No response**

 **Documentation**

Edit

Identity Documentation for You: **U.S. Passport**

Custody and Responsibility Documentation: **Rental agreement listing the child in your household**

Identity Documentation for the Child: **U.S. Passport**

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111. U.S. Replacement Someone Else Child - Attestation



Social Security

Use Our Online Service To Obtain a Social Security Number Card

Next Steps

The replacement card request is not complete. In order for the card to be processed:

1. Gather the documentation you selected to provide as evidence to the [local SSA office](#).
2. Call your [local SSA office](#) for additional guidance for completing your application.

☐ *** I acknowledge that I have read the 'Next Steps' and understand that I must contact my local SSA office within 45 calendar days to complete the application process.**

Electronic Signature

Please read and accept the following statement to finish the application.

I understand and agree that my application will be signed electronically, which is the legal equivalent of my handwritten signature, when I select the SUBMIT APPLICATION PACKAGE button below. I also understand that my electronic signature means that I intend to apply for a replacement SSN card and have provided the Social Security Administration with accurate information.

I declare under penalty of perjury that I have examined all the information on this application 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 this electronic application, or causes someone else to do so, commits a crime and may be sent to prison or may face other penalties, or both.

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112. U.S. Replacement Someone Else Child - Success

Success - ESS

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

 **You successfully submitted your application! The Online Control Number for your application is O1111111111111111. Please write this number down and/or print this screen for your records.**

IMPORTANT: Your Social Security card request is not complete until you show the document(s) below to a [local Social Security office](#) or card center. You must schedule your appointment within 45 days, or you will need to submit a new application.

- U.S. driver's license
- Marriage document/U.S. only

PREPARING FOR YOUR VISIT:

- Please gather the documents before you visit and bring them with you. We can't complete your application without them.
- If you have questions before you visit, please call your local Social Security office or our National 800 Number at 1-800-772-1213.
- You must wear a mask and follow physical distancing requirements, even if you are vaccinated.
- You may need to wait outside because space in our offices is limited due to physical distancing requirements. Please plan for cold or bad weather.
- We ask that you come alone unless you require help with your visit. If you require help, we can only permit one person to join you.
- Please follow directions for check-in when you arrive.

 **Will Social Security contact me about my application?**

We will use the address you provided below if we need to contact you regarding your application. Don't wait to hear from Social Security before visiting an office to show your documents.

123 Main St.
Anytown, Maryland 12345

Print

Schedule an Appointment

Done

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113. Non-U.S. Original Self - Landing

 **Social Security**

Use Our Online Service To Obtain A Social Security Number Card

Online Social Security Number Application

Request a Social Security Number (SSN) card online and provide your documentation to the local Social Security Administration (SSA) office.

1. We will walk you through the guided steps needed to submit your request.
2. After you submit your online request, you must **visit** your [local Social Security office or card center](#) with your documentation within **45 calendar days**.

Acceptable documents **MUST** be original or copies certified by the issuing agency, unexpired and must show name, date of birth or age. [Find out which documents are required for your original or replacement card request.](#)

After SSA verifies your document(s) and completes your request, you will receive your social security card in the mail **within 14 business days**.

Apply Now

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114. Non-U.S. Original Self - Age 18 or Older

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

***You must be 18 or older to fill out this application. Are you 18 or older?**

☐ Yes ☐ No

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115. Non-U.S. Original Self - U.S. Mailing Address Available

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** Do you have a U.S. mailing address?**
This includes Fleet Post Office [FPO], Army Post Office [APO] and Diplomatic Post Office [DPO] addresses.
☐ Yes ☐ No

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116. Non-U.S. Original Self - Have an SSN

 **Social Security**

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Online Social Security Number Application

* Indicates required information

*** Does the person who the application is for already have a Social Security Number (SSN)?**

☐ Yes ☐ No

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117. Non-U.S. Original Self - Citizenship

 **Social Security**

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Online Social Security Number Application

* Indicates required information

*** Is the individual for whom you are applying a U.S. Citizen?**

☐ Yes ☐ No

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118. Non-U.S. Original Self - Applying For

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*Are you an adult applying for

☐ Yourself

☐ Someone else

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119. Non-U.S. Original Self - Date of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is your date of birth?

* Month

* Day

* Year

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120. Non-U.S. Original Self - Place of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

Where is your place of birth?
☐ U.S. ☐ International

* City/Town

* State/Territory

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121. Non-U.S. Original Self - Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

How should your name appear on the card?

* First	Middle	* Last	Suffix
			--

* Is the name above your full name at birth?

☐ Yes ☐ No

* Have you ever used any other names not listed above?

☐ Yes ☐ No

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122. Non-U.S. Original Self - Sex

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

***What is your sex?**

☐ Male ☐ Female

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123. Non-U.S. Original Self - Parents Names

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

***What is your parent/mother's birth name?**

☐ Unknown

***First**

Middle

***Last**

Suffix

***What is your parent/father's name?**

☐ Unknown

***First**

Middle

***Last**

Suffix

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124. Non-U.S. Original Self - U.S. Mailing Address

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is your mailing address?
Enter a valid U.S. address where the Social Security Administration can mail the card.

* Street Address

Apartment, Suite, Building, Etc.

* City/Town

* State/Territory

* ZIP Code

What is your daytime phone number?
10-digit Number

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125. Non-U.S. Original Self - Documentation



Social Security

Use Our Online Service To Obtain a Social Security Number Card

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What you need to know about documentation

- You must present original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a foreign Passport as proof of both age and identity.

Generally, ***you must provide at least two documents to prove age, identity, and immigration status.***

Social Security Number Documentation

* Indicates required information

*Evidence Documentation For You

Please select all the documentation that you can give us to prove your age, identity and immigration status.

☐ Foreign Passport
☐ I-551 Permanent Resident Card
☐ I-94 with No Foreign Passport
☐ I-94 with Unexpired Foreign Passport
☐ I-766 Employment Authorization Document (EAD) Card
☐ Admit (ADM) Stamp in Unexpired Foreign Passport
☐ I-551 Stamp (Temporary)
☐ Current, Valid U.S. Drivers License
☐ I-551 Machine Readable Immigrant Visa (MRIV)
☐ U.S. State Identity Card
☐ Birth Certificate - Foreign
☐ DS-2019 Certificate of Eligibility
☐ I-20 Certificate of Eligibility

☐ P20 Certificate of Eligibility	
☐ Other	

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126. Non-U.S. Original Self - Review and Edit

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Review and Edit

Please review the answers you provided. If you need to make any changes, please select "Edit" to return to that part of the application and make the correction.

 **Age**

Edit

You must be 18 or older to fill out this application. Are you 18 or older?: **Yes**

 **U.S. Mailing Address**

Edit

Do you have a U.S. mailing address?: **Yes**

 **Social Security Number**

Edit

Does the person who the application is for already have a Social Security Number (SSN)?: **No**

 **Citizenship Status**

Edit

Is the individual for whom you are applying a U.S. citizen?: **No**

 **Applying For**

Edit

Are you an adult applying for: **Yourself**

 **Date of Birth**

Edit

What is your date of birth?: **January 1, 1980**

 **Place of Birth**

Edit

Where is your place of birth?: **Wellington, New Zealand**

Non-U.S. Original Self - Review and Edit - Continued

 **Name**

Edit

How should your name appear on the new card?: **John Smith**

Is the name above your full name at birth?: **Yes**

Have you ever used any other names not listed above?: **No**

 **Sex**

Edit

What is your sex?: **Male**

 **Parent's Name**

Edit

What is your parent/mother's birth name?: **Not Answered**

What is your parent/father's name?: **Not Answered**

 **U.S. Mailing Address and Phone Number**

Edit

What is your mailing address?

Street Address: **123 Main St.**

City/Town: **Anytown**

State: **Alaska**

ZIP Code: **12345**

What is your daytime phone number?: **Not Answered**

 **Race and Ethnicity**

Edit

Are you Hispanic or Latino? (Select one): **No response**

What is your race? (Select one or more): **No response**

 **Documentation**

Edit

Evidence Documentation For You: **Foreign Passport**

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127. Non-U.S. Original Self - Attestation

 Social Security

Use Our Online Service To Obtain a Social Security Number Card

Next Steps

The original card request is not complete. In order for the card to be processed:

1. Gather the documentation you selected to provide as evidence to the [local SSA office](#).
2. Call your [local SSA office](#) for additional guidance for completing your application.

☐ ***I acknowledge that I have read the 'Next Steps' and understand that I must contact my local SSA office within 45 calendar days to complete the application process.**

Electronic Signature

Please read and accept the following statement to finish the application.

I understand and agree that my application will be signed electronically, which is the legal equivalent of my handwritten signature, when I select the SUBMIT APPLICATION PACKAGE button below. I also understand that my electronic signature means that I intend to apply for an original SSN card and have provided the Social Security Administration with accurate information.

I declare under penalty of perjury that I have examined all the information on this application 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 this electronic application, or causes someone else to do so, commits a crime and may be sent to prison or may face other penalties, or both.

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128. Non-U.S. Original Self - Success

Success - ESS



Social Security

Use Our Online Service To Obtain a Social Security Number Card



You successfully submitted your application! The Online Control Number for your application is O1111111111111111. Please write this number down and/or print this screen for your records.

IMPORTANT: Your Social Security card request is not complete until you show the document(s) below to a [local Social Security office or card center](#). You must schedule your appointment within 45 days, or you will need to submit a new application.

- Foreign Passport

PREPARING FOR YOUR VISIT:

- Please gather the documents before you visit and bring them with you. We can't complete your application without them.
- If you have questions before you visit, please call your [local Social Security office or card center](#) or our National 800 Number at 1-800-772-1213.
- You must wear a mask and follow physical distancing requirements, even if you are vaccinated.
- You may need to wait outside because space in our offices is limited due to physical distancing requirements. Please plan for cold or bad weather.
- We ask that you come alone unless you require help with your visit. If you require help, we can only permit one person to join you.
 - If you are applying for an original social security card for an individual age 12 or over, both you and the person to whom the SSN is for must appear for the mandatory in-person interview.
- Please follow directions for check-in when you arrive.



Will Social Security contact me about my application?

We will use the address you provided below if we need to contact you regarding your application. Don't wait to hear from Social Security before visiting an office to show your documents.

123 Main St.
Anytown, Maryland 12345

Print

Schedule an Appointment

Done

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129. Non-U.S. Original Someone Else Adult - Landing

 **Social Security**

Use Our Online Service To Obtain A Social Security Number Card

Online Social Security Number Application

Request a Social Security Number (SSN) card online and provide your documentation to the local Social Security Administration (SSA) office.

1. We will walk you through the guided steps needed to submit your request.
2. After you submit your online request, you must **visit** your [local Social Security office or card center](#) with your documentation within **45 calendar days**.

Acceptable documents **MUST** be original or copies certified by the issuing agency, unexpired and must show name, date of birth or age. [Find out which documents are required for your original or replacement card request.](#)

After SSA verifies your document(s) and completes your request, you will receive your social security card in the mail **within 14 business days**.

Apply Now

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130. Non-U.S. Original Someone Else Adult - Age 18 or Older

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

***You must be 18 or older to fill out this application. Are you 18 or older?**

☐ Yes ☐ No

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131. Non-U.S. Original Someone Else Adult - U.S. Mailing Address Available

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** Do you have a U.S. mailing address?**
This includes Fleet Post Office [FPO], Army Post Office [APO] and Diplomatic Post Office [DPO] addresses.
☐ Yes ☐ No

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132. Non-U.S. Original Someone Else Adult - Have an SSN

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Does the person who the application is for already have a Social Security Number (SSN)?**

☐ Yes ☐ No

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133. Non-U.S. Original Someone Else Adult - Citizenship

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Is the individual for whom you are applying a U.S. Citizen?**

☐ Yes ☐ No

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134. Non-U.S. Original Someone Else Adult - Applying For

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

***Are you an adult applying for**

☐ Yourself
☐ Someone else

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135. Non-U.S. Original Someone Else Adult - Applying For Someone Else Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

If you are applying for someone else, what is YOUR name?

* First

Middle

* Last

Suffix

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136. Non-U.S. Original Someone Else Adult – Individual's Date of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is the individual's date of birth?

*Month

*Day

*Year

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137. Non-U.S. Original Someone Else Adult - Relationship Adult

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** What is YOUR relationship to the individual?**

☐ Court Appointed Legal Guardian
☐ Administrator of Estate
☐ State Agency or State Licensed Agency with Legal Custody
☐ Individual who can Establish Relationship and Responsibility
☐ None of the Above

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138. Non-U.S. Original Someone Else Adult - Individual Capabilities

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Is the individual for whom you are applying physically or mentally able to file an application on his or her own?**

☐ Yes ☐ No

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139. Non-U.S. Original Someone Else Adult - Individual's Place of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

Where is the individual's place of birth?
☐ U.S. ☐ International

* City/Town

* State/Territory

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140. Non-U.S. Original Someone Else Adult - Individual's Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

How should the individual's name appear on the card?

* First	Middle	* Last	Suffix
			--

* Is the name above the individual's full name at birth?

☐ Yes ☐ No

* Has the individual ever used any other names not listed above?

☐ Yes ☐ No

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141. Non-U.S. Original Someone Else Adult - Individual's Sex

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

***What is the individual's sex?**

☐ Male ☐ Female

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142. Non-U.S. Original Someone Else Adult - Individual's Parents Names

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

***What is the individual's parent/mother's birth name?**
☐ Unknown

***First**

Middle

***Last**

Suffix

***What is the individual's parent/father's name?**
☐ Unknown

***First**

Middle

***Last**

Suffix

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143. Non-U.S. Original Someone Else Adult - U.S. Mailing Address

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is YOUR mailing address?
Enter a valid U.S. address where the Social Security Administration can mail the card.

* Street Address

Apartment, Suite, Building, Etc.

* City/Town

* State/Territory

* ZIP Code

What is your daytime phone number?
10-digit Number

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144. Non-U.S. Original Someone Else Adult - Individual's Documentation



Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

i What you need to know about documentation

- You must present original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a foreign Passport as proof of both age and identity.

Generally, ***you must provide at least two documents to prove age, identity, and immigration status.***

Select Your Replacement Card Documentation

* Indicates required information

* Identity Documentation for You

Please select a document you can give us to prove identity.

☐ Current, Valid U.S. Driver's license
☐ I-551 Machine Readable Immigrant Visa (MRIV)
☐ I-551 Permanent Resident Card
☐ I-551 (Expired) with I-797 Extension
☐ I-766 Employment Authorization Document (EAD) Card
☐ I-872 American Indian Card
☐ I-94 with No Foreign Passport
☐ Order of Immigration Judge
☐ Foreign Passport
☐ U.S. State Identity Card
☐ U.S. Passport
☐ Other

***Evidence Documentation For The Individual**

Please select all the documentation that the individual can give us to prove their age, identity and immigration status.

☐ Foreign Passport
☐ I-551 Permanent Resident Card
☐ I-94 with No Foreign Passport
☐ I-94 with Unexpired Foreign Passport
☐ I-766 Employment Authorization Document (EAD) Card
☐ Admit (ADM) Stamp in Unexpired Foreign Passport
☐ I-551 Stamp (Temporary)
☐ Current, Valid U.S. Drivers License
☐ I-551 Machine Readable Immigrant Visa (MRIV)
☐ U.S. State Identity Card
☐ Birth Certificate - Foreign
☐ DS-2019 Certificate of Eligibility
☐ I-20 Certificate of Eligibility
☐ Other

***Custody and Responsibility Documentation**

Please select one document from the list

☐ Court custody documentation
☐ Letter from state social service placing the individual in your household
☐ Other document(s) that show your relationship and responsibility

***Physical or Mental incapacity Documentation**

☐ Documentation that the individual is physically or mentally unable to file an application on his or her behalf (e.g., doctor's certification)
--

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145. Non-U.S. Original Someone Else Adult - Review and Edit

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Review and Edit

Please review the answers you provided. If you need to make any changes, please select "Edit" to return to that part of the application and make the correction.

 **Age**

Edit

You must be 18 or older to fill out this application. Are you 18 or older?: **Yes**

 **U.S. Mailing Address**

Edit

Do you have a U.S. mailing address?: **Yes**

 **Social Security Number**

Edit

Does the person who the application is for already have a Social Security Number (SSN)?: **No**

 **Citizenship Status**

Edit

Is the individual for whom you are applying a U.S. citizen?: **No**

 **Applying For**

Edit

Are you an adult applying for: **Someone Else**

 **Your Name**

Edit

If you are applying for someone else, what is YOUR name?: **John Smith**

 **Date of Birth**

Edit

What is the individual's date of birth?: **January 1, 1980**

Non-U.S. Original Someone Else Adult - Review and Edit – Continued

 Relationship	Edit
What is YOUR relationship to the individual?: Court Appointed Legal Guardian	
 Individual's Capability	Edit
Is the individual for whom you are applying physically or mentally able to file an application on his or her own?: No	
 Place of Birth	Edit
Where is the individual's place of birth?: Wellington, New Zealand	
 Name	Edit
How should the individual's name appear on the new card?: Jake Smith	
Is the name above the individual's full name at birth?: Yes	
Has the individual ever used any other names not listed above?: No	
 Sex	Edit
What is the individual's sex?: Male	
 Parent's Name	Edit
What is the individual's parent/mother's birth name?: Not Answered	
What is the individual's parent/father's name?: Not Answered	
 U.S. Mailing Address and Phone Number	Edit
What is YOUR mailing address?	
Street Address: 123 Main St.	
City/Town: Anytown	
State: Alaska	
ZIP Code: 12345	
What is your daytime phone number?: Not Answered	

Non-U.S. Original Someone Else Adult - Review and Edit – Continued

✓ Sex

Edit

What is the individual's sex?: **Male**

✓ Parent's Name

Edit

What is the individual's parent/mother's birth name?: **Not Answered**

What is the individual's parent/father's name?: **Not Answered**

✓ U.S. Mailing Address and Phone Number

Edit

What is YOUR mailing address?

Street Address: **123 Main St.**

City/Town: **Anytown**

State: **Alaska**

ZIP Code: **12345**

What is your daytime phone number?: **Not Answered**

✓ Race and Ethnicity

Edit

Are you Hispanic or Latino? (Select one): **No response**

What is your race? (Select one or more): **No response**

✓ Documentation

Edit

Identity Documentation For You: **Current, Valid U.S. Driver's license**

Evidence Documentation For The Individual: **Foreign Passport**

Custody and Responsibility Documentation: **Court custody documentation**

Physical or Mental incapacity Documentation: **Documentation that the individual is physically or mentally unable to file an application on his or her behalf (e.g., doctor's certification)**

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146. Non-U.S. Original Someone Else Adult - Attestation

 Social Security

Use Our Online Service To Obtain a Social Security Number Card

Next Steps

The original card request is not complete. In order for the card to be processed:

1. Gather the documentation you selected to provide as evidence to the [local SSA office](#).
2. Call your [local SSA office](#) for additional guidance for completing your application.

☐ ***I acknowledge that I have read the 'Next Steps' and understand that I must contact my local SSA office within 45 calendar days to complete the application process.**

Electronic Signature

Please read and accept the following statement to finish the application.

I understand and agree that my application will be signed electronically, which is the legal equivalent of my handwritten signature, when I select the SUBMIT APPLICATION PACKAGE button below. I also understand that my electronic signature means that I intend to apply for an original SSN card and have provided the Social Security Administration with accurate information.

I declare under penalty of perjury that I have examined all the information on this application 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 this electronic application, or causes someone else to do so, commits a crime and may be sent to prison or may face other penalties, or both.

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147. Non-U.S. Original Someone Else Adult - Success

Success – ESS



Social Security

Use Our Online Service To Obtain a Social Security Number Card



You successfully submitted your application! The Online Control Number for your application is O1111111111111111. Please write this number down and/or print this screen for your records.

IMPORTANT: Your Social Security card request is not complete until you show the document(s) below to a [local Social Security office or card center](#). You must schedule your appointment within 45 days, or you will need to submit a new application.

- Foreign Passport

PREPARING FOR YOUR VISIT:

- Please gather the documents before you visit and bring them with you. We can't complete your application without them.
- If you have questions before you visit, please call your [local Social Security office or card center](#) or our National 800 Number at 1-800-772-1213.
- You must wear a mask and follow physical distancing requirements, even if you are vaccinated.
- You may need to wait outside because space in our offices is limited due to physical distancing requirements. Please plan for cold or bad weather.
- We ask that you come alone unless you require help with your visit. If you require help, we can only permit one person to join you.
 - If you are applying for an original social security card for an individual age 12 or over, both you and the person to whom the SSN is for must appear for the mandatory in-person interview.
- Please follow directions for check-in when you arrive.



Will Social Security contact me about my application?

We will use the address you provided below if we need to contact you regarding your application. Don't wait to hear from Social Security before visiting an office to show your documents.

123 Main St.
Anytown, Maryland 12345

Print

Schedule an Appointment

Done

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148. Non-U.S. Original Someone Else Child - Landing

 **Social Security**

Use Our Online Service To Obtain A Social Security Number Card

Online Social Security Number Application

Request a Social Security Number (SSN) card online and provide your documentation to the local Social Security Administration (SSA) office.

1. We will walk you through the guided steps needed to submit your request.
2. After you submit your online request, you must **visit** your [local Social Security office or card center](#) with your documentation within **45 calendar days**.

Acceptable documents **MUST** be original or copies certified by the issuing agency, unexpired and must show name, date of birth or age. [Find out which documents are required for your original or replacement card request.](#)

After SSA verifies your document(s) and completes your request, you will receive your social security card in the mail **within 14 business days**.

Apply Now

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149. Non-U.S. Original Someone Else Child - Age 18 or Older

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

***You must be 18 or older to fill out this application. Are you 18 or older?**

☐ Yes ☐ No

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150. Non-U.S. Original Someone Else Child - U.S. Mailing Address Available

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** Do you have a U.S. mailing address?**
This includes Fleet Post Office [FPO], Army Post Office [APO] and Diplomatic Post Office [DPO] addresses.
☐ Yes ☐ No

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151. Non-U.S. Original Someone Else Child - Have an SSN

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Does the person who the application is for already have a Social Security Number (SSN)?**

☐ Yes ☐ No

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152. Non-U.S. Original Someone Else Child - Citizenship

 **Social Security**

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Online Social Security Number Application

* Indicates required information

*** Is the individual for whom you are applying a U.S. Citizen?**

☐ Yes ☐ No

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153. Non-U.S. Original Someone Else Child - Applying For

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

***Are you an adult applying for**

☐ Yourself

☐ Someone else

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154. Non-U.S. Original Someone Else Child - Applying For Someone Else Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

If you are applying for someone else, what is YOUR name?

* First

Middle

* Last

Suffix

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155. Non-U.S. Original Someone Else Child – Individual's Date of Birth

 **Social Security**

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Online Social Security Number Application
* Indicates required information

What is the individual's date of birth?

*Month

*Day

*Year

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156. Non-U.S. Original Someone Else Child - Relationship Child

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** What is your relationship to and responsibility for the individual?**

☐ Court Appointed Legal Guardian
☐ Custodial Mother
☐ Custodial Father
☐ Administrator of Estate
☐ Relative with Custody of Child
☐ State Agency or State Licensed Agency with Legal Custody
☐ Individual who can Establish Relationship and Responsibility
☐ None of the Above

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157. Non-U.S. Original Someone Else Child - Individual's Place of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

Where is the individual's place of birth?
☐ U.S. ☐ International

* City/Town

* State/Territory

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158. Non-U.S. Original Someone Else Child - Individual's Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

How should the individual's name appear on the card?

* First	Middle	* Last	Suffix
			--

* Is the name above the individual's full name at birth?

☐ Yes ☐ No

* Has the individual ever used any other names not listed above?

☐ Yes ☐ No

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159. Non-U.S. Original Someone Else Child - Individual's Sex

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

***What is the individual's sex?**

☐ Male ☐ Female

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160. Non-U.S. Original Someone Else Child - Individual's Parents Names

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

***What is the individual's parent/mother's birth name?**
☐ Unknown

***First**

Middle

***Last**

Suffix

***What is the individual's parent/father's name?**
☐ Unknown

***First**

Middle

***Last**

Suffix

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161. Non-U.S. Original Someone Else Child - U.S. Mailing Address

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is YOUR mailing address?
Enter a valid U.S. address where the Social Security Administration can mail the card.

* Street Address

Apartment, Suite, Building, Etc.

* City/Town

* State/Territory

* ZIP Code

What is your daytime phone number?
10-digit Number

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162. Non-U.S. Original Someone Else Child - Individual's Documentation



Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

i What you need to know about documentation

- You must present original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.
- We may use one document for two purposes. For example, we may use a foreign Passport as proof of both age and identity.

Generally, ***you must provide at least two documents to prove age, identity, and immigration status.***

Social Security Number Documentation

* Indicates required information

* Identity Documentation for You

Please select a document you can give us to prove identity.

☐ Current, Valid U.S. Driver's license
☐ I-551 Machine Readable Immigrant Visa (MRIV)
☐ I-551 Permanent Resident Card
☐ I-551 (Expired) with I-797 Extension
☐ I-766 Employment Authorization Document (EAD) Card
☐ I-872 American Indian Card
☐ I-94 with No Foreign Passport
☐ Order of Immigration Judge
☐ Foreign Passport
☐ U.S. State Identity Card
☐ U.S. Passport
☐ Other

***Evidence Documentation For The Individual**

Please select all the documentation that the individual can give us to prove their age, identity and immigration status.

☐ Foreign Passport
☐ I-551 Permanent Resident Card
☐ I-94 with No Foreign Passport
☐ I-94 with Unexpired Foreign Passport
☐ I-766 Employment Authorization Document (EAD) Card
☐ Admit (ADM) Stamp in Unexpired Foreign Passport
☐ I-551 Stamp (Temporary)
☐ Current, Valid U.S. Drivers License
☐ I-551 Machine Readable Immigrant Visa (MRIV)
☐ U.S. State Identity Card
☐ Birth Certificate - Foreign
☐ DS-2019 Certificate of Eligibility
☐ I-20 Certificate of Eligibility
☐ Other

***Custody and Responsibility Documentation**

Please select one document from the list

☐ Court custody documentation
☐ You are listed as the parent in SSA records
☐ Letter from state social service placing the individual in your household
☐ School records indicating that you have responsibility for the child
☐ Rental agreement listing the child in your household

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163. Non-U.S. Original Someone Else Child - Review and Edit

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Review and Edit

Please review the answers you provided. If you need to make any changes, please select "Edit" to return to that part of the application and make the correction.

 **Age**

Edit

You must be 18 or older to fill out this application. Are you 18 or older?: **Yes**

 **U.S. Mailing Address**

Edit

Do you have a U.S. mailing address?: **Yes**

 **Social Security Number**

Edit

Does the person who the application is for already have a Social Security Number (SSN)?: **No**

 **Citizenship Status**

Edit

Is the individual for whom you are applying a U.S. citizen?: **No**

 **Applying For**

Edit

Are you an adult applying for: **Someone Else**

 **Your Name**

Edit

If you are applying for someone else, what is YOUR name?: **John Smith**

 **Date of Birth**

Edit

What is the individual's date of birth?: **January 1, 2017**

 **Relationship**

Edit

What is YOUR relationship to and responsibility for the individual?: **Custodial Father**

Non-U.S. Original Someone Else Child - Review and Edit - Continued

 Place of Birth	Edit
Where is the individual's place of birth?: Wellington, New Zealand	
 Name	Edit
How should the individual's name appear on the new card?: Jake Smith	
Is the name above the individual's full name at birth?: Yes	
Has the individual ever used any other names not listed above?: No	
 Sex	Edit
What is the individual's sex?: Male	
 Parent's Name	Edit
What is the individual's parent/mother's birth name?: Not Answered	
What is the individual's parent/father's name?: Not Answered	
 U.S. Mailing Address and Phone Number	Edit
What is YOUR mailing address?	
Street Address: 123 Main St.	
City/Town: Anytown	
State: Alaska	
ZIP Code: 12345	
What is your daytime phone number?: Not Answered	

Non-U.S. Original Someone Else Child - Review and Edit - Continued

 **Race and Ethnicity**

Edit

Are you Hispanic or Latino? (Select one): **No response**

What is your race? (Select one or more): **No response**

 **Documentation**

Edit

Identity Documentation For You: **Current, Valid U.S. Driver's license**

Evidence Documentation For The Individual: **Foreign Passport**

Custody and Responsibility Documentation: **Court custody documentation**

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164. Non-U.S. Original Someone Else Child - Attestation

 Social Security

Use Our Online Service To Obtain a Social Security Number Card

Next Steps

The original card request is not complete. In order for the card to be processed:

1. Gather the documentation you selected to provide as evidence to the [local SSA office](#).
2. Call your [local SSA office](#) for additional guidance for completing your application.

☐ ***I acknowledge that I have read the 'Next Steps' and understand that I must contact my local SSA office within 45 calendar days to complete the application process.**

Electronic Signature

Please read and accept the following statement to finish the application.

I understand and agree that my application will be signed electronically, which is the legal equivalent of my handwritten signature, when I select the SUBMIT APPLICATION PACKAGE button below. I also understand that my electronic signature means that I intend to apply for an original SSN card and have provided the Social Security Administration with accurate information.

I declare under penalty of perjury that I have examined all the information on this application 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 this electronic application, or causes someone else to do so, commits a crime and may be sent to prison or may face other penalties, or both.

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165. Non-U.S. Original Someone Else Child - Success

Success – ESS



Social Security

Use Our Online Service To Obtain a Social Security Number Card



You successfully submitted your application! The Online Control Number for your application is 0111111111111111. Please write this number down and/or print this screen for your records.

IMPORTANT: Your Social Security card request is not complete until you show the document(s) below to a [local Social Security office or card center](#). You must schedule your appointment within 45 days, or you will need to submit a new application.

- Foreign Passport

PREPARING FOR YOUR VISIT:

- Please gather the documents before you visit and bring them with you. We can't complete your application without them.
- If you have questions before you visit, please call your [local Social Security office or card center](#) or our National 800 Number at 1-800-772-1213.
- You must wear a mask and follow physical distancing requirements, even if you are vaccinated.
- You may need to wait outside because space in our offices is limited due to physical distancing requirements. Please plan for cold or bad weather.
- We ask that you come alone unless you require help with your visit. If you require help, we can only permit one person to join you.
 - If you are applying for an original social security card for an individual age 12 or over, both you and the person to whom the SSN is for must appear for the mandatory in-person interview.
- Please follow directions for check-in when you arrive.



Will Social Security contact me about my application?

We will use the address you provided below if we need to contact you regarding your application. Don't wait to hear from Social Security before visiting an office to show your documents.

123 Main St.
Anytown, Maryland 12345

Print

Schedule an Appointment

Done

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166. Non-U.S. Replacement Self - Landing

 **Social Security**

Use Our Online Service To Obtain A Social Security Number Card

Online Social Security Number Application

Request a Social Security Number (SSN) card online and provide your documentation to the local Social Security Administration (SSA) office.

1. We will walk you through the guided steps needed to submit your request.
2. After you submit your online request, you must **visit** your [local Social Security office or card center](#) with your documentation within **45 calendar days**.

Acceptable documents **MUST** be original or copies certified by the issuing agency, unexpired and must show name, date of birth or age. [Find out which documents are required for your original or replacement card request.](#)

After SSA verifies your document(s) and completes your request, you will receive your social security card in the mail **within 14 business days**.

Apply Now

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167. Non-U.S. Replacement Self - Age 18 or Older

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

***You must be 18 or older to fill out this application. Are you 18 or older?**

☐ Yes ☐ No

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168. Non-U.S. Replacement Self - U.S. Mailing Address Available

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** Do you have a U.S. mailing address?**
This includes Fleet Post Office [FPO], Army Post Office [APO] and Diplomatic Post Office [DPO] addresses.

☐ Yes ☐ No

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169. Non-U.S. Replacement Self - Have an SSN

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Does the person who the application is for already have a Social Security Number (SSN)?**

☐ Yes ☐ No

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170. Non-U.S. Replacement Self - Citizenship

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Is the individual for whom you are applying a U.S. Citizen?**

☐ Yes ☐ No

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171. Non-U.S. Replacement Self - Applying For

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

***Are you an adult applying for**

☐ Yourself
☐ Someone else

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172. Non-U.S. Replacement Self - Date of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is your date of birth?

* Month

* Day

* Year

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173. Non-U.S. Replacement Self - Name Change

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Are you requesting a name change?**

☐ Yes ☐ No

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174. Non-U.S. Replacement Self - Place of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

Where is your place of birth?
☐ U.S. ☐ International

* City/Town

* State/Territory

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175. Non-U.S. Replacement Self - SSN

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

* **What is your Social Security Number (SSN)?**

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176. Non-U.S. Replacement Self - Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

How should your name appear on the card?

* First	Middle	* Last	Suffix
			--

* Is the name above your full name at birth?

☐ Yes ☐ No

* Have you ever had a Social Security Number (SSN) card under a name not listed above?

☐ Yes ☐ No

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177. Non-U.S. Replacement Self - Parents Names

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

***What is your parent/mother's birth name?**

☐ Unknown

***First**

Middle

***Last**

Suffix

***What is your parent/father's name?**

☐ Unknown

***First**

Middle

***Last**

Suffix

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178. Non-U.S. Replacement Self - U.S. Mailing Address

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is your mailing address?
Enter a valid U.S. address where the Social Security Administration can mail the card.

* Street Address

Apartment, Suite, Building, Etc.

* City/Town

* State/Territory

* ZIP Code

What is your daytime phone number?
10-digit Number

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179. Non-U.S. Replacement Self - Documentation



Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

i What you need to know about documentation

- You must present original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.

Generally, you must provide at least two documents to prove identity and immigration status. However, we may use one document for two purposes. For example, we may use an I-766 EAD card as proof of identity and immigration status.

Social Security Number Documentation

* Indicates required information

*Evidence Documentation For You

Please select all the documentation that you can give us to prove your identity and immigration status.

- | |
|---|
| ☐ Foreign Passport |
| ☐ I-551 Permanent Resident Card |
| ☐ I-94 with No Foreign Passport |
| ☐ I-94 with Unexpired Foreign Passport |
| ☐ I-766 Employment Authorization Document (EAD) Card |
| ☐ Admit (ADM) Stamp in Unexpired Foreign Passport |
| ☐ I-551 Stamp (Temporary) |
| ☐ Current, Valid U.S. Drivers License |
| ☐ I-551 Machine Readable Immigrant Visa (MRIV) |
| ☐ U.S. State Identity Card |
| ☐ Birth Certificate - Foreign |
| ☐ DS-2019 Certificate of Eligibility |

☐ P20 Certificate of Eligibility	
☐ Other	

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180. Non-U.S. Replacement Self - Documentation - Name Change



Social Security

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application



What you need to know about documentation

- You must present original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.

Generally, you must provide at least two documents to prove identity and immigration status. However, we may use one document for two purposes. For example, we may use an I-766 EAD card as proof of identity and immigration status.

Social Security Number Documentation

* Indicates required information

*Evidence Documentation For You

Please select all the documentation that you can give us to prove your identity and immigration status.

☐ Foreign Passport
☐ I-551 Permanent Resident Card
☐ I-94 with No Foreign Passport
☐ I-94 with Unexpired Foreign Passport
☐ I-766 Employment Authorization Document (EAD) Card
☐ Admit (ADM) Stamp in Unexpired Foreign Passport
☐ I-551 Stamp (Temporary)
☐ Current, Valid U.S. Drivers License
☐ I-551 Machine Readable Immigrant Visa (MRIV)
☐ U.S. State Identity Card
☐ Birth Certificate - Foreign
☐ DS-2019 Certificate of Eligibility
☐ I-20 Certificate of Eligibility

☐ I-20 Certificate of Eligibility	
☐ Other	

*** Name Change Documentation for You**
Please select one document from the list

☐ Amended birth certificate
☐ Court order for a name change
☐ Marriage document/U.S. only
☐ Divorce decree

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181. Non-U.S. Replacement Self - Review and Edit

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Review and Edit

Please review the answers you provided. If you need to make any changes, please select "Edit" to return to that part of the application and make the correction.

 **Age**

Edit

You must be 18 or older to fill out this application. Are you 18 or older?: **Yes**

 **U.S. Mailing Address**

Edit

Do you have a U.S. mailing address?: **Yes**

 **Social Security Number**

Edit

Does the person who the application is for already have a Social Security Number (SSN)?: **Yes**

 **Citizenship Status**

Edit

Is the individual for whom you are applying a U.S. citizen?: **No**

 **Applying For**

Edit

Are you an adult applying for: **Yourself**

 **Date of Birth**

Edit

What is your date of birth?: **January 1, 1980**

 **Place of Birth**

Edit

Where is your place of birth?: **Wellington, New Zealand**

Non-U.S. Replacement Self - Review and Edit - Continued

✓ Assigned Social Security Number

What is your Social Security Number (SSN)?: **123-45-8976**

✓ Name

How should your name appear on the new card?: **John Smith**
Is the name above your full name at birth?: **Yes**
Have you ever had a Social Security Number (SSN) card under a name not listed above?: **No**

Edit

✓ Parent's Name

What is your parent/mother's birth name?: **Not Answered**
What is your parent/father's name?: **Not Answered**

Edit

✓ U.S. Mailing Address and Phone Number

What is your mailing address?
Street Address: **123 Main St.**
City/Town: **Anytown**
State: **Alaska**
ZIP Code: **12345**
What is your daytime phone number?: **Not Answered**

Edit

✓ Race and Ethnicity

Are you Hispanic or Latino? (Select one): **No response**
What is your race? (Select one or more): **No response**

Edit

✓ Documentation

Evidence Documentation For You: **Foreign Passport**

Edit

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182. Non-U.S. Replacement Self - Attestation

 Social Security

Use Our Online Service To Obtain a Social Security Number Card

Next Steps

The replacement card request is not complete. In order for the card to be processed:

1. Gather the documentation you selected to provide as evidence to the [local SSA office](#).
2. Call your [local SSA office](#) for additional guidance for completing your application.

☐ ***I acknowledge that I have read the 'Next Steps' and understand that I must contact my local SSA office within 45 calendar days to complete the application process.**

Electronic Signature

Please read and accept the following statement to finish the application.

I understand and agree that my application will be signed electronically, which is the legal equivalent of my handwritten signature, when I select the SUBMIT APPLICATION PACKAGE button below. I also understand that my electronic signature means that I intend to apply for a replacement SSN card and have provided the Social Security Administration with accurate information.

I declare under penalty of perjury that I have examined all the information on this application 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 this electronic application, or causes someone else to do so, commits a crime and may be sent to prison or may face other penalties, or both.

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183. Non-U.S. Replacement Self - Success

Success - ESS



Social Security

Use Our Online Service To Obtain a Social Security Number Card



You successfully submitted your application! The Online Control Number for your application is O1111111111111111. Please write this number down and/or print this screen for your records.

IMPORTANT: Your Social Security card request is not complete until you show the document(s) below to a [local Social Security office or card center](#). You must schedule your appointment within 45 days, or you will need to submit a new application.

- Foreign Passport

PREPARING FOR YOUR VISIT:

- Please gather the documents before you visit and bring them with you. We can't complete your application without them.
- If you have questions before you visit, please call your [local Social Security office or card center](#) or our National 800 Number at 1-800-772-1213.
- You must wear a mask and follow physical distancing requirements, even if you are vaccinated.
- You may need to wait outside because space in our offices is limited due to physical distancing requirements. Please plan for cold or bad weather.
- We ask that you come alone unless you require help with your visit. If you require help, we can only permit one person to join you.
 - If you are applying for an original social security card for an individual age 12 or over, both you and the person to whom the SSN is for must appear for the mandatory in-person interview.
- Please follow directions for check-in when you arrive.



Will Social Security contact me about my application?

We will use the address you provided below if we need to contact you regarding your application. Don't wait to hear from Social Security before visiting an office to show your documents.

123 Main St.
Anytown, Maryland 12345

Print

Schedule an Appointment

Done

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184. Non-U.S. Replacement Someone Else Adult - Landing

 **Social Security**

Use Our Online Service To Obtain A Social Security Number Card

Online Social Security Number Application

Request a Social Security Number (SSN) card online and provide your documentation to the local Social Security Administration (SSA) office.

1. We will walk you through the guided steps needed to submit your request.
2. After you submit your online request, you must **visit** your [local Social Security office or card center](#) with your documentation within **45 calendar days**.

Acceptable documents **MUST** be original or copies certified by the issuing agency, unexpired and must show name, date of birth or age. [Find out which documents are required for your original or replacement card request.](#)

After SSA verifies your document(s) and completes your request, you will receive your social security card in the mail **within 14 business days**.

Apply Now

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185. Non-U.S. Replacement Someone Else Adult - Age 18 or Older

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

***You must be 18 or older to fill out this application. Are you 18 or older?**

☐ Yes ☐ No

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186. Non-U.S. Replacement Someone Else Adult - U.S. Mailing Address Available

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** Do you have a U.S. mailing address?**
This includes Fleet Post Office [FPO], Army Post Office [APO] and Diplomatic Post Office [DPO] addresses.
☐ Yes ☐ No

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187. Non-U.S. Replacement Someone Else Adult - Have an SSN

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** Does the person who the application is for already have a Social Security Number (SSN)?**
☐ Yes ☐ No

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188. Non-U.S. Replacement Someone Else Adult - Citizenship

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Is the individual for whom you are applying a U.S. Citizen?**

☐ Yes ☐ No

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189. Non-U.S. Replacement Someone Else Adult - Applying For

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*Are you an adult applying for

☐ Yourself

☐ Someone else

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190. Non-U.S. Replacement Someone Else Adult - Applying For Someone Else Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

If you are applying for someone else, what is YOUR name?

* First

Middle

* Last

Suffix

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191. Non-U.S. Replacement Someone Else Adult – Individual's Date of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is the individual's date of birth?

*Month

*Day

*Year

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192. Non-U.S. Replacement Someone Else Adult - Relationship Adult

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** What is YOUR relationship to the individual?**

☐ Court Appointed Legal Guardian
☐ Administrator of Estate
☐ State Agency or State Licensed Agency with Legal Custody
☐ Individual who can Establish Relationship and Responsibility
☐ None of the Above

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193. Non-U.S. Replacement Someone Else Adult - Individual Capabilities

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Is the individual for whom you are applying physically or mentally able to file an application on his or her own?**

☐ Yes ☐ No

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194. Non-U.S. Replacement Someone Else Adult - Name Change

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

* Are you requesting a name change for the individual?

☐ Yes ☐ No

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195. Non-U.S. Replacement Someone Else Adult - Individual's Place of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

Where is the individual's place of birth?
☐ U.S. ☐ International

* City/Town

* State/Territory

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196. Non-U.S. Replacement Someone Else Adult - Individual's SSN

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** What is the individual's Social Security Number (SSN)?**

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197. Non-U.S. Replacement Someone Else Adult - Individual's Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

How should the individual's name appear on the card?

* First

Middle

* Last

Suffix

-- ▾

* Is the name above the individual's full name at birth?

☐ Yes

☐ No

* Has the individual ever had a Social Security Number (SSN) card under a name not listed above?

☐ Yes

☐ No

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198. Non-U.S. Replacement Someone Else Adult - Individual's Parents Names

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

***What is the individual's parent/mother's birth name?**
☐ Unknown

***First**

Middle

***Last**

Suffix

***What is the individual's parent/father's name?**
☐ Unknown

***First**

Middle

***Last**

Suffix

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199. Non-U.S. Replacement Someone Else Adult - U.S. Mailing Address

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is YOUR mailing address?
Enter a valid U.S. address where the Social Security Administration can mail the card.

* Street Address

Apartment, Suite, Building, Etc.

* City/Town

* State/Territory

* ZIP Code

What is your daytime phone number?
10-digit Number

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200. Non-U.S. Replacement Someone Else Adult - Individual's Documentation



Social Security

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application



What you need to know about documentation

- You must present original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.

Generally, you must provide at least two documents to prove identity and immigration status. However, we may use one document for two purposes. For example, we may use an I-766 EAD card as proof of identity and immigration status.

Social Security Number Documentation

* Indicates required information

* Identity Documentation for You

Please select a document you can give us to prove identity.

☐ Current, Valid U.S. Driver's license
☐ I-551 Machine Readable Immigrant Visa (MRIV)
☐ I-551 Permanent Resident Card
☐ I-551 (Expired) with I-797 Extension
☐ I-766 Employment Authorization Document (EAD) Card
☐ I-872 American Indian Card
☐ I-94 with No Foreign Passport
☐ Order of Immigration Judge
☐ Foreign Passport
☐ U.S. State Identity Card
☐ U.S. Passport
☐ Other

***Evidence Documentation For The Individual**

Please select all the documentation that the individual can give us to prove their identity and immigration status.

☐ Foreign Passport
☐ I-551 Permanent Resident Card
☐ I-94 with No Foreign Passport
☐ I-94 with Unexpired Foreign Passport
☐ I-766 Employment Authorization Document (EAD) Card
☐ Admit (ADM) Stamp in Unexpired Foreign Passport
☐ I-551 Stamp (Temporary)
☐ Current, Valid U.S. Drivers License
☐ I-551 Machine Readable Immigrant Visa (MRIV)
☐ U.S. State Identity Card
☐ Birth Certificate - Foreign
☐ DS-2019 Certificate of Eligibility
☐ I-20 Certificate of Eligibility
☐ Other

***Custody and Responsibility Documentation**

Please select one document from the list

☐ Court custody documentation
☐ Letter from state social service placing the individual in your household
☐ Other document(s) that show your relationship and responsibility

***Physical or Mental incapacity Documentation**

☐ Documentation that the individual is physically or mentally unable to file an application on his or her behalf (e.g., doctor's certification)
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201. Non-U.S. Replacement Someone Else Adult - Individual's Documentation - Name Change



Social Security

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application



What you need to know about documentation

- You must present original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.

Generally, you must provide at least two documents to prove identity and immigration status. However, we may use one document for two purposes. For example, we may use an I-766 EAD card as proof of identity and immigration status.

Social Security Number Documentation

* Indicates required information

* Identity Documentation for You

Please select a document you can give us to prove identity.

- | |
|--|
| ☐ Current, Valid U.S. Driver's license |
| ☐ I-551 Machine Readable Immigrant Visa (MRIV) |
| ☐ I-551 Permanent Resident Card |
| ☐ I-551 (Expired) with I-797 Extension |
| ☐ I-766 Employment Authorization Document (EAD) Card |
| ☐ I-872 American Indian Card |
| ☐ I-94 with No Foreign Passport |
| ☐ Order of Immigration Judge |
| ☐ Foreign Passport |
| ☐ U.S. State Identity Card |
| ☐ U.S. Passport |
| ☐ Other |

***Evidence Documentation For The Individual**

Please select all the documentation that the individual can give us to prove their identity and immigration status.

☐ Foreign Passport
☐ I-551 Permanent Resident Card
☐ I-94 with No Foreign Passport
☐ I-94 with Unexpired Foreign Passport
☐ I-766 Employment Authorization Document (EAD) Card
☐ Admit (ADM) Stamp in Unexpired Foreign Passport
☐ I-551 Stamp (Temporary)
☐ Current, Valid U.S. Drivers License
☐ I-551 Machine Readable Immigrant Visa (MRIV)
☐ U.S. State Identity Card
☐ Birth Certificate - Foreign
☐ DS-2019 Certificate of Eligibility
☐ I-20 Certificate of Eligibility
☐ Other

***Custody and Responsibility Documentation**

Please select one document from the list

☐ Court custody documentation
☐ Letter from state social service placing the individual in your household
☐ Other document(s) that show your relationship and responsibility

***Physical or Mental incapacity Documentation**

☐ Documentation that the individual is physically or mentally unable to file an application on his or her behalf (e.g., doctor's certification)
--

***Name Change Documentation for Adult**

Please select one document from the list

☐ Amended birth certificate
☐ Court order for a name change
☐ Marriage document/U.S. only
☐ Divorce decree

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202. Non-U.S. Replacement Someone Else Adult - Review and Edit

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Review and Edit

Please review the answers you provided. If you need to make any changes, please select "Edit" to return to that part of the application and make the correction.

 **Age**

Edit

You must be 18 or older to fill out this application. Are you 18 or older?: **Yes**

 **U.S. Mailing Address**

Edit

Do you have a U.S. mailing address?: **Yes**

 **Social Security Number**

Edit

Does the person who the application is for already have a Social Security Number (SSN)?: **Yes**

 **Citizenship Status**

Edit

Is the individual for whom you are applying a U.S. citizen?: **No**

 **Applying For**

Edit

Are you an adult applying for: **Someone Else**

 **Your Name**

Edit

If you are applying for someone else, what is YOUR name?: **John Smith**

 **Date of Birth**

Edit

What is the individual's date of birth?: **January 1, 1980**

 **Relationship**

Edit

What is YOUR relationship to the individual?: **Court Appointed Legal Guardian**

Non-U.S. Replacement Someone Else Adult - Review and Edit - Continued

 Individual's Capability	Edit
Is the individual for whom you are applying physically or mentally able to file an application on his or her own?: No	
 Name Change	
Are you requesting a name change for the individual?: No	
 Place of Birth	Edit
Where is the individual's place of birth?: Wellington, New Zealand	
 Assigned Social Security Number	
What is your Social Security Number (SSN)?: 123-45-8976	
 Name	Edit
How should the individual's name appear on the new card?: Jake Smith	
Is the name above the individual's full name at birth?: Yes	
Has the individual ever had a Social Security Number (SSN) card under a name not listed above?: No	
 Parent's Name	Edit
What is the individual's parent/mother's birth name?: Not Answered	
What is the individual's parent/father's name?: Not Answered	
 U.S. Mailing Address and Phone Number	Edit
What is YOUR mailing address?	
Street Address: 123 Main St.	
City/Town: Anytown	
State: Alaska	
ZIP Code: 12345	
What is your daytime phone number?: Not Answered	

Non-U.S. Replacement Someone Else Adult - Review and Edit - Continued

 **Race and Ethnicity**

Edit

Are you Hispanic or Latino? (Select one): **No response**

What is your race? (Select one or more): **No response**

 **Documentation**

Edit

Identity Documentation For You: **Current, Valid U.S. Driver's license**

Evidence Documentation For The Individual: **Foreign Passport**

Custody and Responsibility Documentation: **Court custody documentation**

Physical or Mental incapacity Documentation: **Documentation that the individual is physically or mentally unable to file an application on his or her behalf (e.g., doctor's certification)**

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203. Non-U.S. Replacement Someone Else Adult - Attestation



Social Security

Use Our Online Service To Obtain a Social Security Number Card

Next Steps

The replacement card request is not complete. In order for the card to be processed:

1. Gather the documentation you selected to provide as evidence to the [local SSA office](#).
2. Call your [local SSA office](#) for additional guidance for completing your application.

☐ ***I acknowledge that I have read the 'Next Steps' and understand that I must contact my local SSA office within 45 calendar days to complete the application process.**

Electronic Signature

Please read and accept the following statement to finish the application.

I understand and agree that my application will be signed electronically, which is the legal equivalent of my handwritten signature, when I select the SUBMIT APPLICATION PACKAGE button below. I also understand that my electronic signature means that I intend to apply for a replacement SSN card and have provided the Social Security Administration with accurate information.

I declare under penalty of perjury that I have examined all the information on this application 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 this electronic application, or causes someone else to do so, commits a crime and may be sent to prison or may face other penalties, or both.

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204. Non-U.S. Replacement Someone Else Adult - Success

Success - ESS



Social Security

Use Our Online Service To Obtain a Social Security Number Card



You successfully submitted your application! The Online Control Number for your application is 0111111111111111. Please write this number down and/or print this screen for your records.

IMPORTANT: Your Social Security card request is not complete until you show the document(s) below to a [local Social Security office or card center](#). You must schedule your appointment within 45 days, or you will need to submit a new application.

- Foreign Passport

PREPARING FOR YOUR VISIT:

- Please gather the documents before you visit and bring them with you. We can't complete your application without them.
- If you have questions before you visit, please call your [local Social Security office or card center](#) or our National 800 Number at 1-800-772-1213.
- You must wear a mask and follow physical distancing requirements, even if you are vaccinated.
- You may need to wait outside because space in our offices is limited due to physical distancing requirements. Please plan for cold or bad weather.
- We ask that you come alone unless you require help with your visit. If you require help, we can only permit one person to join you.
 - If you are applying for an original social security card for an individual age 12 or over, both you and the person to whom the SSN is for must appear for the mandatory in-person interview.
- Please follow directions for check-in when you arrive.



Will Social Security contact me about my application?

We will use the address you provided below if we need to contact you regarding your application. Don't wait to hear from Social Security before visiting an office to show your documents.

123 Main St.
Anytown, Maryland 12345

Print

Schedule an Appointment

Done

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205. Non-U.S. Replacement Someone Else Child - Landing



Social Security

Use Our Online Service To Obtain A Social Security Number Card

Online Social Security Number Application

Request a Social Security Number (SSN) card online and provide your documentation to the local Social Security Administration (SSA) office.

1. We will walk you through the guided steps needed to submit your request.
2. After you submit your online request, you must **visit** your [local Social Security office or card center](#) with your documentation within **45 calendar days**.

Acceptable documents **MUST** be original or copies certified by the issuing agency, unexpired and must show name, date of birth or age. [Find out which documents are required for your original or replacement card request.](#)

After SSA verifies your document(s) and completes your request, you will receive your social security card in the mail **within 14 business days**.

[Apply Now](#)

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206. Non-U.S. Replacement Someone Else Child - Age 18 or Older

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

***You must be 18 or older to fill out this application. Are you 18 or older?**

☐ Yes ☐ No

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207. Non-U.S. Replacement Someone Else Child - U.S. Mailing Address Available

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** Do you have a U.S. mailing address?**
This includes Fleet Post Office [FPO], Army Post Office [APO] and Diplomatic Post Office [DPO] addresses.
☐ Yes ☐ No

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208. Non-U.S. Replacement Someone Else Child - Have an SSN

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Does the person who the application is for already have a Social Security Number (SSN)?**

☐ Yes ☐ No

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209. Non-U.S. Replacement Someone Else Child - Citizenship

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** Is the individual for whom you are applying a U.S. Citizen?**

☐ Yes ☐ No

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210. Non-U.S. Replacement Someone Else Child - Applying For

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*Are you an adult applying for

☐ Yourself

☐ Someone else

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211. Non-U.S. Replacement Someone Else Child - Applying For Someone Else Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

If you are applying for someone else, what is YOUR name?

* First

Middle

* Last

Suffix

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212. Non-U.S. Replacement Someone Else Child – Individual's Date of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is the individual's date of birth?

*Month

*Day

*Year

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213. Non-U.S. Replacement Someone Else Child - Relationship Child

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

*** What is your relationship to and responsibility for the individual?**

☐ Court Appointed Legal Guardian
☐ Custodial Mother
☐ Custodial Father
☐ Administrator of Estate
☐ Relative with Custody of Child
☐ State Agency or State Licensed Agency with Legal Custody
☐ Individual who can Establish Relationship and Responsibility
☐ None of the Above

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214. Non-U.S. Replacement Someone Else Child - Name Change

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

* Are you requesting a name change for the individual?

☐ Yes ☐ No

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215. Non-U.S. Replacement Someone Else Child - Individual's Place of Birth

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

Where is the individual's place of birth?
☐ U.S. ☐ International

* City/Town

* State/Territory

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216. Non-U.S. Replacement Someone Else Child - Individual's SSN

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

*** What is the individual's Social Security Number (SSN)?**

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217. Non-U.S. Replacement Someone Else Child - Individual's Name

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

* Indicates required information

How should the individual's name appear on the card?

* First	Middle	* Last	Suffix
			--

*** Is the name above the individual's full name at birth?**

☐ Yes ☐ No

*** Has the individual ever had a Social Security Number (SSN) card under a name not listed above?**

☐ Yes ☐ No

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218. Non-U.S. Replacement Someone Else Child - Individual's Parents Names

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

***What is the individual's parent/mother's birth name?**
☐ Unknown

***First**

Middle

***Last**

Suffix

***What is the individual's parent/father's name?**
☐ Unknown

***First**

Middle

***Last**

Suffix

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219. Non-U.S. Replacement Someone Else Child - U.S. Mailing Address

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application
* Indicates required information

What is YOUR mailing address?
Enter a valid U.S. address where the Social Security Administration can mail the card.

* Street Address

Apartment, Suite, Building, Etc.

* City/Town

* State/Territory

* ZIP Code

What is your daytime phone number?
10-digit Number

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220. Non-U.S. Replacement Someone Else Child - Individual's Documentation



Social Security

Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application



What you need to know about documentation

- You must present original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.

Generally, you must provide at least two documents to prove identity and immigration status. However, we may use one document for two purposes. For example, we may use an I-766 EAD card as proof of identity and immigration status.

Social Security Number Documentation

* Indicates required information

* Identity Documentation for You

Please select a document you can give us to prove identity.

- | |
|--|
| ☐ Current, Valid U.S. Driver's license |
| ☐ I-551 Machine Readable Immigrant Visa (MRIV) |
| ☐ I-551 Permanent Resident Card |
| ☐ I-551 (Expired) with I-797 Extension |
| ☐ I-766 Employment Authorization Document (EAD) Card |
| ☐ I-872 American Indian Card |
| ☐ I-94 with No Foreign Passport |
| ☐ Order of Immigration Judge |
| ☐ Foreign Passport |
| ☐ U.S. State Identity Card |
| ☐ U.S. Passport |
| ☐ Other |

***Evidence Documentation For The Individual**

Please select all the documentation that the individual can give us to prove their identity and immigration status.

☐ Foreign Passport
☐ I-551 Permanent Resident Card
☐ I-94 with No Foreign Passport
☐ I-94 with Unexpired Foreign Passport
☐ I-766 Employment Authorization Document (EAD) Card
☐ Admit (ADM) Stamp in Unexpired Foreign Passport
☐ I-551 Stamp (Temporary)
☐ Current, Valid U.S. Drivers License
☐ I-551 Machine Readable Immigrant Visa (MRIV)
☐ U.S. State Identity Card
☐ Birth Certificate - Foreign
☐ DS-2019 Certificate of Eligibility
☐ I-20 Certificate of Eligibility
☐ Other

***Custody and Responsibility Documentation**

Please select one document from the list

☐ Court custody documentation
☐ You are listed as the parent in SSA records
☐ Letter from state social service placing the individual in your household
☐ School records indicating that you have responsibility for the child
☐ Rental agreement listing the child in your household

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221. Non-U.S. Replacement Someone Else Child - Individual's Documentation - Name Change



Use Our Online Service To Obtain a Social Security Number Card

Online Social Security Number Application

i What you need to know about documentation

- You must present original documentation or copies certified by the agency that issued them.
- We cannot accept photocopies or notarized copies.
- We cannot accept a receipt showing you applied for the document.
- Acceptable documents must be unexpired, show name, date of birth or age.

Generally, you must provide at least two documents to prove identity and immigration status. However, we may use one document for two purposes. For example, we may use an I-766 EAD card as proof of identity and immigration status.

Social Security Number Documentation

* Indicates required information

* Identity Documentation for You

Please select a document you can give us to prove identity.

☐ Current, Valid U.S. Driver's license
☐ I-551 Machine Readable Immigrant Visa (MRIV)
☐ I-551 Permanent Resident Card
☐ I-551 (Expired) with I-797 Extension
☐ I-766 Employment Authorization Document (EAD) Card
☐ I-872 American Indian Card
☐ I-94 with No Foreign Passport
☐ Order of Immigration Judge
☐ Foreign Passport
☐ U.S. State Identity Card
☐ U.S. Passport
☐ Other

***Evidence Documentation For The Individual**

Please select all the documentation that the individual can give us to prove their identity and immigration status.

☐ Foreign Passport
☐ I-551 Permanent Resident Card
☐ I-94 with No Foreign Passport
☐ I-94 with Unexpired Foreign Passport
☐ I-766 Employment Authorization Document (EAD) Card
☐ Admit (ADM) Stamp in Unexpired Foreign Passport
☐ I-551 Stamp (Temporary)
☐ Current, Valid U.S. Drivers License
☐ I-551 Machine Readable Immigrant Visa (MRIV)
☐ U.S. State Identity Card
☐ Birth Certificate - Foreign
☐ DS-2019 Certificate of Eligibility
☐ I-20 Certificate of Eligibility
☐ Other

***Custody and Responsibility Documentation**

Please select one document from the list

☐ Court custody documentation
☐ You are listed as the parent in SSA records
☐ Letter from state social service placing the individual in your household
☐ School records indicating that you have responsibility for the child
☐ Rental agreement listing the child in your household

***Name Change Documentation for Child**

Please select one document from the list

☐ Amended birth certificate
☐ Court order for a name change
☐ Marriage document/U.S. only
☐ Divorce decree

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222. Non-U.S. Replacement Someone Else Child - Review and Edit

 **Social Security**

Use Our Online Service To Obtain a Social Security Number Card

Review and Edit

Please review the answers you provided. If you need to make any changes, please select "Edit" to return to that part of the application and make the correction.

 **Age**

Edit

You must be 18 or older to fill out this application. Are you 18 or older?: **Yes**

 **U.S. Mailing Address**

Edit

Do you have a U.S. mailing address?: **Yes**

 **Social Security Number**

Edit

Does the person who the application is for already have a Social Security Number (SSN)?: **Yes**

 **Citizenship Status**

Edit

Is the individual for whom you are applying a U.S. citizen?: **No**

 **Applying For**

Edit

Are you an adult applying for: **Someone Else**

 **Your Name**

Edit

If you are applying for someone else, what is YOUR name?: **John Smith**

 **Date of Birth**

Edit

What is the individual's date of birth?: **January 1, 2017**

 **Relationship**

Edit

What is YOUR relationship to and responsibility for the individual?: **Custodial Father**

Non-U.S. Replacement Someone Else Child - Review and Edit - Continued

 Relationship	Edit
What is YOUR relationship to and responsibility for the individual?: Custodial Father	
 Name Change	
Are you requesting a name change for the individual?: No	
 Place of Birth	
Where is the individual's place of birth?: Wellington, New Zealand	
 Assigned Social Security Number	
What is your Social Security Number (SSN)?: 123-45-8976	
 Name	Edit
How should the individual's name appear on the new card?: Jake Smith	
Is the name above the individual's full name at birth?: Yes	
Has the individual ever had a Social Security Number (SSN) card under a name not listed above?: No	
 Parent's Name	Edit
What is the individual's parent/mother's birth name?: Not Answered	
What is the individual's parent/father's name?: Not Answered	
 U.S. Mailing Address and Phone Number	Edit
What is YOUR mailing address?	
Street Address: 123 Main St.	
City/Town: Anytown	
State: Alaska	
ZIP Code: 12345	
What is your daytime phone number?: Not Answered	

Non-U.S. Replacement Someone Else Child - Review and Edit - Continued

 **Race and Ethnicity**

Edit

Are you Hispanic or Latino? (Select one): **No response**
What is your race? (Select one or more): **No response**

 **Documentation**

Edit

Identity Documentation For You: **Current, Valid U.S. Driver's license**
Evidence Documentation For The Individual: **Foreign Passport**
Custody and Responsibility Documentation: **Court custody documentation**

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223. Non-U.S. Replacement Someone Else Child - Attestation



Social Security

Use Our Online Service To Obtain a Social Security Number Card

Next Steps

The replacement card request is not complete. In order for the card to be processed:

1. Gather the documentation you selected to provide as evidence to the [local SSA office](#).
2. Call your [local SSA office](#) for additional guidance for completing your application.

☐ ***I acknowledge that I have read the 'Next Steps' and understand that I must contact my local SSA office within 45 calendar days to complete the application process.**

Electronic Signature

Please read and accept the following statement to finish the application.

I understand and agree that my application will be signed electronically, which is the legal equivalent of my handwritten signature, when I select the SUBMIT APPLICATION PACKAGE button below. I also understand that my electronic signature means that I intend to apply for a replacement SSN card and have provided the Social Security Administration with accurate information.

I declare under penalty of perjury that I have examined all the information on this application 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 this electronic application, or causes someone else to do so, commits a crime and may be sent to prison or may face other penalties, or both.

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224. Non-U.S. Replacement Someone Else Child - Success

Success - ESS

**Social Security**

Use Our Online Service To Obtain a Social Security Number Card



You successfully submitted your application! The Online Control Number for your application is 0111111111111111. Please write this number down and/or print this screen for your records.

IMPORTANT: Your Social Security card request is not complete until you show the document(s) below to a [local Social Security office or card center](#). You must schedule your appointment within 45 days, or you will need to submit a new application.

- Foreign Passport

PREPARING FOR YOUR VISIT:

- Please gather the documents before you visit and bring them with you. We can't complete your application without them.
- If you have questions before you visit, please call your [local Social Security office or card center](#) or our National 800 Number at 1-800-772-1213.
- You must wear a mask and follow physical distancing requirements, even if you are vaccinated.
- You may need to wait outside because space in our offices is limited due to physical distancing requirements. Please plan for cold or bad weather.
- We ask that you come alone unless you require help with your visit. If you require help, we can only permit one person to join you.
 - If you are applying for an original social security card for an individual age 12 or over, both you and the person to whom the SSN is for must appear for the mandatory in-person interview.
- Please follow directions for check-in when you arrive.



Will Social Security contact me about my application?

We will use the address you provided below if we need to contact you regarding your application. Don't wait to hear from Social Security before visiting an office to show your documents.

123 Main St.
Anytown, Maryland 12345

[Print](#)[Schedule an Appointment](#)[Done](#)[OMB No. 0960-0066](#)[Privacy Policy](#)[Privacy Act Statement](#)[Accessibility Help](#)