Comprehensive List of SSA-1375 Data Elements

This table provides a comprehensive list of the data elements in the original version and proposed revised version of the Form SSA-1375 (Progress Review) and details the change, if any, by field.

SSA-1375 – Original Version			SSA-1375 – Revised Version			Revision Notes
Q#	**Question**	**Response Options**	**Q#**	**Question**	**Response Options**	
Title	Progress Review Form	N/A	Title	Progress Review Form	N/A	*No change.*
1	Beneficiary	[Open response]	1	Ticketholder Name	[Open response]	Question revision – Revised for clarity and consistency with program terminology.
2	SSN	[Open numeric response]	2	SSN	[Open numeric response]	*No change.*
3	Provider	[Open numeric date response]	3	Provider	[Open numeric date response]	*No change.*
4	Date	[Open response]	4	Date	[Open response]	*No change.*
Instructions	Please inform us of your progress during the timeframe shown below by completing one of the boxes in Sections A-E below. Check “Yes” or “No” and provide information on progress with work and earnings, education, or technical training when appropriate to indicate if you have met the first 12-Month Progress Review requirements. Then sign, date, and return this form to TICKET TO WORK using the enclosed postage paid envelope or by fax at 703-683-3289. It is important that you respond within 30 days of the date on this form. You may retain a copy of this form for your records.	N/A	Instructions	Please inform us of your progress during the timeframe shown below by completing one of the boxes in Sections A-E below. Check “Yes” or “No” and provide information on your progress with work and earnings, education, or technical training when appropriate, to indicate if you have met the 12-Month Progress Review requirements. Then sign, date, and return this form to TICKET TO WORK using the enclosed postage paid envelope or by fax at 703-893-4020. It is important that you respond within 30 days of the date on this form. You may retain a copy of this form for your records.	N/A	Instruction revision –Updated language and fax number for accuracy.
Heading	First 12-Month Progress Review Requirements	N/A	Heading	12-Month Progress Review Requirements	N/A	Heading revision – Revised for accuracy.
5a	*First 12-Month Progress Review Requirements* Between	[Open numeric date response]	5a	*12-Month Progress Review Requirements* Between	[Open numeric date response]	*No change.*
5b	*First 12-Month Progress Review Requirements* And	[Open numeric date response]	5b	*12-Month Progress Review Requirements* And	[Open numeric date response]	*No change.*
A.1	I worked 3 out of 12 months with earnings at or above $1050 in each month (Trial Work Level for 2023).	Yes; No	A.1	I worked 3 out of 12 months with earnings at or above $1,210 in each month (the Trial Work Level for 2026).	Yes; No	Question revision – Updated the earnings threshold and year to reflect current Trial Work Level requirements.
Instructions	If Yes, STOP here. Sign and date this form and mail or fax back to us.	N/A	Instructions	If Yes, STOP here. Sign and date this form and mail or fax back to us.	N/A	*No change.*

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Q#	**Question**	**Response Options**	**Q#**	**Question**	**Response Options**	
B.1	I obtained a GED or High School Diploma.	Yes; No	B.1	I obtained a GED or High School Diploma	Yes; No	*No change.*
B.2	Name of Certifying Agency:	[Open response]	B.2	Name of Certifying Agency	[Open response]	*No change.*
B.3	Agency Address:	[Open response]	B.3	Agency Address	[Open response]	*No change.*
B.4	Date GED or Diploma Earned:	[Open numeric date response]	B.4	Date GED or Diploma Earned	[Open numeric date response]	*No change.*
Instructions	If Yes, STOP here. Sign and date this form and mail or fax back to us.	N/A	Instructions	If Yes, STOP here. Sign and date this form and mail or fax back to us.	N/A	*No change.*
C.1	I completed 60% of a full-time course load for a full academic year in a degree or certification college program.	Yes; No	C.1	I completed 60% of a full-time course load for a full academic year in a degree or certification college program.	Yes; No	*No change.*
C.2	School Name	[Open response]	C.2	School Name	[Open response]	*No change.*
C.3	School Address	[Open response]	C.3	School Address	[Open response]	*No change.*
C.4	# Credits Completed	[Open numeric response]	C.4	# Credits Completed	[Open numeric response]	*No change.*
C.5	# Credits for full course load	[Open numeric response]	C.5	# Credits for full course load	[Open numeric response]	*No change.*
C.6	Date Completed	[Open numeric date response]	C.6	Date Completed	[Open numeric date response]	*No change.*
Instructions	If Yes, STOP here. Sign and date this form and mail or fax back to us.	N/A	Instructions	If Yes, STOP here. Sign and date this form and mail or fax back to us.	N/A	*No change.*
D.1	I completed 60% of a full-time course load for an academic year in a Technical, Trade, or Vocational program.	Yes; No	D.1	I completed 60% of a full-time course load for an academic year in a Technical, Trade, or Vocational program.	Yes; No	*No change.*
D.2	School Name	[Open response]	D.2	School Name	[Open response]	*No change.*
D.3	School Address	[Open response]	D.3	School Address	[Open response]	*No change.*
D.4	# Credits Completed	[Open numeric response]	D.4	# Credits Completed	[Open numeric response]	*No change.*
D.5	# Credits for full course load	[Open numeric response]	D.5	# Credits for full course load	[Open numeric response]	*No change.*
D.6	Date Completed	[Open numeric date response]	D.6	Date Completed	[Open numeric date response]	*No change.*
Instructions	If Yes, STOP here. Sign and date this form and mail or fax back to us.	N/A	Instructions	If Yes, STOP here. Sign and date this form and mail or fax back to us.	N/A	*No change.*
E.1	I completed a combination of earnings PLUS some college degree or certification credits or technical, trade, or vocational program credits that together equals or exceeds 100%.	N/A	E.1	I completed a combination of earnings PLUS some college degree or certification credits or technical, trade, or vocational program credits that together equals or exceeds 100%.	Yes; No	Response options added – Revised to add response options “Yes; No” for consistency with other questions.
E.2	During this period I earned $	[Open numeric response]	E.2	During this period I earned $	[Open numeric response]	*No change.*

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Q#	**Question**	**Response Options**	**Q#**	**Question**	**Response Options**	
E.3	I completed _____ credits of a full-time course load in a degree or college certification program or in a technical, trade, or vocational program.	[Open numeric response]	State ment	I completed some credits in a degree or college certification program or in a technical, trade, or vocational program	N/A	Question and response options revision – Revised to a general statement without response options and adding another question to capture the specific number of credits completed for consistency with other questions.
E.4	School Name	[Open response]	E.3	School Name	[Open response]	*No change.*
E.5	School Address	[Open response]	E.4	School Address	[Open response]	*No change.*
			E.5	# Credits Completed	[Open response]	New question added – Added to capture the specific number of credits completed, ensuring consistency with other sections.
E.6	# Credits for full course load	[Open numeric response]	E.6	# Credits for full course load	[Open response]	*No change.*
E.7	Date Completed	[Open numeric date response]	E.7	Date Completed	[Open response]	*No change.*
Instr uctio ns	I declare under penalty of perjury that I have examined all the information on this form, and on any accompanying statements or forms, 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 information, or causes someone else to do so, commits a crime and may be sent to prison, or may face other penalties, or both. I understand that if I make, or cause to be made, a representation which I know is false concerning the requirements of the Ticket to Work and Self-Sufficiency program, I could be punished by fine, or imprisonment or both.	N/A	Instru ctions	I declare under penalty of perjury that I have examined all the information on this form, and on any accompanying statements or forms, 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 information, or causes someone else to do so, commits a crime and may be sent to prison, or may face other penalties, or both. I understand that if I make, or cause to be made, a representation which I know is false concerning the requirements of the Ticket to Work and Self-Sufficiency program, I could be punished by fine, or imprisonment or both.	N/A	*No change.*
6	Beneficiary Signature	[Signature]	6	Ticketholder Signature	[Signature]	Question revision – Revised for clarity and consistency with program terminology.
7	Date	[Open numeric date response]	7	Date	[Open numeric date response]	*No change.*
Instr uctio ns	Return this form to TICKET TO WORK within 30 days using the enclosed postage-paid envelope or by fax at 703-683-3289.	N/A	Instru ctions	Return this form to TICKET TO WORK within 30 days using the enclosed postage-paid envelope or by fax at 703-893-4020.	N/A	Instruction revision –Updated fax number for accuracy.
PRA	Privacy Act Statement	N/A	PRA	Privacy Act Statement	N/A	*No change.*
PRA	Paperwork Reduction Statement	N/A	PRA	Paperwork Reduction Statement	N/A	Updated fax number to reflect the current TPM fax number.