Employment Network Split Payment Request Form

Ticketholder SSN:

EMPLOYMENT NETWORKS

Current EN:	
PID:	Contact Name:
Ticket Assignment Date:	Phone:

Prior EN #1:	Prior EN #2:
PID:	PID:
Ticket Assignment Date:	Ticket Assignment Date:
Contact Name:	Contact Name:
Phone:	Phone:

Prior EN #3:	Prior EN #4:
PID:	PID:
Ticket Assignment Date:	Ticket Assignment Date:
Contact Name:	Contact Name:
Phone:	Phone:

PROPOSED SPLIT PAYMENT

Please review the options below and indicate which split payment method would be most applicable to the ENs requesting payment.

PLEASE NOTE: This applies for the duration of the Ticketholder's Ticket.

☐ **I WANT THE TICKET PROGRAM MANAGER (TPM) TO MAKE THE SPLIT PAYMENT DETERMINATION**
Please check the box to indicate that you would like TPM to determine the split payment percentages

☐ **I WANT TPM TO USE THE AGREED UPON SPLIT PAYENT ALLOCATION CHART BELOW**
In the event there are two or more ENs involved in the split payment process for a Ticketholder, the percentage must be in denominations of 10 and the total for each payment request types should equal to 100%.
Please refer to examples outlined below for assistance in filling out the chart.

Example #1 – Title II or Concurrent Beneficiary – Two ENs involved

Payment Types	Payment Requests	Current EN Name: ABC, Inc	Prior EN #1 Name: 123 Company	Prior EN #2 Name:	Prior EN #3 Name:	Prior EN #4 Name:
Phase One Milestones	P1M1-4	80%	20%			
Phase Two Milestones	P2M1-11	90%	10%			
Outcome Payments	O 1-36	100%	0%			

Example #2 – Title16 Ticketholder – Three ENs involved

Payment Types	Payment Requests	Current EN Name: ABC, Inc	Prior EN #1 Name: 123 Company	Prior EN #2 Name: XYZ, Inc	Prior EN #3 Name:	Prior EN #4 Name:
Phase One Milestones	P1M1-4	30%	10%	60%		
Phase Two Milestones	P2M1-18	40%	10%	50%		
Outcome Payments	O 1-10	50%	0%	50%		
	O 11-60	70%	0%	30%		

Split Payment Chart for Two Or More EN's

Following the examples above please fill out the chart below:

Payment Types	Payment Requests	Current EN Name:	Prior EN #1 Name:	Prior EN #2 Name:	Prior EN #3 Name:	Prior EN #4 Name:
Phase One Milestones						
Phase Two Milestones						
Outcome Payments						

We have discussed the services provided to the Ticketholder and agree to split the EN payments as requested above.

Current EN Signature:	Date:
Prior EN #1 Signature:	Date:
Prior EN #2 Signature:	Date:
Prior EN #3 Signature:	Date:
Prior EN #4 Signature:	Date:

NOTE: Ticket Program Manager will make the actual determination regarding the allocation of payments to EN's requesting payment for the same outcome, milestone, or reconciliation payment under its elected payment system.

Privacy Act Statement
Collection and Use of Personal Information

Section 1148 of the Social Security Act, as amended, allows us to collect this information. Furnishing us this information is voluntary. However, failing to provide all or part of the information may prevent your successful participation in the Ticket to Work Program.

We will use the information to monitor your progress in the Ticket to Work and Self-Sufficiency Program. We may also share your information for the following purposes, called routine uses:

- Disclosure to contractors and other Federal agencies, as necessary, for the purpose of assisting SSA in the efficient administration of its programs; and
- Information may be disclosed to state or employment networks having an approved business arrangement with the Social Security Administration (SSA) to perform vocational rehabilitation services for SSA disability beneficiaries and recipients.

In addition, we may share this information in accordance with the Privacy Act and other Federal laws. For example, where authorized, we may use and disclose this information in computer matching programs, in which our records are compared with other records to establish or verify a person's eligibility for Federal benefit programs and for repayment of incorrect or delinquent debts under these programs.

A list of additional routine uses is available in our Privacy Act System of Records Notices (SORN) 60-0295, entitled Ticket-to-Work and Self-Sufficiency Program Payment Database, as published in the Federal Register (FR) on April 4, 2001, at 66 FR 17985 and 60-0300, entitled

Ticket-to-Work Program Manager Management Information System, as published in the FR on June 15, 2001, at 66 FR 32656. Additional information, and a full listing of all of our SORNs, is available on our website at www.ssa.gov/privacy.

Paperwork Reduction Act Statement - This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 10 minutes to read the instructions, gather the facts, and answer the questions. **SEND THE COMPLETED FORM TO: TICKET TO WORK, PO BOX 1433, ALEXANDRIA, VA 22313, OR FAX TO 703-893-4020.** You may send comments on our time estimate above to: SSA, 6401Security Blvd, Baltimore, MD 21235-6401. *Send only comments relating to our time estimate to this address, not the completed form.*