



Understanding Your SS-5 Application

SOCIAL SECURITY ADMINISTRATION
Application for a Social Security Card Form Approved
OMB No. 0960-0066

1	NAME <small>TO BE SHOWN ON CARD</small>	<small>First</small>	<small>Full Middle Name</small>	<small>Last</small>
	FULL NAME AT BIRTH <small>IF OTHER THAN ABOVE</small>	<small>First</small>	<small>Full Middle Name</small>	<small>Last</small>
	OTHER NAMES USED			
2	Social Security number previously assigned to the person listed in item 1		<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
3	PLACE OF BIRTH <small>(Do Not Abbreviate)</small>	<small>City</small>	<small>State or Foreign Country</small>	4
5	CITIZENSHIP <small>(Check One)</small>	<input type="checkbox"/> U.S. Citizen	<input type="checkbox"/> Legal Alien Allowed To Work	<input type="checkbox"/> Legal Alien Not Allowed To Work <small>(See Instructions On Page 3)</small>
6	ETHNICITY <small>Are You Hispanic or Latino? (Your Response is Voluntary)</small>	<input type="checkbox"/> Yes <input type="checkbox"/> No	7	RACE <small>Select One or More (Your Response is Voluntary)</small>
8	SEX	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Native Hawaiian
9	A. PARENT/ MOTHER'S NAME AT HER BIRTH	<small>First</small>	<small>Full Middle Name</small>	<small>Last</small>
10	B. PARENT/ MOTHER'S SOCIAL SECURITY NUMBER <small>(See instructions for 9 B on Page 3)</small>	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		<input type="checkbox"/> Unknown
11	Has the person listed in item 1 or anyone acting on his/her behalf ever filed for or received a Social Security number card before?			
12	<small>(If "yes" answer questions 12-13)</small>		<input type="checkbox"/> No	<input type="checkbox"/> Don't Know <small>(If "don't know," skip to question 14.)</small>
13	Name shown on the most recent Social Security card issued for the person listed in item 1		<small>First</small>	<small>Full Middle Name</small>
14	TODAY'S DATE <small>MM/DD/YYYY</small>		15 DAYTIME PHONE NUMBER <small>Area Code Number</small>	
16	MAILING ADDRESS <small>(Do Not Abbreviate)</small>		<small>Street Address, Apt. No., PO Box, Rural Route No.</small>	
17	<small>City</small>	<small>State/Foreign Country</small>	<small>ZIP Code</small>	
18	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 to my knowledge.			
18	YOUR SIGNATURE	YOUR RELATIONSHIP TO THE PERSON IN ITEM 1 IS: <input type="checkbox"/> Self <input type="checkbox"/> Natural Or Adoptive Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other <small>Specify</small>		
<small>DO NOT WRITE BELOW THIS LINE (FOR SSA USE ONLY)</small>				
<small>NPN</small>		<small>DOC</small>	<small>NTI</small>	<small>CAN</small>
<small>PBC</small>	<small>EVI</small>	<small>EVA</small>	<small>EVC</small>	<small>ITV</small>
<small>PRA</small>		<small>NWR</small>	<small>DNR</small>	<small>UNIT</small>
<small>EVIDENCE SUBMITTED</small>		<small>SIGNATURE AND TITLE OF EMPLOYEE(S) REVIEWING EVIDENCE AND/OR CONDUCTING INTERVIEW</small>		
		<small>DATE</small>		
		<small>DCL</small> <small>DATE</small>		

Required Documentation

Original Social Security Card Applications

You must provide at least two documents to prove age, identity, and U.S. citizenship or current lawful, work-authorized immigration status.

If you are not a U.S. citizen and do not have DHS work authorization, you must prove that you have a valid non-work reason for requesting a card.

NOTE: *If you are age 12 or older and have never received a Social Security number, you must apply in person.*

Replacement Social Security Card Applications

You must provide one document to prove your identity.

If you were born outside the U.S., you must also provide documents to prove your U.S. citizenship or current, lawful, work-authorized status.

Social Security Card Update Application

To change the information on your Social Security number record (i.e., a name or citizenship change, or corrected date of birth) you must provide documents to prove your identity, support the requested change, and establish the reason for the change.

For example, you may provide a birth certificate to show your correct date of birth. A document supporting a name change must be recent and identify you by both your old and new names. If the name change event occurred over two years ago or if the name change document does not have enough information to prove your identity, you must also provide documents to prove your identity in your prior name and/or in some cases your new legal name. If you were born outside the U.S. you must provide a document to prove your U.S. citizenship or current lawful, work-authorized status.

Acceptable Documentation

Evidence of Age

- Passport
- U.S. hospital record of your birth, created at the time of birth.
- Religious record established before age five showing your age or date of birth.
- Final Adoption Decree

Evidence of Identity

- U.S. driver's license
- U.S. State-issued non-driver identity card
- U.S. Passport

Evidence of U.S. Citizenship

- U.S. birth certificate
- U.S. Passport
- Consular Report of Birth
- Certificate of Citizenship (Form N-600)
- Certificate of Naturalization (Form N-400)

Evidence of Immigration Status (if applicable)

- Form I-551
- Form I-94
- Form I-766
- Certificate of Citizenship (Form N-600)
- Certificate of Naturalization (Form N-400)

If you are an international student or exchange visitor, you may need to provide additional documents, such as Form I-20, DS-2019, or a letter authorizing employment from your school and employer.

Acquiring Required Documentation

U.S. Passport Resources

Online passport application preparation assistant, this online passport wizard will prepare you to apply for a new U.S. Passport:

<http://travel.state.gov/content/passports/english/passports/apply.html>

Where and how to apply for your U.S. Passport:

<http://travel.state.gov/content/passports/english/passports/information/where-to-apply.html>

Birth Certificate Resources:

Online birth certificate copy application:

<https://www.vitalchek.com/birth-certificates>

Certificate of Citizenship (N-600) Form Online:

Online N-600 Certificate of Citizenship Application Form:

<http://www.uscis.gov/n-600>

Certificate of Naturalization (N-400) Form Online:

Online N-400 Certificate of Naturalization Application Form:

<http://www.uscis.gov/n-400>

Specific Application Requirements

Complete and sign this application LEGIBLY using ONLY black or blue ink on the attached or downloaded form using only 8 1/2" x 11" (or A4 8.25" x 11.7") paper.

SS-5 Section 4: Show the month, day, and full (4 digit) year of birth; for example, "1998" for year of birth.

SS-5 Section 5: If you check "Legal Alien Not Allowed to Work" or "Other," you must provide a document from a U.S. Federal, State, or local government agency that explains why you need a Social Security number and that you meet all the requirements for the government benefit. NOTE: Most agencies do not require that you have a Social Security number. Contact us to see if your reason qualifies for a Social Security number.

SS-5 Section 6 / 7: Providing race and ethnicity information is voluntary and is requested for informational and statistical purposes only. Your choice whether to answer or not does not affect decisions we make on your application. If you do provide this information, we will treat it very carefully.

SS-5 Section 9-B / 10-B: If you are applying for an original Social Security card for a child under age 18, you MUST show the parents' Social Security numbers unless the parent was never assigned a Social Security number. If the number is not known and you cannot obtain it, check the "unknown" box.

SS-5 Section 13: If the date of birth you show in item 4 is different from the date of birth currently shown on your Social Security record, show the date of birth currently shown on your record in item 13 and provide evidence to support the date of birth shown in item 4.

SS-5 Section 16: Show an address where you can receive your card 7 to 14 days from now.

SS-5 Section 17: WHO CAN SIGN THE APPLICATION? If you are age 18 or older and are physically and mentally capable of reading and completing the application, you must sign in item 17. If you are under age 18, you may either sign yourself, or a parent or legal guardian may sign for you. If you are over age 18 and cannot sign on your own behalf, a legal guardian, parent, or close relative may generally sign for you. If you cannot sign your name, you should sign with an "X" mark and have two people sign as witnesses in the space beside the mark. Please do not alter your signature by including additional information on the signature line as this may invalidate your application. Call us if you have questions about who may sign your application.

Submitting Your SS-5 Application

In most cases, you can take or mail this signed application with your documents to any Social Security office.

Go to <https://secure.ssa.gov/apps6z/FOLO/fo001.jsp> to find the Social Security office or Social Security Card Center that serves your area.

Any documents you mail in with your SS-5 application will be returned to you.

Application Assistance Contacts

Social Security Administration Contact Information:

You can call us toll-free at 1-800-772-1213 (TTY 1-800-325-0778).

By calling 1-800-772-1213, you can use our automated telephone services to get recorded information and conduct some business 24 hours a day. If you cannot handle your business through our automated services, you can speak to a Social Security representative between 7 a.m. and 7 p.m. Monday through Friday. Generally, you'll have a shorter wait time if you call during the week after Tuesday. If you are deaf or hard of hearing, call our toll-free TTY number, 1-800-325-0778, between 7 a.m. and 7 p.m. Monday through Friday.

Write to the Office of Public Inquiries. Please include your Social Security number or claim number whenever you write to us.

Social Security Administration
Office of Public Inquiries
1100 West High Rise
6401 Security Blvd.
Baltimore, MD 21235

Find your local office by ZIP Code:

<https://secure.ssa.gov/ICON/main.jsp>

Application Filing Service Agency Contact Information:

You may contact us for filing assistance at any time, we also offer complete filing assistance and acquisition for most documents required when filing your SS-5 application at an additional filing fee.

support@application-filing-service.com

(707) 948-6245 From 9AM to 6PM (EST) Monday Through Friday.