

PART I

How To GET A SOCIAL SECURITY CARD

13 lesson thirteen

Thirteenth (13th)
Lesson

To get a Social Security card, you must fill out a form. You get this form at a Social Security Administration Office. To find out where the office closest to you is located, you can look under "S" in the white pages of your phone book.

When you get a form, you also get directions telling you how to fill it out. You should read all the directions carefully before you begin. If you have any questions, you can call the Social Security Office.

Look at the Social Security application. You will be filling out this form by following these directions. Before you begin, there are two things you should know. First, if you do not know the answer to a question, write "unknown" in the space. Second, print your answers using a pen with dark blue or black ink.





I n s t r u c t i o n s

Section 1:

Print your name on the first line. If your name is different now from when you were born, print the full name you were given at birth on the second line of the section. The third line is for any name you have used other than the two you have already given. Do not put nicknames on this line.

Section 2:

Print the address where you want the card to be sent.

Section 3:

Check () the box that describes you.

Section 4:

Check one box.

Section 5:

Check the box that describes you. Notice the word “voluntary” at the top of this section. Voluntary means you do not have to fill in this section if you don’t want to.

Section 6:

Fill in the month, day and year in which you were born. This should all be done with numbers.

Section 7:

Fill in the age you are today.

Section 8:

In the first box, print the name of the city where you were born and the name of the state where you were born. In the box next to that, if you were not born in the United States, give the name of the country where you were born. Write whole words, not shortened forms.

Section 9:

Print the full name your mother was given at her birth on the first line of this section. On the second line, fill in your father’s full name.

Section 10:

If you were to fill out this form to get a new card because you lost yours or changed your name, you would check the box next to **YES**, and then you must fill in the rest of section 10. If you marked **NO**, then you go on to Section 11.

Section 11:

Fill in today’s date.

Section 12:

Fill in a phone number where you can be reached if the people of the Social Security office need to speak to you.

Section 13:

Sign your name the way you usually do.

Section 14:

If you have filled this form out for yourself, check the box next to self. If you have filled it out for someone else, mark the box next to other, and specify how you are related to the person you have filled out the form for.



FORM SS-5- APPLICATION FOR A SOCIAL SECURITY NUMBER CARD (Original, Replacement or Correction)

INSTRUCTIONS TO APPLICANT

Before completing this form, please read the instructions on the opposite page. Type or print, using pen with dark blue or black ink. Do not use pencil. SEE PAGE 1 FOR REQUIRED EVIDENCE.

NAA	NAME TO BE SHOWN ON CARD		First	Middle	Last
NAB	FULL NAME AT BIRTH (IF OTHER THAN ABOVE)		First	Middle	Last
1 ONA	OTHER NAME (S) USED				
STT 2	MAILING ADDRESS (Street/Apt. No., P.O. Box, Rural Route No.)				
CTY	CITY (Do not abbreviate)		STE	STATE	ZIP ZIP CODE
CSP 3	CITIZENSHIP (Check one only)		SEX 4	SEX	ETB 5 RACE/ETHNIC DESCRIPTION (Check one only) (Voluntary)
	<input type="checkbox"/> a. U.S. citizen <input type="checkbox"/> b. Legal alien allowed to work <input type="checkbox"/> c. Legal alien not allowed to work <input type="checkbox"/> d. Other (See instruction on Page 2)			<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	<input type="checkbox"/> a. Asian, Asian-American or Pacific Islander (Includes Persons of Chinese, Filipino, Japanese, Korean, Samoan, etc., ancestry or descent) <input type="checkbox"/> b. Hispanic (Includes persons of Chicano, Cuban, Mexican or Mexican-American, Puerto Rican, South or Central American, or other Spanish ancestry or descent) <input type="checkbox"/> c. Negro or Black (not Hispanic) <input type="checkbox"/> d. Northern American Indian or Alaskan Native <input type="checkbox"/> e. White (not Hispanic)
DOB 6	DATE OF BIRTH	MONTH	DAY	YEAR	AGE 7 PRESENT AGE
					PLS 8 PLACE OF BIRTH
					CITY (Do not abbreviate)
					STATE OR FOREIGN COUNTRY (Do not abbreviate)
					FCI
MNA 9	MOTHER'S NAME AT HER BIRTH		First	Middle	Last (Her maiden name)
FNA	FATHER'S NAME		First	Middle	Last
PNO 10	a. Has a Social Security number card ever been requested for the person listed in item 1?		b. Was a card received for the person listed in item 1?		
	<input type="checkbox"/> YES (2) <input type="checkbox"/> NO(1) <input type="checkbox"/> Don't Know (1)		<input type="checkbox"/> YES (2) <input type="checkbox"/> NO(1) <input type="checkbox"/> Don't Know (1)		
IF YOU CHECKED YES TO A OR B, COMPLETE ITEMS C THROUGH E; OTHERWISE GO TO ITEM 11.					
SSN	c. Enter the Social Security number assigned to the person listed in item 1.				
NLC	d. Enter the name shown on the most recent Social Security card issued for the person listed in item 1		PDB	e. Date of birth correction (See instruction 10 on page 2)	MONTH DAY YEAR
DON 11	TODAY'S DATE	MONTH	DAY	YEAR	12 Telephone number where we can reach you during the day. Please include the area code
					HOME OTHER
ASD 13	WARNING: Deliberately furnishing (or causing to be furnished) false information on this application is a crime punishable by fine or imprisonment, or both. IMPORTANT REMINDER: WE CANNOT PROCESS THIS APPLICATION WITHOUT THE REQUIRED EVIDENCE. SEE PAGE 1				
	YOUR SIGNATURE		14	YOUR RELATIONSHIP TO PERSON IN ITEM 1	
				<input type="checkbox"/> Self <input type="checkbox"/> Other (Specify) _____	
	WITNESS (Needed only if signed by mark "X")		WITNESS (Needed only if signed by mark "X")		



PART III

■ ANSWER THE FOLLOWING QUESTIONS:

1. What is your middle name?

2. What is your mailing address?

3. What is your zip code?

4. What is your mother's maiden name?

5. What race are you?

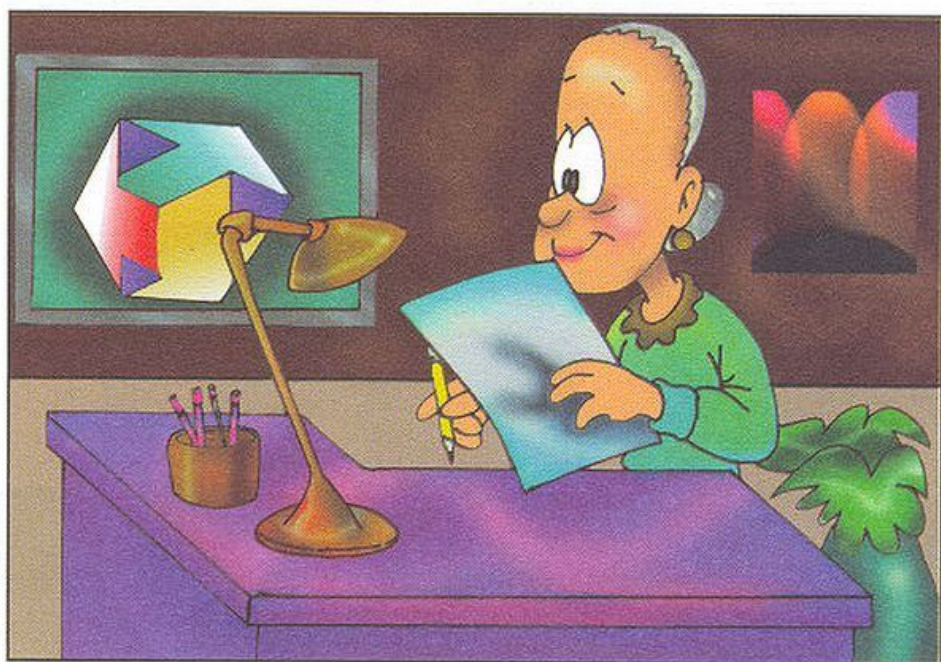
6. Put your signature on this line.

7. What is your present age?

8. What must you do to get a Social Security card?

9. What must you do before filling out a form?

10. What does "unknown" mean?



vocabulary

■ WRITE A SHORT DIALOGUE USING THE FOLLOWING WORDS:

**FORM, CAREFULLY, PRINT, MARK,
ORIGINAL, RACE, LAST NAME, DATE
OF BIRTH, WITNESS, CITIZEN**

