

APPLICATION FOR A FSM SOCIAL SECURITY NUMBER

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1 NAME TO BE SHOWN ON CARD (PLEASE PRINT)		FIRST	MIDDLE	LAST
2 FULL NAME AT BIRTH		FIRST	MIDDLE	LAST
3 MAILING ADDRESS				ZIP CODE
4 TEL. NO.	5 DATE OF BIRTH	MONTH	DAY	YEAR
			6 PRESENT AGE	7 OCCUPATION
8 CITIZENSHIP	9 PLACE OF BIRTH	CITY	STATE OR FOREIGN COUNTRY	
			10 SEX	M <input type="checkbox"/> F <input type="checkbox"/>
11 MARTIAL STATUS	Single <input type="checkbox"/> Married <input type="checkbox"/>	Widow <input type="checkbox"/> Widower <input type="checkbox"/>	Divorcee <input type="checkbox"/> Other <input type="checkbox"/>	12 PRESENT/PREVIOUS COUNTRY
13 MOTHER'S NAME AT BIRTH		FIRST	MIDDLE	LAST
14 FATHER'S NAME AT BIRTH		FIRST	MIDDLE	LAST
15 HAVE YOU EVER APPLIED BEFORE OR HAD A FSM SOCIAL SECURITY NUMBER?				YES <input type="checkbox"/> NO <input type="checkbox"/>
If 'YES' Print district in which you applied _____ Date applied _____ and Social Security No. if Known _____				
16 HAVE YOU EVER WORKED OR WERE COVERED UNDER A SOCIAL SECURITY SYSTEM OF ANOTHER COUNTRY?				YES <input type="checkbox"/> NO <input type="checkbox"/>
If 'YES' 1. Country _____ SS No. _____		2. Country _____ SS No. _____		
17 YOUR SIGNATURE		18 TODAY'S DATE	MON TH	DAY YEAR
19 DATE OF BIRTH ON DOCUMENT		DOCUMENT TYPE	DOCUMENT NO.	DATE OF DOCUMENT

NOTICE: Any Person who knowingly makes any false statement in applying for a Social Security Number is subject to a fine of not more than \$ 2,000 or imprisonment up to one year or both.

Return this card to nearest Branch Social Security Office For Office Use Only Assigned Dup issued

GNP SOCIAL SECURITY FORM - 1 / NOV - 20 - 08

INSTRUCTIONS

ONE NUMBER IS ALL YOU EVER NEED FOR SOCIAL SECURITY PURPOSES

- 1) Your Social Security Card will be typed with the name you show in Item 1. If you ever change your name, notify the Social Security Office immediately for a new card.
- 3) Show your box number at the Post Office, otherwise card will be sent by General Delivery.
- 8) If you are a naturalized citizen, indicate date when naturalized.
- 9) If not born in the Federated States of Micronesia, enter the name of country in which you were born.
- 14) If a stepfather, adopting father, or foster father is shown, include the relationship after name; for example, "Jones George, stepfather."
- 15) If you have ever before filled out an application for a Social Security number, check "yes" even if you never received your card. If you check "yes", give the name of the district and the approximate date on which you applied. Also enter you Social Security Number if you did receive the card and remember the number. You may find your number on an old tax return or wage statement.
- 17) Sign your name as usually written. Do not print unless this is your usual signature. If unable to write, make a mark witnessed by one person who can write. The witness preferably should be a person who works with the applicant and must sign this application. A parent, guardian, or custodian who completes this form on behalf of another person should sign his own name followed by his title or relationship to the applicant: for example, "Bill George, father."