

APPLICATION FOR A MARSHALL ISLANDS 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.	TELEPHONE NUMBER	5. DATE OF BIRTH	6. PRESENT AGE	7. YOUR OCCUPATION	
8.	CITIZENSHIP	9. PLACE OF BIRTH	10. SEX		[] M [] F
11.	MARITAL STATUS [] SINGLE [] MARRIED [] OTHER	12. PRESENT/PREVIOUS EMPLOYER			
13.	MOTHER'S NAME AT HER BIRTH:	First	Middle	Last	
14.	FATHER'S NAME:	First	Middle	Last	
15.	HAVE YOU EVER BEFORE APPLIED FOR OR HAD A MARSHALL ISLANDS (or TT) SOCIAL SECURITY NUMBER? [] YES [] NO If "YES" print district in which you applied _____ Date applied _____ and SS No., if known _____				
16.	HAVE YOU EVER WORKED OR WERE COVERED UNDER A SOCIAL SECURITY SYSTEM OF ANOTHER COUNTRY? [] YES [] NO If "YES": 1. Country _____ S.S. # _____ 2. Country _____ S.S. # _____				
17.	APPLICANT'S SIGNATURE:				18. DATE
19.	DATE OF BIRTH ON DOCUMENT:	DOCUMENT TYPE:	DOCUMENT NUMBER:	DOCUMENT DATE:	

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 Social Security Office. [] For Office Use Only [] Assigned [] Dup issued

Form MI-SS-1 04/92

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. It should match exactly with the name stated in your birth certificate or passport. 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 Marshall Islands, 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 (under the Trusteeship), 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 your 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".