

MAAMULKA LAMBARKA BULSHADA

Codsiga Kaarka Lambarka Bulshada

Codsiga Lambarka iyo kaarka Bulshada waa lacag la'aan.

ISTICMAAL CODSIGAN SI AAD:

- Codsato kaarta ugu horeeya ee Lambarka Bulshada.
- Codsato kaarta kuu bedela kiio hore ee Lambarka Bulshada.
- Aad dooneyso in aad bedesho saxdo macluumaadka Lambarkaaga Bulshada.

MUHIM: Waa WAAJIB in aad soo gudbisoo foomka oo si sax ah loo buuxiyey iyo caddeynta loo baahan yahay ka hor inta aynaan ka shaqeyn foomka. Waxaan ogol nahay oo kaliya aqoonsiyada asalka ah ama nuqulka ay shabad ku dhufatay hay'addii soo saartay. Nuqulka leh nootaayo oo aan hay'addii soo saartay aanay shaabad ku dhufan lama ogolaanayo. Waanu kugu soo celineynaa aqoonsiyada aad soo raaciso codsigaaga. Wixii caawinaad ah la soo xiriir 1-800-772-1213 ama soo booqo barta internetka ee www.socialsecurity.gov.

Kaarka Ugu Horeeya ee Lambarka Bulshada

Si aad u codsato kaarka ugu horeeya waa in aad noo soo gudbisaa ugu yaraan laba aqoonsi oo caddeynaya da'daada, aqoonsigaaga iyo dhalashada Mareykanka ama sharciga aad waddanka ku joogto. Haddii aadan heysan dhalashada oo aadan heysan ogolaashaha shaqada ee DHS, waa in aad acdeysaa in aad caddeysaa sabab aan shaqada la xiriirin oo aad u codsneyso lambarka. Fiiri bogga 2aad faahfaahin ku saabsan aqoonsiyada la ogol yahay:

FIIRO GAAR AH: Haddii ay da'daadu tahay 12 ama aad ka awayn tahay oo aadan waligaa yeelan lambarka bulshada, waa in aad shaqsi ahaan iu codsataa.

Kaarka Bedelka ah ee Lambarka Bulshada

Si aad u codsato kaarka bedelka ah ee, waa aad keentaa caddeyn muujineysa aqoonsigaaga. Haddii aadan ku dhalan Mareykanka, waa in aad keentaa aqoonsi muujinaya dhalashada Mareykanka ama ogolaashaha shaqada iyo sharciga aad waddanka kud egan tahay. Fiiri bogga 2aad faahfaahin ku saabsan aqoonsiyada la ogol yahay:

Wax Ka Bedelidda Macluumaadkaaga Lambarka Bulshada

Si aad wx uga bedesho macluumaadka diiwaanka lambarka bulshada (sida bedelka magaca shahaadada , ama aad saxeyso taariikhda dhalashada) waa in aad keentaa caddeyn muujineysa aqoonsiga iyo waxyaabaha taageeraya isbedelkaas aad codsaneyso iyo sababta aad dooneyso in loo bedelo. Tusaale ahaan, waxa aad keeni kartaa shahaadada dhalashada oo ku qoran tahay taariikhda saxa ah ee dhalashada. Aqoonsiyada taageeraya isbedelka magaca waa ay noqdaan kuwo dhawaanta soo baxay oo magacaagii hore iyo kan cusub ku qoran yihiin. Marka aad bedelatay magaca muddo laba sano ka hor ama macluumaadka aad so gudbisay aanu dhameystirneyn, waa in sidoo kale caddeyn muujineysa magacii hore iyo dacwad cusub oo magacaaga cusub ku qoran yahay. Haddii aadan ku dhalan Mareykanka, waa in aad keentaa aqoonsi muujinaya dhalashada Mareykanka ama ogolaashaha shaqada iyo sharciga aad waddanka kud egan tahay. Fiiri bogga 2aad faahfaahin ku saabsan aqoonsiyada la ogol yahay:

XADKA U GO'AN BEDELKA KARKA LAMBARKA BULSHADA

Sharciga 108-458 waxa uu ku xadidayaa inta jeer ee aad bedeli akroto lambarka bulshada 3 jeer snadkiiba iyo 10 jeer inta aad nooshahay. Kaararka lagu siiyo marka aad iska bedesho magaca ama kaarka shaqada laguuma xisabayo xadkaas. Waxaa kale oo suurogal in lagu siiyo tixgelin gaar ah haddii aad keento caddeyn muujineysa in hay'adaha qaarkood ay codsanayaan in aad la timaado kaar cusub.

HADDII AAD QABTO WAX SU'AAL AH

Haddii aad wax su'aal ah ka qabto foomkan ama caddeynta lagaa doonayo in aad noo soo gudbisoo, fadlan soo booqo barta internetka ee www.socialsecurity.gov si aad uga hesho macluumaad dheeraad ah iyo halka ay ku yaalaaan Xafiisyada kaararka Lambarka Bulshada. Waxaad nagala soo xiriir kartaa telefoonka lacag la'aanta ah 1-800-772-1213. Buugga telefoonada ayaad sidoo ka heli kartaa xafiiska kaararka lambarka bulshada ee kuugu dhaw.

AQOONSIYADA CADDEYN TA AH

Liiska hoos ku qoran waxa uu tusaale u noqon karaa noocyada aqoonsiga ee ay waajibka kugu tahay in aad soo raaciso codsigaaga mana ah mid ay ku dhan yihiin. Nagala soo xiriir 1-800-772-1213 haddii aadan keeni karin aqoonsiyadan.

MUHIM: Haddii aad codsigan u buuxineyso qof kale, waa in aad na tustaa caddeyn muujineysa in awood lagu siiyey in aad u saxiixi karto codsiga iyo aqoonsiyada kale iyo aoonsiga qofka aad codsiga u buuxineyso. Waxaan ogol nahay oo kaliya aqoonsiyada asalka ah ama nuqulka ay shabad ku dhufatay hay'addii soo saartay. Nuqulka leh nootaayo oo aan hay'addii soo saartay aanay shaabad ku dhufan lama ogolaanayo.

Caddeynta Da'da

Guud ahaan, waa in aad keentaa shahaadada dhalashada. Xaaladaha qaarkood, waxaa suurogal in aan ogolaano aqoonsi muujinaya da'daada. Qaar ka mid aqoonsiyada kale ee aan ogolaaneyno waxaa ka mid ah:

- Shahaadada dhalashada ee isbitaala Mareykanka ku yaal (la soo saaray xiliga dhalashada)
- Diiwaanka diinta oo la saameeyey ka hor inta aanay da'daadu gaarin shan sano ama xilliga dhalashada.
- Baasaboorka
- Amar maxkamadeed ee ogolaashaha korsashada (amarkaas waa in ay ku cad yihiin macluumaadka laga soo inguuriyey shahaadada dhalashada ee asalka ah)

Aqoonsiyada Caddeynta Noqon Kara

Waa in aad caddeyntii u dambeysay, oo aan dhicin oo muujineysa magacaaga sharciga ah. Magacaaga sharciga ah ayaa lagu qorayaa kaaarla Lambarka Bulshada. Guud ahaan, waxaanu jecel nahay aqoonsiga laga soo saaray Mareykanka waana in ay ku cad yihiin magacaaga sharciga ah IYO macluumaadka kale ee lagugu garan karo (taariikhda dhalashada, da'da iyo magaca waalidiintaada) **iy**o macluumaadka muuqaalka la socda (sawirkaaga, iyo faahfaahinta muuqaalkaaga - dhererka, indhaha iyo midabka indhaha, iwm). Haddii aad soo dirto aqoonsi sawir leh oo aadan adigu imaan xafiiska, aqoonsigaas waa inuu muujinayo macluumaadka lagugu garan karoi (sida taariikhdaada dhalashada, da'da ama magaca waalidiinta). Guud ahaan, aqoonsi aan weli la gaarin taariikhdiisii uu dhici lahaa taariikhda la soo saarayna ay tahay labadii sano ee la soo dhaafay dadka waaaweyn iyo afara sano caruurta.

Caddeynta la xiriirta aqoonsiga, waa in aad keentaa:

- Ogolaashaha wadidda gaadiidka ee Mareykanka; ama
- Aqoonsi uu gobolku bixiyey oo aan aheyn wadidda gaadiidka; ama
- Baasaboorka Mareykanka

Haddii aadan heysan mid ka mid ah aqoonsiyada kor lagu soo sheegay ama adan heli karin aqoonsi lagu bedeli kara 10 cisho gudahood, waxaa suurogal ah in aan ogolaano aqoonsi kale oo muujinaya magacaaga sharciga ah iyo macluumaadkaaga shaqsiga ahm sida kaarka ciidamada Mareykanka, Shahaadada dhalashada Mareykanka, nuqul shaabadeysan ee diiwaanka caafimaadka (rugta caafimaadka, dhakhtarka, iyo) kaarka ceymiska caafimaadka, kaarka Medicaid, aqoonsiga/diiwaanka dugsiga. caruurta yaryar, waxaan ogolaaneynaa diiwaanka caafimaadka (rugta caafimaadka, dhakhtarka, ama isbitaalka) aan ka helmo dhakhaatiirta. Waxaa suurogal ah in aan sidoo kale ogolaano amarka maxkamadeed ee korinta ama aqoonsiga dugsiga, ama diiwaanada kale ee dugsigu hayaan.

Haddii aadan haysan dhalashada waa in aad na tustaa sharciga aad waddanka ku joogtid iyo baasaborjaaga ajanbiaga oo ku qoran yihiin macluumaadka adiga kugu saabsan.

MA OGOLAAN KARNO in caddeyn aqoonsi ahaan LOO ISTICMAALO SHAHAADADA DHALASHADA, SHAHAADADA DHALASHADA EE QORAALADA ISBITAALKA, QEYBTA DAMBE EE KAARKA LAMBARKA BULSHADA AMA DIIWAANKA LAMBARKA BULSHADA.

Caddeynta Dhalashada Mareykanka

Guud ahaan, waa in aad keentaa shahaadada dhalashada ee Mareykanka ama baasaboorka. Aqoonsiyada kale ee aan ogolaan karno waa shahaadada dhalashada ee qunsuliyadaha, shahaadada dhalashada., iyo shahaadada dhalashada ee waaxda socdaalka.

Caddeynta Sharciga Aad Waddanka ku Joogto

Waa in aad keentaa aqoonsi aan weli dhicin oo ay ku siisay Wasaaradda Arrimaha Gudaha (DHS) kaasoo muujinaya sharciga aad waddanka ku joogto sida foomka I-551 ama I-766. Haddii aad ardeyda dibadda ka timaadda ama aad booqasho ku joogto, waxaa laga yaabaa in lagaaga baahdo aqoonsiyo dheeraad ah sida foomka I-120 iyo kan shaqada ee (F-1) iyo kan marti galiyaha (J-1) MA OGOLAANEYNO caddeyn muujineysa in aad codsatay warqadaha aqoonsiga. Haddii aadan heysan ogolaashaha in aad a sahaqeyn karto Mareykanka, waxaa lagu siinayaa kaarka haddii aad u dooneyso sabab sax ah oo aan shaqo xiriir la laheyn. Kaarkaaga waxaa lagu qorayaa in aan shaqo lagu ogogleyn, haddii aad shaqeysana waxa aan wargelineyana DHS. Ka akhri bogga 3aad macluumaad dheeraad ah.

SIDEE LOO BUUXIYAA CODSIGAN

Foomka u buuxi si la AKHRIN KARO oo saxiix adiga oo isticmaalaya KALIYA qain madow ama buluug ah iyo foomka aad kala baxday kombiyuutarka oo lagu daabacay 8 ½" x 11" (ama 8.25" x 11.7").

TILMAAN GUUD: Waxyaabaha foomka ku xusan waa kuwo aan sharaxaad u baahneyn halkan hoose ayaana lagu faahfaahinayaa. Lambaradu waxa ay isu taagan yihiin sida ay foomka ugu yaalaan. Haddii aad foomkan cid kale u buuxineyso, fadlan u buuxi foomka sidii adiga oo qofka kale u buuxinaya.

4. U qor taariikhda bisha, maalinta, iyo sanadka oo buuxa (afarta lambar ee sanadka dhalashada) tusaale ahaan "1998" sanadka dhalashada.

5. Haddii aad calaamadeysay "Qof aan loo ogoleyn inuu shaqeeyo" ama "Mid kale," waa in aad keentaa aqoonsi ka soo baxay dawladda dhexe, gobolka ama hay'adaha dawladda ee degaanka oo sharxaya sababta aad ugu baahan tahay Lambarka Bulshada iyo in aad ka soo baxday shuruudaha lagaaga baahan si aad u hesho macaashka dawladda. FIIRO GAAR AH: Hay'adaha intooda badan shuruud kama dhigaan in aad leedahaya Lambarka Bulshada. Nala soo xiriir haddii sababta aad dooneyso tahay mid lagu codsan karo Lambarka Bulshada.

6., 7. In aad noo sheegto qowmiyadda iyo halka aad ka soo jeedo waajib kuguma aha waxaana loo codsadaa macluumaad iyo tirakoobka kaliya. Doorashada aad doorato in aad ka jawaabto ama aadan ka jawaabin saameyn kuma yeelaneyso go'aanka aan ka gaareyno codsigaaga. Haddii aan noo soo gudbsio macluumaadka, waxaanu ka dhigeynaa qarsoodi.

9.B., 10.B. Haddii aad u codsaneyso kaarkii ugu horeeyey ee Lambarka Bulshada ilmo ay da'diisu ka yar tahay 18, waa in aad keentaa Lambarka Bulshada ee waalidka ilaa aan waalidka horey loogu sameyn Lambarka Buslahada. Haddii aan la garaneyn lambarka oo aan la heli karin, calaamadee sanduuqa "lama garanayo".

13. Haddii taariikhda dhalashada ee lambarka 4aad, ay ka duwan tahay taariikhda dhalashada ee iminka ku qoran lambarka bulshada, tus taariikhda dhgalashada ee ku qoran qodobka 13aad soona gudbi wixii caddeymo ah ee taageeraya taariikhda dhalashada ee lambarka 4aad.

16. Ku qor cinwaan aan kugu doo diri karno kaarka muddo todoba ilaa 14 cisho ah gudahood ah.

17. YAA SAXIIXI KARA CODSIGA? Haddii ay da'daadu tahay 18 sano ama ka weyn oo caqligaagu kuu dhan yahay jir ahaana aad fayow dahay oo akhrin karto oo aad buuxin karto foomka, waa in aad saxiixdaa qodobka 17aad. Haddii ay da'daadu ka yar tahay 18, adiga ayaa isu saxiixi kara ama waalidkaa ama qof mas'uul kaa ah ayaa kuu saxiixi kara. Haddii aad ka weyn tahay 18 oo aadan saxiixi karin, qof sharci ahaan mas'uul kaa ah, waalidkaa ama qof qaraabadaada ka mid ah ayaa kuu saxiixi kara. Haddii aadan magacaaga ku saxiixi kaarin, waa in aad ku qortaa calaamadda "X" laba qof oo markhaatiyaal ahna waa in ay dhinacaaga saxiixaan. Fadlan waxba haka badalin saxiixa oo ay ka mid tahay macluumaad dheeraad ah oo aad ku qorto khadka saxiixa taasoo codsigaaga baabi'ineysa. Nala soo xiriir haddii aad qabto wax su'aal ah oo ku saabsan saxiixa codsiga.

SIDEE LOO SOO GUDBIYAA CODSIGAN

Xaaladaha intooda badan, waxa aad codsiga geyn kartaa ama aad boostada ugu soo diri kartaa Xafiiska Lambarka Bulshada. Wixii aqoonsi ah ee aad noo soo dirto dib ayaan kuugu soo celineyaa. Soo booqo <https://secure.ssa.gov/apps6z/FOLO/fo001.jsp> si aad u ogaato xafiiska Lambarka Bulshada ama xarunta kaarka Lambarka Bulshada ee ku taal degaankaaga.

ILAALI LAMBARKAAGA BULSHADA IYO KAARKA

Ilaali kaarka SSN iyo lambarka si aan lagaaga xadin ama kaaga lumin. Jeebka ama boorsada haku QAADAN kaarka SSN. Ku xafid meel amaan ah oo qaado kaliya marka ay aad u baahan tahay. Sida marka aad shaqo cusub hesho, xisaab bangi furaneyso, ama aad macaash ka qaadaneysa hay'adaha dawladda. Taxadar u lahoow marka aad siineysa dadka kale, gaar ahaan marka aad telefoon, boostada ama aad email u direysa ee dadka kaaga codsada internetka.

SHACRIGA QARSOODI KA DHIGISTA

Ururinta iyo Isticmaalka Macluumaadkaaga Shaqsiga Ah

Qeybta 205(c) iyo 702 ee sharciga Lambarka Bulshada (Social Security Act), ee wax laga badalay, waxa uu awood inoo siinayaa in aan ururin karno macluumaadkaaga. Macluumaadka aad noo soo gudbisay waxa ay naga caawinayaan in lagu sameeyo Lambarka Bulshada iyo kaarka.

In aad macluumaadkaaga noo soo gudbiso waajib (qasab) kuguma aha. Hase yeeshee, haddii aadan noo soo gudbin macluumaadka aan ku weydiisaneyno waxaa suurogal ah in aan lagu siin kaarka Lambarka Bulshada.

Xaalado naadir ah ayaan u isticmaalnaa macluumaadka aad noo soo gudbisay ujeedo ka baxsan sababta aad noogu soo gudbisay oo ah in lagu siiyo Lambarka Bulshada iyo kaarka. Hase yeeshee, waxaa laga yabaa in aan u isticmaalno barnaamijyada kormeerka maamulka iyo habsami u fulinta hawlaha Lambarka Bulshada. Waxaa kale oo suurogal ah in aan macluumaadkaaga la wadaagto dad ama hay'ado kale iyada oo loo isticmaalayo sida sharcu ogol yahay oo ay ka mid yihiin laakiin aan ku koobneyn:

1. In qof kale ama hay'ad kale naga caawiso abuuritaanka waxyaabaha aad xaquuqdaada macaashka Lambarka Bulshada ama adeegga ay qabtaan;
2. U hogaansanaanta sharciyada waajibka ka dhigaya wadaagista macluumaadka ee diiwaankeena ku qoran (tusaale ahaan, Xafiiska La Xisaabtanka Dawladda, Xafiiska Maamulka Adeegga Dawladda, Keydka Macluumaadka ee Qaranka, iyo Waaxda Arrimaha Ciidamada hawlgabka ah);
3. Si aan go'aan ugagaarno in aad xaq u leedahay adeegga caafimaadka iyo barnaamijyada daryeelka dawladda dhexe, gobolka, ama heer degaan; iyo
4. In ay gacan ka geysato cilmi baarista tirakoobka, hanti dhawrka, baaritaanka fal doonayo in lagu ogaado hufnaanta iyo horumarinta barnaamijyada xafiiska

Waxaa kale oo suurogal in aan macluumaadka u gudbino la isugu barbardhigo is barbardhiga barnaamijyada kombiyuutarada. Isbarbardhiga barnaamijyada kombiyuutarada waxaa ay is barbardhigaan diiwaanada an heynta ee ay hayaan dawladda dhexe, gobol iyo hay'adaha dawladda ee degaanka. Waxaa kale oo suurogal ah in barnaamijyadaas loo adeegsado xaqiijinta sida qofku xaq ugu leeyahay barnaamijyada dawladda dhexe maamusho ee la xiriira macaashka ama lacagta la siiyey aanay sax ama xisaabah ay wax ka qaldan yihiin.

Shax dhameysitsan oo muujineysa isticmaalka kala duwan ee macluumaadka aad na siiso waxa ad ka heli kartaa Sharciga Gaarka ah ee Diiwaanka "Systems of Records Notice" 60-0058 (Diiwaanka guud ee Lambarka Bulshada (SSN) iyo codsiyada SSN). Ogeysiiskan, macluumaad dheeraad ah oo ku saabsan foomkan, iyo macluumaadka ku saabsan barnaamijyadeena, waxa aad ka heli kartaa barta internaka ee www.socialsecurity.gov ama Xafiiska Lambarka Bulshada.

Habka ururinta macluumaadka waa mid waaafaqsan sharciga 44 U.S.C. § 3507, ee wax laga bedelay qeybta 2aad ee Sharciga Yareynta Warqadaha ee 1995. Waajib kuguma aha in aad ka jawaabto ilaa lagu siiyo lambar tixraac ah oo soo saaray Xafiiska Maamulka iyo Miisaaniyadda. Waxaan qiyaaseynaa in ay qaadenysa ilaa 9,5 daqiiqo akhrinta foomkan, ururinta waxyaabaha xaqiiqada ah iyo ka jawaabista su'aalaha. Wxiii faalo ah ee ku saabsan waqtiga aan ku qiyaasnay waxa aad ku soo diri kartaan: SSA, 6401 Security Blvd., Baltimore, MD 21235-6401. **Cinwaanka waxa aad ku soo diri kartaa oo kaliya faalada ku saabsan waqtiga aan ku qiyaasnay, ee uma soo direysaan foomka aad buuxiseen.**

SOCIAL SECURITY ADMINISTRATION

Application for a Social Security Card

Form Approved
OMB No. 0960-0066

1	NAME TO BE SHOWN ON CARD	First	Full Middle Name	Last
	FULL NAME AT BIRTH IF OTHER THAN ABOVE	First	Full Middle Name	Last
	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"/>
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3	PLACE OF BIRTH (Do Not Abbreviate) City	State or Foreign Country	Office Use Only FCI	4	DATE OF BIRTH	MM/DD/YYYY	

5	CITIZENSHIP (Check One)	<input type="checkbox"/> U.S. Citizen	<input type="checkbox"/> Legal Alien Allowed To Work	<input type="checkbox"/> Legal Alien Not Allowed To Work (See Instructions On Page 3)	<input type="checkbox"/> Other (See Instructions On Page 3)
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6	ETHNICITY Are You Hispanic or Latino? (Your Response is Voluntary) <input type="checkbox"/> Yes <input type="checkbox"/> No	7	RACE Select One or More (Your Response is Voluntary)	<input type="checkbox"/> Native Hawaiian	<input type="checkbox"/> American Indian	<input type="checkbox"/> Other Pacific Islander
				<input type="checkbox"/> Alaska Native	<input type="checkbox"/> Black/African American	<input type="checkbox"/> White
				<input type="checkbox"/> Asian		

8	SEX	<input type="checkbox"/> Male	<input type="checkbox"/> Female
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9	A. PARENT/ MOTHER'S NAME AT HER BIRTH	First	Full Middle Name	Last
	B. PARENT/ MOTHER'S SOCIAL SECURITY NUMBER (See instructions for 9 B on Page 3)	<input type="text"/>	<input type="text"/>	<input type="text"/>

		<input type="checkbox"/> Unknown
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10	A. PARENT/ FATHER'S NAME	First	Full Middle Name	Last
	B. PARENT/ FATHER'S SOCIAL SECURITY NUMBER (See instructions for 10B on Page 3)	<input type="text"/>	<input type="text"/>	<input type="text"/>

		<input type="checkbox"/> Unknown
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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?	<input type="checkbox"/> Yes (If "yes" answer questions 12-13)	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know (If "don't know," skip to question 14.)
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12	Name shown on the most recent Social Security card issued for the person listed in item 1	First	Full Middle Name	Last
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13	Enter any different date of birth if used on an earlier application for a card	MM/DD/YYYY
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14	TODAY'S DATE	MM/DD/YYYY	15	DAYTIME PHONE NUMBER	Area Code	Number
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16	MAILING ADDRESS (Do Not Abbreviate)	Street Address, Apt. No., PO Box, Rural Route No.	City	State/Foreign Country	ZIP Code
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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.

17	YOUR SIGNATURE	18	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 Specify _____	

DO NOT WRITE BELOW THIS LINE (FOR SSA USE ONLY)											
NPN		DOC		NTI		CAN		ITV			
PBC	EVI	EVA		EVC		PRA		NWR	DNR	UNIT	
EVIDENCE SUBMITTED						SIGNATURE AND TITLE OF EMPLOYEE(S) REVIEWING EVIDENCE AND/OR CONDUCTING INTERVIEW					
						DATE					
						DATE					