

Social Security Administration (SSA) Forms Guide

USE THIS GUIDE AS YOU GATHER INFORMATION AND COMPLETE FORMS FOR ADULT SSI/SSDI APPLICATIONS

Information Needed Across All/Most Forms

It is important that these details are consistent across all forms!

- Applicant's name, date of birth, Social Security Number
- An address where the applicant can receive mail (*SOAR Tip: For applicants experiencing or at risk of homelessness, this may be the SOAR case worker's agency address*)
- The date of onset for disability (*SOAR Tip: We recommend using the applicant's last day of work*)

Additional Form-Specific Information

SSA-827: Authorization to Disclose Information

- If the applicant is age 12 or older, they should sign the form as the individual authorizing disclosure.
- For applicants ages 12-17, their parent or guardian should sign in the box next to the minor's signature.

SSA-1696: Appointment of Representative

- Representative's name and Representative Rep ID
- Representative's attorney status and fee eligibility (*SOAR Tip: All fees should be waived for SOAR-assisted applications*)

SSA-16: Application for Social Security Disability Insurance (SSDI)

- Current and prior marriages and the names of all children under age 18 or over 18 and disabled
- Other benefits the applicant may be applying for, such as Veterans benefits, Supplemental Security Income (SSI), Welfare, or Workers Compensation

SSA-8000: Application for Supplemental Security Income (SSI)

- The applicant's parents' names, to help with identification
- The applicant's residence address (if different than mailing), and details about current living arrangement (*SOAR Tip: If applicable, this can be "Homeless"*)
- Details about the applicant's income and resources
- Information about the receipt of or need to apply for SNAP benefits
- Prior military or other federal service and related applications for benefits

SSA-3368: Adult Disability Report

- All the physical or mental health conditions (including emotional or learning problems) that limit the applicant's ability to work
- Last grade completed in school and an estimated year of completion, as well as details about any specialized job training, including military training
- Details from all jobs (up to 5) that the applicant had in the 5 years before the application, including job title, type of business, dates worked, and approximate hours/rate of pay (if known)
- All brand name and generic over-the-counter or prescribed medications the applicant is taking (*SOAR Tip: include recent prescriptions that the applicant may not be consistently taking due to symptoms*)

- Details from all medical sources that have examined or treated the applicant for physical or mental conditions, including substance use treatment and jail/prison, even if they are not recent