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COV-01214 (09-2015)

Republic of the Philippines
SOCIAL SECURITY SYSTEM
PERSONAL RECORD
FOR ISSUANCE OF SS NUMBER

SS NUMBER
100-96304174-2

THIS FORM MAY BE REPRODUCED AND IS NOT FOR SALE. THIS CAN ALSO BE DOWNLOADED THRU THE SSS WEBSITE AT www.sss.gov.ph.
PLEASE READ THE INSTRUCTIONS AND REMINDERS AT THE BACK BEFORE FILLING OUT THIS FORM. PRINT ALL INFORMATION IN CAPITAL LETTERS AND USE BLACK INK ONLY.

PART I - TO BE FILLED OUT BY THE REGISTRANT

A. PERSONAL DATA

NAME (LAST NAME, FIRST NAME, MIDDLE NAME, SUFFIX), DATE OF BIRTH, SEX, CIVIL STATUS, NATIONALITY, RELIGION, PLACE OF BIRTH, HOME ADDRESS, MOBILE/CELLPHONE NUMBER, E-MAIL ADDRESS, TELEPHONE NUMBER, FATHER, MOTHER'S MAIDEN NAME.

B. DEPENDENT(S)/BENEFICIARY(IES)

Table with columns: SPOUSE, CHILDREN, OTHER BENEFICIARIES. Includes fields for name, date of birth, and relationship.

C. FOR SELF-EMPLOYED/OVERSEAS FILIPINO WORKER/NON-WORKING SPOUSE

SELF-EMPLOYED (SE), OVERSEAS FILIPINO WORKER (OFW), NON-WORKING SPOUSE (NWS). Includes fields for profession, foreign address, earnings, and application for membership.

D. CERTIFICATION

I certify that the information provided in this form are true and correct. (If registrant cannot sign, affix fingerprints in the presence of an SSS personnel.) Includes fields for printed name, signature, date, and fingerprints.

PART II - TO BE FILLED OUT BY SSS

BUSINESS CODE, MONTHLY SS CONTRIBUTION, START OF PAYMENT, WORKING SPOUSE'S MSC (FOR MSC), APPROVED MSC, FLEXI-FLND APPLIC (FOR OFW), RECEIVED & PROCESSED BY, REVIEWED BY.