RESEARCH FOUNDATION CUNY

RESEARCH FOUNDATION
of The City University of New York
230 West 41st Street
New York, NY 10036-7207

Social Security Declaration Form

This form is to be filled out by employees who do not have their social security cards available at the time of hire. This form is not meant to satisfy the requirement for the Employment Eligibility Verification Form (I-9) and must not be used for that purpose.

Instructions

In order for the Research Foundation to properly credit your social security account with the Department of Health & Human Services, Social Security Administration, please fill in the following information.

Print your name as it appears on your Social Security Card.

Name _____

Print your Social Security Number as it appears on your Social Security Card.

Number ____ ____ ____ - ____ ____ - ____ ____ ____ ____

Signature _____

Date _____

To Apply for a New or Replacement Social Security Card

Visit your local Social Security Office, call 1-800-772-1213, or apply online at https://www.ssa.gov/.

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