## **Applicant's No SSN Statement**

To whom it may conc	rn:	
Ι	(print full name) declare under penalty of perju	ıry
under the laws of the	nited States of America that the following is true and	
correct:		
	(full name of father/parent) SSN	
	□ N.A.	
	(full name of mother/parent) SSN	
	□ N.A.	
I have never been issu Administration.	d a social security number by the Social Security	
Executed on:	(DATE)	
Signature:		
	s indicated on the identification)	