

APPLICATION ADDENDUM

APPLICATION NUMBER: _____

A. I have read both the ***Personal Information Notice*** and ***The Wage Match Notice*** on the back of this form

1.	2.	3.	4.
5.	6.	7.	8.

B. I authorize the use of my Social Security number for the purposes stated in The Wage Match Notice. I verify that the number stated below is my Social Security Number. (Please Sign Below)

First Name Last Name	Relationship to Head of Household	Date of Birth	Social Security Number	Signature Authorizing Use of My SSN for Wage Match
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				