Start With What You Know

Five printable pages for organizing information you may want to refer to while preparing a disability application or answering a later request.

02 Provider Notes

Keep one treatment location together with the details you know and the details you still need to check.

03 Work Duties

Describe what you actually did in one job, beyond its title. Print another copy for another job.

04 Daily Activities

Describe one activity in your own words, including variation or help when relevant.

05 Questions And Follow-Up

Keep missing details and questions in one place instead of guessing.

How To Use These Sheets

Choose the sheet you need; the packet is optional and is not a complete application checklist.

Write what you know. Separate uncertain details from facts you have confirmed.

Keep completed notes private. These downloads are not sent back to Glassman.

Use the actual SSA application or requested form and its current instructions.

SSA says not to put off applying because requested information is missing. Read the official Adult Disability Starter Kit for the complete checklist.

Official Starter Kit: ssa.gov/pubs/EN-64-110.pdf

Sources checked October 4, 2026. General information; no outcome prediction.

Provider Notes

Use one page per provider or treatment location. Keep unknown details in the follow-up area. This is an original organization aid, not a medical record request.

Provider Or Treatment Location

Contact Details Available To You

Treatment Dates You Know

Where You Found These Details (For Your Own Reference)

What Is Still Uncertain?

One Follow-Up Question Or Next Step

Source context: SSA Adult Disability Starter Kit, pages 1-2. ssa.gov/pubs/EN-64-110.pdf

Work Duties

Use one page per job. These prompts help you organize personal notes; follow the questions and time period on the actual form you receive.

Job Title, Employer, And Dates You Know

Tasks You Actually Did During A Typical Workday

Tools, Equipment, Or Interactions You Want To Describe

Physical Tasks You Want To Clarify In Your Own Words

Details To Check Before Answering The Actual Form

Source context: SSA Work History Report, pages 1, 4-5. ssa.gov/forms/ssa-3369.pdf

Daily Activities

Use one page per activity. Describe your own experience without exaggerating or treating one unusual day as every day. This sheet does not score your abilities.

Activity You Want To Describe

What You Do Yourself

Help You Receive And What The Other Person Does

Timing, Breaks, Or Variation You Want To Explain

Changes Or Uncertain Details To Discuss

Source context: SSA Function Report, pages 1, 4-5. ssa.gov/forms/ssa-3373-bk.pdf

Optional personal notes. Not an SSA form, application, or eligibility assessment.

Questions And Follow-Up

An optional place for loose ends. This is your planning list, not an additional filing requirement. You do not need to finish it before applying.

QUESTION 1

What Do I Need To Check?

Where Could I Check Or Whom Could I Ask?

What Did I Learn?

QUESTION 2

What Do I Need To Check?

Where Could I Check Or Whom Could I Ask?

What Did I Learn?

QUESTION 3

What Do I Need To Check?

Where Could I Check Or Whom Could I Ask?

What Did I Learn?

For help with a requested SSA report, use the contact instructions supplied with that report. Keep these notes with your own records.

Help instructions: ssa.gov/forms/ssa-3369.pdf and ssa.gov/forms/ssa-3373-bk.pdf, page 1.