

**SSP-MOE DATA REPORT - SECTION 2
DISAGGREGATED DATA COLLECTION FOR FAMILIES NO LONGER RECEIVING
ASSISTANCE UNDER THE STATE SEPARATE PROGRAM**

GENERAL INFORMATION

1. State FIPS Code 2. County FIPS Code 3. Reporting Month 4. Stratum

		Year Y Y Y Y	Month M M	
--	--	----------------------------	---------------------	--

FAMILY LEVEL DATA

5. Case Number - State Separate Program 6. Zip Code 7. Disposition 8. Reason for Closure

--	--	--	--

ASSISTANCE RECEIVED BY THE FAMILY

9. Received Subsidized Housing 10. Received Medical Assistance 11. Received Food Stamps 12. Received Subsidized Child Care

--	--	--	--

PERSON LEVEL DATA

Person	13. Family Affiliation	14. Date of Birth (Age)	15. Social Security Number
		Y Y Y Y M M D D	
1			- -
2			- -
3			- -
4			- -
5			- -
6			- -
7			- -
8			- -

Person

13. Family Affiliation

14. Date of Birth (Age)

15. Social Security Number

			-			-			
			-			-			
			-			-			
			-			-			
			-			-			
			-			-			
			-			-			
			-			-			
			-			-			

9
10
11
12
13
14
15
16

16. Race/Ethnicity

Ethnicity

Race

Person

A. Hispanic or Latino

B. American Indian of Alaska Native

C. Asian

D. Black or African American

E. Native Hawaiian or Pacific Islander

F. White

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16

18. Received Disability Benefits

Person	17. Gender	A. Received Federal Disability Insurance Benefits - OASDI	B. Received Benefits Based on Federal Disability Status	C. Received Aid Under Title XIV-APDT	D. Received Aid Under Title XVI-AABD	E. Received Aid Under Title XVI-SSI	19. Marital Status
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							

Person	20. Relationship to Head of Household	21. Parent with Minor Child in the Family	22. Needs of a Pregnant Woman	23. Educational Level	24. Citizenship / Alienage	25. Employment Status
1						
2						
3						
4						
5						
6						
7						
8						

Person	20. Relationship to Head of Household	21. Parent with Minor Child in the Family	22. Needs of a Pregnant Woman	23. Educational Level	24. Citizenship / Alienage	25. Employment Status
9						
10						
11						
12						
13						
14						
15						
16						

AMOUNT OF INCOME, BY TYPE

Person	26. Amount of Earned Income	27. Amount of Unearned Income
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		