Please review the questions that will be included on the Annual Performance Outcome Report (APOR) for the January 1, 2023 – December 31, 2023, reporting period. You must complete the APOR in one sitting. Reviewing the questions prior to beginning the questionnaire will allow you to research and prepare your answers as needed. If you have questions about the APOR, email SSAENAPOR@yourtickettowork.ssa.gov.

Please note, this document IS NOT the APOR questionnaire that you must return to the Social Security Administration's Ticket Program Manager for the Ticket to Work Program. Your EN's Signatory Authority will receive the link to complete the APOR via email on January 29, 2024.

NOTE: The 2024 APOR only collects data for Employment Networks (EN) active as of January 1, 2023. You must complete an APOR for each PID number (formally your DUNS number) your EN had as an approved business model for as of January 1, 2023. Your EN is not required to complete a separate APOR for any business model(s) acquired in 2023.

General Questions

1. Please provide your Employment Network (EN) Provider Identification (PID) number. The PID is a 9-digit number assigned to your EN at the time of Ticket Program Agreement (TPA) award.
   - PID- _ _ _ _ _ _ _ _ _

2. Please provide the following information concerning the individual completing the APOR for your EN:
   - Name:
   - Job Title:
   - Email Address:
   - Direct Contact Number:

3. What is your Social Security approved Ticket to Work Business Model?
   NOTE: For those ENs with multiple business models, make sure you select the business model associated with the PID in Question 1 above.

   - Traditional EN (EN that provides employment services and other support services directly to the Ticketholder)
   - Consumer Directed Services EN (EN that reimburses the Ticketholder for employment-related services purchased by the Ticketholder)
   - Employer EN (EN that primarily employs Ticketholders for which it has assigned Tickets)
   - Administrative EN (EN that serves as the EN of record for a network of service providers who combine their resources to provide services to Ticketholders)
     Please specify how many provider affiliates you have: _____

4. Is your EN an approved State Vocational Rehabilitation Agency vendor?
   - Yes
   - No

5. Select the organization type that best describes your EN:
   - AbilityOne Program
   - American Indian Vocational Rehabilitation Agency (AIVR) or Another Organization Serving Indigenous Peoples
   - Center for Independent Living (CIL)
   - Disability Services Representative Organization [An organization that provides representation (including applying, monitoring progress, gathering evidence, and attending administrative hearings) to individuals to obtain Social Security benefits approval]
   - Easterseals Industries Organization
   - Educational Institution – General
   - Educational Institution – Historically Black Colleges and Universities (HBCU)
   - Educational Institution – Hispanic-Serving Institution (HSI)
   - Goodwill Industries Organization
   - Mental Health Care Provider or Other Healthcare Provider
   - Project SEARCH Program
   - State or Local Government Agency (non-SVRA)
   - State Workforce Agency (SWA)/ American Job Center (AJC)/ Local Workforce Development Board (LWDB)
   - The Arc Chapter
   - United Cerebral Palsy (UCP) Affiliate
   - Veterans Services
   - Other For-Profit Organization (Please specify below)
   - Other Non-Profit Organization (Please specify below)

   If Other For-Profit or Non-Profit, please specify: _____

6. Does your EN specifically target one or more of the following underserved populations? (Select all that apply)
   - Members of religious minorities (Individuals who belong to communities that face discrimination based on their religion)
   - Members of the LGBTQIA+ community (Individuals who belong to communities that face discrimination based on sex, sexual orientation, and gender identity (including lesbian, gay, bisexual, transgender, queer, gender non-conforming, non-binary, LGBTQ+ persons))
   - Persons of color (Individuals who belong to communities of color, such as Black and African American, Hispanic and Latino, Native American, Alaska Native and Indigenous, Asian American, Native Hawaiian and Pacific Islander, Middle Eastern, and North African persons)
   - Persons otherwise adversely affected by persistent poverty (Individuals who have income under the poverty line established by the Director of the Office of Management and Budget and revised by the Secretary. See U.S. Federal Poverty Guidelines)
   - Persons who live in rural areas (Individuals who live in an area other than an area within a metropolitan statistical area or within the outer boundary of any city or town having a population of 20,000 or more)
   - Transition aged youth (Individuals between the ages of 14 and 25)

- U.S. Military Veterans (Individuals who have served in the military forces and who were discharged or released under conditions other than dishonorable)
- None of the above

7. Is your EN operated by a Sole Proprietor (i.e., an EN who is owned and operated by one person)?
   - Yes
   - No

8. How many Ticketholder service locations does your EN currently have?
   - N/A, Virtual Only
   - Number of Service Locations: _____

9. How do you prefer to list the way your EN provides services to Ticketholders in the "Find Help" tool on www.choosework.ssa.gov?
   - Virtual
   - In-person
   - Both

10. Does your EN meet one or more of the following criteria? (Select all that apply)
    - At least 51% women owned
    - At least 51% racial minority owned
    - At least 51% Veteran owned
    - At least 51% owned by a person with a disability as defined by the Americans with Disabilities Act (For the definition, please see https://www.ada.gov/cguide.htm#anchor62335)
    - Eligible for the Small Business Administration's Historically Underutilized Business Zones (HUBZone) program (To verify the qualifications for the HUBZone program, please visit SBA's HUBZone page)
    - None of the above

Staffing Questions

11. Have all employees (including volunteers and interns) working under the TPA who access or handle Personally Identifiable Information (PII) obtained a favorable suitability determination?
    - Yes
    - No

12. Within the past year have you notified SSA of any employees (including volunteers and interns) who received a favorable suitability determination and are no longer working under the TPA?
    - Yes
    - No

EN Service-Related Questions

13. Does your EN or provider affiliates have experience serving clients of any of the following populations? (Select all that apply)
   - Youth in Transition
   - Veterans
   - Clients with physical impairments
   - Clients with hearing impairments
   - Clients with visual impairments
   - Clients with cognitive impairments (e.g., traumatic brain injury (TBI), autism, intellectual disabilities, learning disabilities such as dyslexia and attention deficit disorder (ADD))
   - Clients with psychiatric disorders or mental behavioral impairments (e.g., anxiety, bipolar disorder, depression, schizophrenia)
   - None of the above

14. Does your EN or provider affiliates have experience serving clients pursuing self-employment?
   - Yes
   - No

15. Does your EN explain Timely Progress Review (TPR) expectations to Ticketholders?
   - Yes
   - No

16. Does your EN offer alternative formats or special language services? (Select all that apply)
   - Braille or large print materials
   - Staff fluent in sign language or sign language interpreters (please specify below)
   - Staff fluent in languages other than English or interpreters for languages other than English (please specify below)
   - Materials in languages other than English (please specify below)
   - None of the above

   Please specify language(s): _____

17. What services does your EN or provider affiliates offer Ticketholders? (Select all that apply)
   - Career planning/ counseling
   - Job accommodations
   - Job coaching/ training/ development
   - Job placement assistance (e.g., interview preparation and filling out applications)
   - Direct job placement
   - Ongoing employment support/ job retention
   - Resume writing
   - Transportation
   - Assist Ticketholder to report their wages
   - Other (please specify) _____