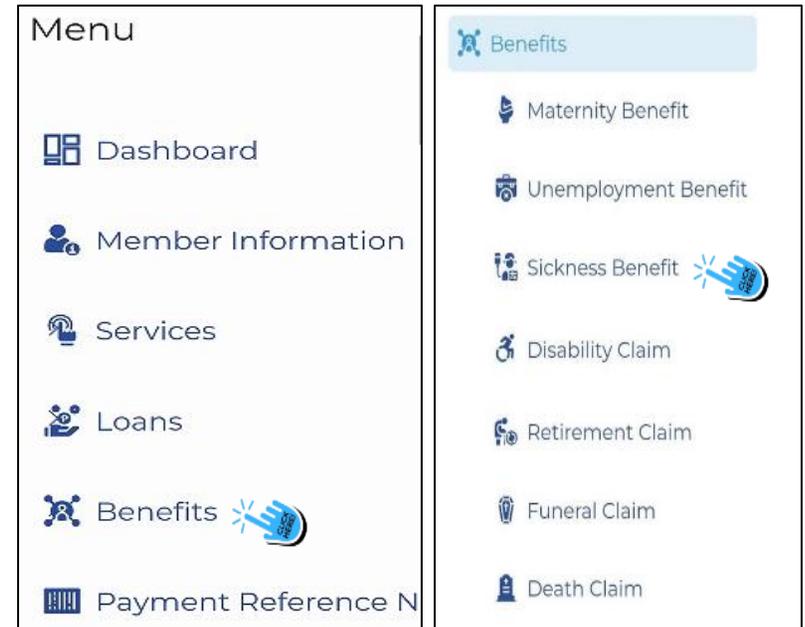


Sickness Benefits

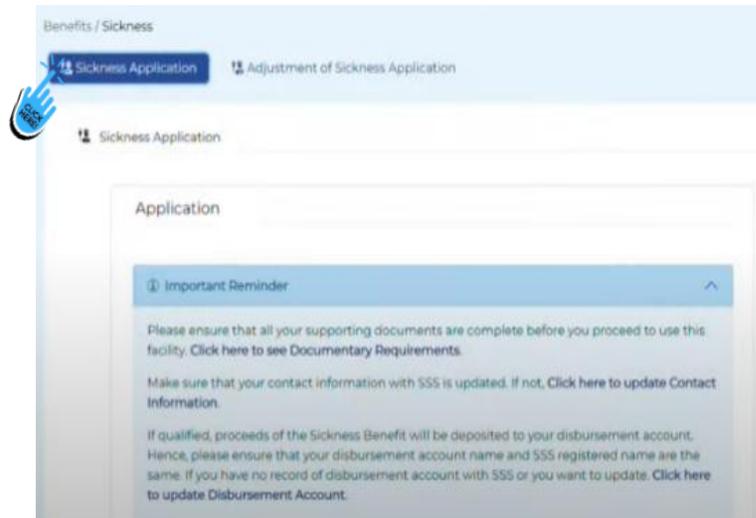
1. Pagka-login sa inyong account, i-click ang tatlong guhit sa kaliwang bahagi o menu button.



2. I-click ang "Benefits" at "Sickness Benefit".



3. I-click ang **"Sickness Application"**.



4. Sagutan ang mga hinihinging impormasyon at i-click ang **"Next"**.

A screenshot of the continuation of the sickness application form. It contains several input fields and questions:

- * Start of Sickness: 04/07/21
- * Date of Discharge: 04/30/21
- * Confinement: Radio buttons for Home, Hospital (selected), and (Still Confined).
- * No. of Days: (Empty field)
- * License No.: (Empty field)
- * Physician is from abroad: Radio buttons for Physician is from abroad (selected) and Dentist.
- * Is this Work-Related?: Radio buttons for Yes and No (selected).
- * Were you an employed member at the time of Sickness?: Radio buttons for Yes and No (selected).
- Disbursement Accounts: Radio buttons for BDO UNIBANK, INC. (selected) and PHILIPPINE NATIONAL BANK.

A blue hand cursor icon is pointing to the "Next" button at the bottom right of the form.

5. I-attach ang mga kinakailangang dokumento at i-click ang **"Next"**.

The screenshot shows the 'Supporting Documents' step of a four-step process. The steps are: 1. Apply (Sickness Application Details), 2. Supporting Documents (Upload Documentary Requirements), 3. Review (Review the supplied data), and 4. Completed (Sickness Application). A blue instruction box states: 'Attach readable colored image/s in JPG or PDF format. Maximum file size is 3MB.' There are two document upload sections: 'MEDICAL CERTIFICATE' and 'HOSPITAL/MEDICAL RECORDS'. Each section has a 'Drop files here or click to upload.' area and specifies 'File Format: JPG / PDF' and 'Maximum size: 3 MB'. A blue hand icon is pointing to the 'Next' button at the bottom right.

6. I-review ang iyong impormasyon.

The screenshot shows the 'Review' step of the four-step process. A yellow instruction box says: 'Kindly review carefully the information that has been provided.' Below is a form with the following fields and values:

Start of Sickness	September 12, 2024
Confinement Location	Home
No. of Days Claimed	5
License No. of Attending Physician	1234
Work-Related	No
Employed member at the time of Sickness	No
Disbursement Account	GCASH -

Below the form is a section titled 'ATTACHED DOCUMENTARY REQUIREMENTS' with two entries: 'Medical Certificate' (ID PICTURE) and 'Hospital/Medical records' (ID PICTURE.jpg). Each entry has a blue hand icon pointing to a 'View' button.

7. I-click ang checkbox na "Certification" bilang patunay na totoo at tama ang iyong mga impormasyong inilagay, at pindutin ang "Next".

Certification



I certify that all information and documents provided are true and correct and I understand that I shall be held liable under all circumstances for any false information, misrepresentation and fraud in my application or request.

I further hereby authorize the SSS to verify all the information and documents provided with all government agencies (e.g. Philippine Statistics Authority, Local Civil Registry, National Bureau of Investigation, Department of Social Welfare and Development, Local Government Unit, Medical Institutions, etc.) including financial institutions. In the event that the said information and documents turn out to be false, incorrect or fraudulent, I shall solely suffer the loss without prejudice to the filing of appropriate legal action(s) against me, including collection of money and/or damages from my SSS benefits, and thereby exempt the SSS, its officials and employees from any liability, suit or legal action of whatever nature, for any transaction found to be fraudulent and/or illegal.

I agree that the information (personal and/or sensitive personal data as provided under the Data Privacy Act of 2012) collected through this form/module shall be used and retained by SSS for the processing of benefits, claims, and loans, for the establishment, exercise or defense of SSS' legal claims and to reestablish or continue SSS' operations in the event of disaster.

Lastly, I agree that the SSS may share my information with other government agencies such as Philhealth, Pag-IBIG, PSA, PhilPost, DSWD, LCU, Medical Institutions, DOLE, POLO, POEA or with partner private companies such as banks, collecting agents or IT solutions contractors, through a data sharing agreement/contract/data consent, to provide efficient and effective service.

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8. Congratulations! Matagumpay na naisumite ang iyong Sickness Benefits.

 You have successfully submitted your Sickness Benefit Application to SSS on **March 20, 2025 10:23 AM.**

Please take note of your transaction details below:

- Transaction Number:

You will receive an e-mail on the status of your application upon evaluation/review of your claim and uploaded supporting document/s.

[Done ✓](#)

