

# APPLICATION FOR MARRIAGE LICENSE



License Number (For Office Use Only)
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<b>Partner A</b>	NAME - First			Middle			Last			Last Name on Birth Record				
	RESIDENCE - Street Address				City or Town				County			State		
	DATE OF BIRTH (mm/dd/yy)				AGE		GENDER		BIRTHPLACE (State/Country)			Social Security Number		
	PARENT'S NAME (First, Middle, Last, Last Name at Birth)							ADDRESS				BIRTHPLACE (State/Country)		
	PARENT'S NAME (First, Middle, Last, Last Name at Birth)							ADDRESS				BIRTHPLACE (State/Country)		
	NUMBER OF THIS MARRIAGE:		(First, Second, etc. Specify)		If prior marriage or civil union, complete next sections →		Specify How Ended (Dissolution, Divorce, Death, etc.)		Specify When (mm/dd/yy)		Specify Where (County & State)			
	<b>Vital Statistics</b>													
	Race (e.g. American Indian, Black, White, etc.)			If Hispanic, please specify (Cuban, Mexican, etc.)				Education			Elementary or Secondary		College	
	Usual Occupation						Indicate highest grade completed:							
	<b>Partner B</b>	NAME - First			Middle			Last			Last Name on Birth Record			
RESIDENCE - Street Address				City or Town				County			State			
DATE OF BIRTH (mm/dd/yy)				AGE		GENDER		BIRTHPLACE (State/Country)			Social Security Number			
PARENT'S NAME (First, Middle, Last, Last Name at Birth)							ADDRESS				BIRTHPLACE (State/Country)			
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NUMBER OF THIS MARRIAGE:		(First, Second, etc. Specify)		If prior marriage or civil union, complete next sections →		Specify How Ended (Dissolution, Divorce, Death, etc.)		Specify When (mm/dd/yy)		Specify Where (County & State)				
<b>Vital Statistics</b>														
Race (e.g. American Indian, Black, White, etc.)			If Hispanic, please specify (Cuban, Mexican, etc.)				Education			Elementary or Secondary		College		
Usual Occupation						Indicate highest grade completed:								
IF PARTIES ARE RELATED TO EACH OTHER - SPECIFY RELATIONSHIP														