

MARRIAGE APPLICATION WORKSHEET

GROOM/ PARTNER A

FIRST NAME	MIDDLE NAME	LAST NAME	LAST NAME ON BIRTH CERT
RESIDENCE-STREET ADDRESS		CITY	STATE
		COUNTY	
DATE OF BIRTH (MO/DA/YR)	AGE	SEX	BIRTHPLACE (STATE OR COUNTRY)
		SOCIAL SECURITY NUMBER	OCCUPATION
			HISPANIC ORIGIN? Y <input type="checkbox"/> N <input type="checkbox"/>
RACE (e.g. WHITE, BLACK, AMERICAN INDIAN)	EDUCATION (Primary) (NUMBER OF YEARS COMPLETED)	COLLEGE	# OF THIS MARRIAGE
			IF YES SPECIFY
<hr/>			
MOTHERS FIRST NAME	MIDDLE NAME	MAIDEN NAME	ADDRESS
		CITY, ST	BIRTHPLACE (STATE OR COUNTRY)
FATHERS FIRST NAME	MIDDLE NAME	LAST NAME	ADDRESS
		CITY, ST	BIRTHPLACE (STATE OR COUNTRY)

BRIDE/ PARTNER B

FIRST NAME	MIDDLE NAME	LAST NAME	LAST NAME ON BIRTH CERT
RESIDENCE-STREET ADDRESS		CITY	STATE
		COUNTY	
DATE OF BIRTH (MO/DA/YR)	AGE	SEX	BIRTHPLACE (STATE OR COUNTRY)
		SOCIAL SECURITY NUMBER	OCCUPATION
			HISPANIC ORIGIN? Y <input type="checkbox"/> N <input type="checkbox"/>
RACE (e.g. WHITE, BLACK, AMERICAN INDIAN)	EDUCATION (Primary) (NUMBER OF YEARS COMPLETED)	COLLEGE	# OF THIS MARRIAGE
			IF YES SPECIFY
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MOTHERS FIRST NAME	MIDDLE NAME	MAIDEN NAME	ADDRESS
		CITY, ST	BIRTHPLACE (STATE OR COUNTRY)
FATHERS FIRST NAME	MIDDLE NAME	LAST NAME	ADDRESS
		CITY, ST	BIRTHPLACE (STATE OR COUNTRY)

PHONE NUMBER _____

IF PARTIES ARE RELATED TO EACH OTHER-SPECIFY RELATIONSHIP