**DATE OF APPLICATION**: _____

**DATE OF WEDDING**: _____
**WEDDING LOCATION:** _____

**PARENTAL CONSENT**
Groom Bride Spouse
**JUDGE'S CONSENT**
Groom Bride Spouse

**State of Connecticut**
**Department of Public Health**
# MARRIAGE LICENSE WORKSHEET
**(REV. 11.08)**

***LICENSE PAID***
**YES NO**

| ***BRIDE/ GROOM/ SPOUSE*** | | | | ***BRIDE/ GROOM/ SPOUSE*** | | | |
|---|---|---|---|---|---|---|---|
| NAME (First) (Middle) (Last) | | | | NAME (First) (Middle) (Last) | | | |
| SEX | DATE OF BIRTH (Mo., Day, Year) | | AGE | SEX | DATE OF BIRTH (Mo., Day, Year) | | AGE |
| BIRTHPLACE | EDUCATION (No. Yrs. Completed) GRADES 1-8 | GRADES 9-12 | COLLEGE (1-5+) | BIRTHPLACE | EDUCATION (No. Yrs. Completed) GRADES 1-8 | GRADES 9-12 | COLLEGE (1-5+) |
| RESIDENCE (No. and Street) | | | | RESIDENCE (No. and Street) | | | |
| CITY OR TOWN | COUNTY | STATE | | CITY OR TOWN | COUNTY | STATE | |
| RACE | SUPERVISION OR CONTROL BY GUARDIAN OR CONSERVATOR ☐ YES ☐ NO | | | RACE | SUPERVISION OR CONTROL BY GUARDIAN OR CONSERVATOR ☐ YES ☐ NO | | |
| FATHER'S NAME | | | | FATHER'S NAME | | | |
| FATHER'S BIRTHPLACE (State or Foreign Country) | MOTHER'S BIRTHPLACE (State or Foreign Country) | | | FATHER'S BIRTHPLACE (State or Foreign Country) | MOTHER'S BIRTHPLACE (State or Foreign Country) | | |
| MOTHER'S MAIDEN NAME | | | | MOTHER'S MAIDEN NAME | | | |
| NO. OF THIS MARRIAGE | NO. OF CIVIL UNIONS | IF PREVIOUSLY IN MARRIAGE OR CIVIL UNION, LAST RELATIONSHIP WAS 1.☐MARRIAGE 2.☐CIVIL UNION | | NO. OF THIS MARRIAGE | NO. OF CIVIL UNIONS | IF PREVIOUSLY IN MARRIAGE OR CIVIL UNION, LAST RELATIONSHIP WAS 1.☐MARRIAGE 2.☐CIVIL UNION | |
| LAST RELATIONSHIP ENDED BY: 1.☐DEATH 2.☐DISSOLUTION 3.☐ANNULMENT 4.☐PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER | | | | LAST RELATIONSHIP ENDED BY: 1. ☐DEATH 2.☐DISSOLUTION 3. ☐ANNULMENT 4.☐PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER | | | |
| SOCIAL SECURITY # OF BRIDE/GROOM/SPOUSE | | | | SOCIAL SECURITY # OF BRIDE/GROOM/SPOUSE | | | |

***OFFICIATOR INFORMATION***

**OFFICIATOR'S NAME** **(FIRST)** **(LAST)**

**OFFICIATOR'S ADDRESS** **OFFICIATOR'S PHONE NUMBER**:

**TOWN WHERE MARRIAGE CEREMONY WILL BE PERFORMED:** **DATE OF MARRIAGE**:

**BRIDE/GROOM/SPOUSE DAYTIME CONTACT #:** _____