

**State of Connecticut  
Department of Public Health  
Marriage License Worksheet**

**NAME OF TOWN WHERE CEREMONY WILL TAKE PLACE:** \_\_\_\_\_

**DATE WHEN CEREMONY WILL TAKE PLACE:** \_\_\_\_\_

Guidance for Each Row on backside	SPOUSE ONE				SPOUSE TWO						
	Applicant's Phone Number:				Applicant's Phone Number:						
<b>A</b> <b>Applicant Info</b>	FULL NAME (First) (Middle) (Last) (Suffix)				FULL NAME (First) (Middle) (Last) (Suffix)						
<b>B</b> <b>Applicant Info</b>	SEX	DATE OF BIRTH(MM/DD/YYYY)	AGE	BIRTHPLACE(US State or Foreign Country)	SEX	DATE OF BIRTH(MM/DD/YYYY)	AGE	BIRTHPLACE(US State or Foreign Country)			
<b>C</b> <b>Applicant Info</b>	SUPERVISION OR CONTROL OF A CONSERVATOR <input type="checkbox"/> YES <input type="checkbox"/> NO		EDUCATION (Check the Highest Level Completed) <input type="checkbox"/> 12th Grade or less, no Diploma <input type="checkbox"/> Bachelors <input type="checkbox"/> High School Graduate/GED Completed <input type="checkbox"/> Masters <input type="checkbox"/> Associates <input type="checkbox"/> Doctorate or Professional degree		SUPERVISION OR CONTROL OF A CONSERVATOR <input type="checkbox"/> YES <input type="checkbox"/> NO		EDUCATION (Check the Highest Level Completed) <input type="checkbox"/> 12th Grade or less, no Diploma <input type="checkbox"/> Bachelors <input type="checkbox"/> High School Graduate/GED Completed <input type="checkbox"/> Masters <input type="checkbox"/> Associates <input type="checkbox"/> Doctorate or Professional degree				
<b>D</b> <b>Applicant Info</b>	RESIDENCE (# and Street Name)				RESIDENCE (# and Street Name)						
<b>E</b> <b>Applicant Info</b>	CITY/TOWN		COUNTY	US STATE (Or Foreign Country)	CITY/TOWN		COUNTY	US STATE (Or Foreign Country)			
<b>F</b> <b>Parent Info</b>	FATHER/PARENT FULL NAME (FIRST, MIDDLE, LAST NAME(s) PRIOR TO 1ST MARRIAGE, Suffix (ex. Jr., Sr., II, III, etc.))				FATHER/PARENT FULL NAME (FIRST, MIDDLE, LAST NAME(s) PRIOR TO 1ST MARRIAGE, Suffix (ex. Jr., Sr., III, etc.))						
<b>G</b> <b>Parent Info</b>	MOTHER/ PARENT FULL NAME (FIRST, MIDDLE, LAST NAME(s) PRIOR TO 1ST MARRIAGE, Suffix (ex. Jr., Sr., II, III, etc.))				MOTHER/ PARENT FULL NAME (FIRST, MIDDLE, LAST NAME(s) PRIOR TO 1ST MARRIAGE, Suffix (ex. Jr., Sr., II, III, etc.))						
<b>H</b> <b>Parent Info</b>	FATHER/PARENT BIRTHPLACE (US State or Foreign Country)		MOTHER/PARENT BIRTHPLACE (US State or Foreign Country)		FATHER/PARENT BIRTHPLACE (US State or Foreign Country)		MOTHER/PARENT BIRTHPLACE (US State or Foreign Country)				
<b>I</b> <b>Applicant Info</b>	# OF THIS MARRIAGE/ CIVIL UNION	LAST RELATIONSHIP (MARRIAGE/CIVIL UNION) END BY: a. <input type="checkbox"/> DEATH b. <input type="checkbox"/> DISSOLUTION			c. <input type="checkbox"/> ANNULMENT d. <input type="checkbox"/> PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER		# OF THIS MARRIAGE/ CIVIL UNION	LAST RELATIONSHIP (MARRIAGE/CIVIL UNION) END BY: a. <input type="checkbox"/> DEATH b. <input type="checkbox"/> DISSOLUTION		c. <input type="checkbox"/> ANNULMENT d. <input type="checkbox"/> PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER	
<b>J</b> <b>Applicant Info</b>	SOCIAL SECURITY NUMBER – SPOUSE ONE				SOCIAL SECURITY NUMBER – SPOUSE TWO						
<b>ENTER OFFICIANT INFORMATION</b>	OFFICIANT'S FULL NAME (FIRST, MIDDLE, LAST, SUFFIX)										
	OFFICIANT'S FULL MAILING ADDRESS (#, Street Name, City/Town, State, Zip Code, Country)										
	OFFICIANTS PHONE NUMBER				TOWN WHERE MARRIAGE CEREMONY WILL BE PERFORMED (MUST BE SAME AS TOWN ISSUING MARRIAGE LICENSE)						

**ROW A: SPOUSES' FULL NAME**

- EACH APPLICANT/SPOUSE MUST ENTER THEIR FULL LEGAL NAME AS IT IS AT THE TIME OF THE APPLICATION FOR A MARRIAGE LICENSE
- FULL LEGAL NAME INCLUDES FIRST NAME, MIDDLE NAME, LAST NAME(S), SUFFIX, (IF APPLICABLE)
- IF AN APPLICANT/SPOUSE'S LEGAL NAME INCLUDES TWO LAST NAMES, INCLUDE BOTH ON THE WORKSHEET/LICENSE EVEN IF YOU DO NOT NORMALLY USE BOTH LAST NAMES
- SUFFIX INDICATES A FAMILY RELATIONSHIP LIKE USING Jr., Sr., II, III, IV, AND SO ON
- DO NOT ABBREVIATE OR USE NICKNAMES

**ROW B: SPOUSES' SEX, DATE OF BIRTH, AGE, BIRTHPLACE**

- EACH APPLICANT/SPOUSE ENTERS THEIR SEX AS EITHER F, M OR X
- EACH APPLICANT/SPOUSE ENTERS THEIR FULL DATE OF BIRTH IN MONTH (USING 2 DIGITS), DAY (USING 2 DIGITS), THEN YEAR (USING 4 DIGITS); MM/DD/YYYY
- EACH APPLICANT/SPOUSE ENTERS THE AGE THEY WERE AT THEIR LAST BIRTHDAY
- EACH APPLICANT/SPOUSE ENTERS THE STATE IN THE UNITED STATES OF AMERICA THEY WERE BORN (STATE ABBREVIATION IS ALLOWED. EXAMPLES: WV, CT, AL, TX...), OR IF NOT BORN IN THE US ENTER THE NAME OF THE COUNTRY WHERE THEY WERE BORN

**ROW C: CONSERVATORSHIP, EDUCATION COMPLETED**

- IF AN APPLICANT/SPOUSE HAS A CONSERVATOR OF PERSON, THE WRITTEN CONSENT OF THE CONSERVATOR IS REQUIRED
- FOR PROOF OF CONSERVATOR APPROVAL, A CERTIFIED COPY OF THE CONSERVATOR OF PERSON ORDER, A WRITTEN NOTARIZED AFFIDAVIT SIGNED BY THE CONSERVATOR OF PERSON, AND A PHOTOCOPY OF THE CONSERVATOR OF PERSON'S VALID GOVERNMENT ISSUED ID ARE REQUIRED
- EACH APPLICANT/SPOUSE CHECK THE BOX NEXT TO THE HIGHEST EDUCATION LEVEL THEY COMPLETED (CHECK ONLY ONE BOX PER EACH APPLICANT/SPOUSE)

**ROW D: RESIDENCE**

- EACH APPLICANT/SPOUSE MUST ENTER THE HOUSE NUMBER AND STREET NAME OF RESIDENCE WHERE THEIR HOUSEHOLD IS LOCATED. INCLUDE APT OR UNIT NUMBER/LETTER/DESCRIPTOR IF YOU HAVE ONE (EX: APT 1, UNIT B, REAR APT, ETC)

**ROW E: CITY/TOWN, COUNTY, US STATE (OR FOREIGN COUNTRY)**

- EACH APPLICANT/SPOUSE MUST ENTER THE CITY OR TOWN AND COUNTY IN WHICH THEIR HOUSEHOLD IS LOCATED
- EACH APPLICANT/SPOUSE MUST ENTER THE STATE IN THE UNITED STATES OF AMERICA IN WHICH THEIR HOUSEHOLD IS LOCATED
- IF THEIR HOUSEHOLD IS IN A COUNTRY THAT IS NOT THE UNITED STATES, ENTER THE NAME OF THE COUNTRY WHERE THE HOUSEHOLD IS LOCATED. STATE IS NOT REQUIRED IF COUNTRY IS NOT THE US

**ROW F: FATHER/PARENT FULL NAME**

- EACH APPLICANT/SPOUSE MUST ENTER THEIR FATHER/PARENT'S FULL LEGAL NAME PRIOR TO BEING MARRIED FOR THE FIRST TIME or NAME GIVEN AT BIRTH IF NEVER MARRIED
- IF A FATHER/PARENT'S LEGAL NAME INCLUDES TWO LAST NAMES, INCLUDE BOTH ON THE WORKSHEET/LICENSE EVEN IF THEY DO NOT NORMALLY USE BOTH LAST NAMES
- SUFFIX INDICATES A FAMILY RELATIONSHIP LIKE USING Jr., Sr., II, III, IV, AND SO ON
- DO NOT ABBREVIATE OR USE NICKNAMES

**ROW G: MOTHER/PARENT FULL NAME**

- EACH APPLICANT/SPOUSE MUST ENTER THEIR MOTHER/PARENT'S FULL LEGAL NAME PRIOR TO BEING MARRIED FOR THE FIRST TIME or NAME GIVEN AT BIRTH IF NEVER MARRIED
- IF A MOTHER/PARENT'S LEGAL NAME INCLUDES TWO LAST NAMES, INCLUDE BOTH ON THE WORKSHEET/LICENSE EVEN IF THEY DO NOT NORMALLY USE BOTH LAST NAMES
- SUFFIX INDICATES A FAMILY RELATIONSHIP LIKE USING Jr., Sr., II, III, IV, AND SO ON
- DO NOT ABBREVIATE OR USE NICKNAMES

**ROW H: FATHER/PARENT BIRTHPLACE, MOTHER/PARENT BIRTHPLACE**

- EACH APPLICANT/SPOUSE MUST ENTER THEIR FATHER/PARENT AND THEIR MOTHER/PARENT'S STATE OF BIRTH IF BORN IN THE UNITED STATES
- IF PARENT WAS BORN IN A COUNTRY THAT IS NOT THE UNITED STATES, ENTER ONLY THE NAME OF THE COUNTRY WHERE THE PARENT WAS BORN

**ROW I: NUMBER OF THIS MARRIAGE, LAST RELATIONSHIP ENDED BY**

- EACH APPLICANT/SPOUSE ENTERS THE TOTAL NUMBER OF MARRIAGES(AND CIVIL UNIONS IF APPLICABLE) THEY HAVE HAD INCLUDING THIS ONE (EX: IF THIS IS YOUR FIRST MARRIAGE, ENTER 1; IF YOU WERE MARRIED/IN CIVIL UNION ONCE BEFORE, ENTER 2; IF MARRIED/IN CIVIL UNION TWICE BEFORE ENTER 3)

**ROW J: SOCIAL SECURITY NUMBER**

- EACH APPLICANT/SPOUSE ENTERS THEIR SOCIAL SECURITY NUMBER (SSN), IF AN APPLICANT/SPOUSE DOES NOT HAVE AN SSN, ENTER THE WORD NONE