	IV	IARRIAGE APPLICA	ATION WO	KKSHEEI	(Please PRINT L	egibiy)	
GROOM / PARTNER A							
	FIRST NAME	MIDDLE NA	MIDDLE NAME		LAST NAME	LAST NAME ON BIRTH CERTIFICATE	
RESIDENCE-STREET ADDRESS			CITY		STATE	COUNTY	
DATE OF BIRTH (MO/DA/YR) AGE SEX BIRTHPLACE				SOCIAL SECURITY NUMBER OCCUPATION		ı	
STATISTICAL INI	FORMATION		(STATE OR COUN	NTRY)			
EDUCATION NUMBER OF TH				HIS MARRIAGE	RACE -	OF HISPANIC ORIGIN?	(Circle One)
(HIGHEST GRADE COMPLETED) FIRST, SECOND,			FIRST, SECOND,	SPECIFY	(BLACK, WHITE, AMERICAN	YES	NO
ETC.			ETC.	HOW	INDIAN, ETC.)	IF YES SPECIFY -	
ELEMENTARY OR	SECONDARY (0 – 12)	COLLEGE (1 – 4 OR 5+)		DISSOLUTION OR DEATH		CUBAN, MEXICAN, PUI	ERTO RICAN, ETC.
PARENT INFORI	MATION (Provide	e as much information a	as possible. If p	parent decease	ed, provide name and birt	hplace. Deceased in ad	dress section)
FIRST NAME	MIDDLE NAME	MAIDEN (LAST	ΓNAME)	ADDRESS	CITY	STATE	BIRTHPLACE (STATE OR COUNTRY
FATHER				¬			(STATE ON COOKINI)
FIRST NAME	MIDDLE NAME	LAST NAME		ADDRESS	CITY	STATE	BIRTHPLACE (STATE OR COUNTRY
BRIDE /							
PARTNER B	FIRST NAME MIDDLE NAME			LAST NAME		LAST NAME ON BIRTH CERTIFICATE	
DECIDENC	E-STREET ADDRESS				CITY	STATE	COUNTY
RESIDENC	E-STREET ADDRESS					SIAIE	COUNTY
DATE OF BIRTH	(840 /DA /VD)		DIDTUDIAC		CIAL CECUPITY AND ADED	OSCUPATION	
DATE OF BIRTH STATISTICAL INI		AGE SEX	BIRTHPLACI (STATE OR COUN		CIAL SECURITY NUMBER	OCCUPATION	
EDUCATION NUMBER OF TH				HIS MARRIAGE	RACE -	OF HISPANIC ORIGIN?	(Circle One)
(HIGHEST GRADE COMPLETED)			FIRST, SECOND,	SPECIFY	(BLACK, WHITE, AMERICAN	YES	NO
			ETC.	HOW	INDIAN, ETC.)	IF YES SPECIFY -	
ELEMENTARY OR	SECONDARY (0 – 12)	COLLEGE (1 – 4 OR 5+)		DISSOLUTION OR DEATH		CUBAN, MEXICAN, PUI	ERTO RICAN, ETC.
PARENT INFORI	MATION (Provide a	as much information as	possible. If pa	rent deceased	, provide name and birthp	olace. Deceased in addr	ress section)
FIRST NAME	MIDDLE NAI	ME MAIDEN (LA	AST NAME)	ADDRESS	CITY	STATE	BIRTHPLACE
FATHER							(STATE OR COUNTRY
FIRST NAME	MIDDLE NAM	VE LAST	NAME	ADDRESS	CITY	STATE	BIRTHPLACE (STATE OR COUNTRY
ARE ABOVE PART	IES ARE RELATED TO E	EACH OTHER?	YES	NO	IF YES, SPECI	FY RELATIONSHIP –	
CONTACT PHONE	NUMBER –						

<sup>\*\*</sup> EMAIL COMPLETED WORKSHEET TO <u>VITALS@GRUNDYCOUNTYIL.GOV</u>. GO TO <u>WWW.GRUNDYCOUNTYIL.GOV</u> FOR COMPLETE INSTRUCTIONS.