Marriage Worksheet

Fill out one form per person

Full Name: _____
First Middle Last

Social Security Number: (NA if Not Available) _____

Last Name AFTER Marriage: _____

Maiden Name (Birth Name if different that above) _____

Residence: _____
Street Address City, Town, Village - State, Zip Code

County: _____ Telephone No.: _____

Date of Birth: _____ Birthplace: _____

Occupation: _____ Employer: _____

Father/Parent: _____ Country of Birth: _____

Mother/Parent: _____ Country of Birth: _____
MAIDEN NAME

Number of this Marriage: _____ (including this marriage)

If NEVER married before STOP HERE ***If married before continue to end***

If married before, how many times: _____

Number ending in: Divorce _____ Death _____ Annulment _____

Last marriage ended in: Divorce _____ Death _____ Annulment _____

Date last marriage ended: _____

Are any former spouses still living: _____

Divorce Information MUST be provided

Date of Divorce Decree | Place Issued | Against Whom (self or spouse)

1. _____
2. _____
3. _____
4. _____