

DATE OF APPLICATION: _____			STATE OF CONNECTICUT								
			POMFRET MARRIAGE LICENSE WORKSHEET								
BRIDE/GROOM/SPOUSE					BRIDE/GROOM/SPOUSE						
NAME (First) (Middle) (Last)			NAME (First) (Middle) (Last)			NAME (First) (Middle) (Last)					
SEX	DATE OF BIRTH (Month/Day/Year)		AGE		SEX	DATE OF BIRTH (Month/Day/Year)		AGE			
BIRTHPLACE-Town & State			EDUCATION (No.Yrs Completed)		BIRTHPLACE-Town & State			EDUCATION (No.Yrs Completed)			
			Grades 1-8	Grades 9-12				College 1-5+	Grades 1-8	Grades 9-12	College 1-5+
RESIDENCE-(No. and Street)					RESIDENCE-(No. and Street)						
CITY OR TOWN			STATE		CITY OR TOWN		STATE				
ZIP CODE					ZIP CODE						
COUNTY			SUPERVISION OR CONTROL BY GUARDIAN OR CONSERVATOR YES <input type="checkbox"/> NO <input type="checkbox"/>			COUNTY			SUPERVISION OR CONTROL BY GUARDIAN OR CONSERVATOR YES <input type="checkbox"/> NO <input type="checkbox"/>		
FATHER'S NAME (First, Middle, Last)					FATHER'S NAME (First, Middle, Last)						
MOTHER'S NAME (First, Middle, Maiden Name)					MOTHER'S NAME (First, Middle, Maiden Name)						
FATHER'S BIRTHPLACE (State or Foreign Country)					FATHER'S BIRTHPLACE (State or Foreign Country)						
MOTHER'S BIRTHPLACE (State or Foreign Country)					MOTHER'S BIRTHPLACE (State or Foreign Country)						
NO. OF THIS MARRIAGE	NO. OF CIVIL UNIONS	IF PREVIOUSLY IN MARRIAGE OR CIVIL UNION, LAST RELATIONSHIP WAS:			NO. OF THIS MARRIAGE	NO. OF CIVIL UNIONS	IF PREVIOUSLY IN MARRIAGE OR CIVIL UNION, LAST RELATIONSHIP WAS:				
		<input type="checkbox"/> MARRIAGE <input type="checkbox"/> CIVIL UNION					<input type="checkbox"/> MARRIAGE <input type="checkbox"/> CIVIL UNION				
LAST RELATIONSHIP ENDED BY:					LAST RELATIONSHIP ENDED BY:						
<input type="checkbox"/> DEATH		<input type="checkbox"/> DISSOLUTION		<input type="checkbox"/> ANNULMENT		<input type="checkbox"/> DEATH		<input type="checkbox"/> DISSOLUTION		<input type="checkbox"/> ANNULMENT	
<input type="checkbox"/> PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER					<input type="checkbox"/> PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER						
SOCIAL SECURITY NUMBER OF BRIDE/GROOM/SPOUSE					SOCIAL SECURITY NUMBER OF BRIDE/GROOM/SPOUSE						
OFFICIATOR INFORMATION											
Officiator 's Name (First) (Last)											
Officiator's Address								Officiator's Phone Number			
TOWN & ADDRESS OF MARRIAGE					PROPOSED DATE OF MARRIAGE						
HOW MANY CERTIFIED COPIES					PHONE NUMBER OF BRIDE OR GROOM						