THE NAMES ON YOUR MARRIAGE LICENSE SHOULD MATCH WHAT IS ON YOUR BIRTH CERTIFICATE. PLEASE INCLUDE FULL "LEGAL" NAMES FOR BOTH APPLICANTS AND PARENTS

State of Nebraska – Department of Health and Human Services Finance and Support – VITAL RECORDS

MARRIAGE WORKSHEET

APPLICANT #1 PHONE #: APPLICANT #2 PHONE #:

1. APPLICANT #1 – Full Name (First, Middle, Last, Suffix)			2. AGE
3a. COUNTRY	3b. STATE	3c. COUNTY	
3d. CITY, TOWN OR LOCATION	3e. RESIDENCE – Street and Number		3f. ZIP CODE
4. BIRTHPLACE (City and State or Foreign Country)		5. DATE OF BIRTH (Mo., Day, Yr.)	
6a. FATHER'S – Full Name (First, Middle, Last, Suffix)		6b. BIRTHPLACE (City and State or Foreign Country)	
7a. MOTHER'S – Full Maiden Name (First, Middle, Maiden)		7b. BIRTHPLACE (City and State or Foreign Country)	
8a. APPLICANT #2 – Full Name (First, Middle, Last)		8b. MAIDEN NAME (If different)	9. AGE
10a. COUNTRY	10b. STATE	10c. COUNTY	
10d. CITY, TOWN OR LOCATION	10e. RESIDENCE – Street and Number		10f. ZIP CODE
11. BIRTHPLACE (City and State or Foreign Country)		12. DATE OF BIRTH (Mo., Day, Yr.)	
13a. FATHER'S – Full Name (First, Middle, Last, Suffix)		13b. BIRTHPLACE (City and State or Foreign Country)	
14a. MOTHER'S – Full Maiden Name (First, Middle, Maiden)		14b. BIRTHPLACE (City and State or Foreign Country)	

CONFIDENTIAL INFORMATION: INFORMATION BELOW WILL NOT APPEAR ON CERTIFIED COPIES OF THIS RECORD

15a. SOCIAL SECURITY NUMBER - Applicant #1	15b. SOCIAL SECURITY NUMBER - Applicant #2

16. If previously married, last marriage ended either by –

Applicant #1: ☐ Death ☐ Dissolution ☐ Annulment Date Marriage Ended (Mo., Day, Yr.) _____

Applicant #2: ☐ Death ☐ Dissolution ☐ Annulment Date Marriage Ended (Mo., Day, Yr.) _____

17a. Is Applicant #1 of Hispanic or Latino Origin? ☐ Yes ☐ No | 17b. Is Applicant #2 of Hispanic or Latina Origin? ☐ Yes ☐ No

RACE

18a. Applicant #1 18b. Applicant #2

Check one or more races to indicate what each person considers him/herself to be

☐	White	☐
☐	Black or African American	☐
☐	American Indian or Alaska Native	☐
☐	Asian	☐
☐	Native Hawaiian or Other Pacific Islander	☐

The fee for the marriage license is $50. A certified copy of the marriage license is required in order for the applicant to change their last name, e.g. Driver's License, Social Security, etc. The cost of a certified copy is $16.

Do you want a certified copy sent to you once it is filed in our office? ☐ YES ☐ NO

Mail certified to: ☐ Applicant #1 Address ☐ Applicant #2 Address ☐ Other Address: _____