

# SOUTH DAKOTA MARRIAGE LICENSE APPLICATION

This is a legal document. Complete in ink and do not alter.



SPOUSE A INFORMATION					
First Name	Middle Name	Last Name	Suffix		
<b>Last Name After Solemnization of Marriage - Acceptable surnames are Spouse A's surname, Spouse B's surname or Spouse A and Spouse B's hyphenated surnames. (SDCL 25-1-10.1)</b>					
<b>Residence Address - Physical location of home NO PO BOXES</b>		<b>Apt #</b>	<b>Inside City Limits?</b>		
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>City</b>	<b>County</b>	<b>State</b>	<b>Phone Number</b>		
<b>Birth State/Country</b>		<b>Date of Birth</b>	<b>Age</b>		
<b>STATISTICAL INFORMATION – the information collected below is used for statistical purposes only and will not be published on a certified copy of the marriage record.</b>					
<b>Sex</b>	<b>Of Hispanic Origin?</b>				
<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> NO- not Spanish/Hispanic/Latina <input type="checkbox"/> YES- Mexican, Mexican American, Chicano <input type="checkbox"/> YES- Puerto Rican <input type="checkbox"/> YES- Cuban <input type="checkbox"/> YES- other Spanish/Hispanic/Latina (e.g. Spaniard, Salvadoran, Dominican, Columbian) Specify _____				
<b>Race – select all that apply. Do not use country of birth</b>					
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> WHITE  <input type="checkbox"/> BLACK or AFRICAN AMERICAN  <input type="checkbox"/> ASIAN INDIAN  <input type="checkbox"/> CHINESE  <input type="checkbox"/> FILIPINO  <input type="checkbox"/> VIETNAMESE  <input type="checkbox"/> JAPANESE                             </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> KOREAN  <input type="checkbox"/> NATIVE HAWAIIAN  <input type="checkbox"/> SAMOAN  <input type="checkbox"/> GUANAMIAN or CHAMORRO  <input type="checkbox"/> AMERICAN INDIAN or ALASKA NATIVE  <input type="checkbox"/> OTHER ASIAN _____  <input type="checkbox"/> OTHER PACIFIC ISLANDER _____  <input type="checkbox"/> OTHER _____                             </td> </tr> </table>				<input type="checkbox"/> WHITE <input type="checkbox"/> BLACK or AFRICAN AMERICAN <input type="checkbox"/> ASIAN INDIAN <input type="checkbox"/> CHINESE <input type="checkbox"/> FILIPINO <input type="checkbox"/> VIETNAMESE <input type="checkbox"/> JAPANESE	<input type="checkbox"/> KOREAN <input type="checkbox"/> NATIVE HAWAIIAN <input type="checkbox"/> SAMOAN <input type="checkbox"/> GUANAMIAN or CHAMORRO <input type="checkbox"/> AMERICAN INDIAN or ALASKA NATIVE <input type="checkbox"/> OTHER ASIAN _____ <input type="checkbox"/> OTHER PACIFIC ISLANDER _____ <input type="checkbox"/> OTHER _____
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<b># of Previous Marriages</b>	<b>Marital Status</b>				
	<input type="checkbox"/> Never Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Annulment				
<b>Disclosure of the social security number is mandatory pursuant to SDCL 25-7A-56.2 and the Social Security Act § 205(c)(2), 42 U.S.C. § 405(c)(2) (1998). The social security number will be used by the Department of Social Services to facilitate collecting child support and locating child support obligors.</b>					
<b>Social Security Number:</b> _____ - _____ - _____					

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<b>SPOUSE B INFORMATION</b>					
<b>First Name</b>	<b>Middle Name</b>	<b>Last Name</b>	<b>Suffix</b>		
<b>Last Name After Solemnization of Marriage - Acceptable surnames are Spouse A's surname, Spouse B's surname or Spouse A and Spouse B's hyphenated surnames. (SDCL 25-1-10.1)</b>					
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			<input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>City</b>	<b>County</b>	<b>State</b>	<b>Phone Number</b>		
<b>Birth State/Country</b>		<b>Date of Birth</b>	<b>Age</b>		
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