

CHAMPAIGN COUNTY CIVIL UNION APPLICATION AND RECORD

	County Champaign	License Number					
Partner A	First Name	Middle Name	Last Name	Suffix	Last Name on Birth Certificate		
	Street and Number or R.F.D		City	County	State	Zip Code	Country
	Social Security Number	Date of Birth (mm/dd/yyyy)	Gender	City of Birth	Birthplace(State or Foreign Country)		
Occupation		Phone Number		Email			
Parent's Name (First, Middle, Last)		Birth Name	Birthplace (State or Foreign Country)	Address			
Parent's Name (First, Middle, Last)		Birth Name	Birthplace (State or Foreign Country)	Address			
Partner B	First Name	Middle Name	Last Name	Suffix	Last Name on Birth Certificate		
	Street and Number or R.F.D		City	County	State	Zip Code	Country
	Social Security Number	Date of Birth (mm/dd/yyyy)	Gender	City of Birth	Birthplace(State or Foreign Country)		
Occupation		Phone Number		Email			
Parent's Name (First, Middle, Last)		Birth Name	Birthplace (State or Foreign Country)	Address			
Parent's Name (First, Middle, Last)		Birth Name	Birthplace (State or Foreign Country)	Address			
If Parties Are Related to Each Other - Specify Relationship							
Race	Education (Highest Grade Completed)		Number of This Civil Union and Marriages	If previously Married or in a Civil Union- Last Civil Union /Marriage Ended by Death, Dissolution etc			
Specify (White, Black, American Indian etc)	Elementary or Secondary (1-12)	College (1- 4 or 5+)	Specify (e.g. First, Second)	Specify How	Specify When (mm/dd/yyyy)	Specify Where (County and State)	
Partner A							
Partner B							
Of Hispanic Origin? If yes, specify(Cuban, Mexican, Puerto Rican etc)	Partner A Yes <input type="checkbox"/> No <input type="checkbox"/>			Partner B Yes <input type="checkbox"/> No <input type="checkbox"/>			
	Specify _____			Specify _____			