

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	
	Date of Birth (month/day/year)	City of Birth	Birthplace(State or Foreign Country)		Social Security Number		
	Gender	Occupation	Phone Number	Email			
	Parent's Name (First, Middle, Last)		Birth Name	Address	Birthplace (State or Foreign Country)		
	Parent's Name (First, Middle, Last)		Birth Name	Address	Birthplace (State or Foreign Country)		
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	
	Date of Birth (month/day/year)	City of Birth	Birthplace(State or Foreign Country)		Social Security Number		
	Gender	Occupation	Phone Number	Email			
	Parent's Name (First, Middle, Last)		Birth Name	Address	Birthplace (State or Foreign Country)		
	Parent's Name (First, Middle, Last)		Birth Name	Address	Birthplace (State or Foreign Country)		
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 (Month/Day/Year)	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 _____		