

Statement of Premarital Education

I, _____
Full Legal Name of Educator
confirm that

_____ Date of Birth _____
Groom's **full** first, middle and last legal name – must be **identical** to the **full legal name** that will be listed on the marriage license application.
and

_____ Date of Birth _____
Bride's **full** first, middle and last legal name – must be **identical** to the **full legal name** that will be listed on the marriage license application.
have completed at least twelve hours of premarital education that included the use of premarital inventory and the teaching of communication and conflict management skills.

I am a: (check one)

- Licensed or ordained minister
- Person authorized to solemnize marriages under Minnesota Statutes, section 517.18
- Person licensed to practice marriage and family therapy under Minnesota Statutes, section 148B.33

Educator must sign and date this before a notary public.

Signature of Educator **Date**

Signed or attested before me on (date) _____

Signature of Notary Public _____

My commission expires (date) _____