## **Certification of Completion**

**Premarital Preparation Course** 

Tennessee Code Annotated §36-6-413(b)(5) provides that couples who complete premarital preparation courses shall be exempt from the \$60 fee otherwise imposed by that code section. The course must not be less than four (4) hours and completed no more than one year prior to the date of application for the license. Parties may attend separate classes. If they do, separate certificates must be filed.

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PARTIC Every blank must be completed	CIPANT INFORMATION		
GROOM	BR	BRIDE	
Name	Name		
Address	Address		
Course Attended			
COURSE P Every blank must be completed	ROVIDER INFORMATION		
Name		<b>QUALIFICATIONS</b> (or relevant training if representative of a religious institution) <b>Check one:</b>	
Number of Hours Completed  Date Course Completed	☐ Psychologist (as defined under TCA, §63-11-203)	☐ Clinical Social Worker (as defined under TCA, Title 63, Ch. 23, Part 1)	
Address	☐ Licensed Marital and Family Therapist (as defined under TCA, §63-22-115)	☐ Clinical Pastoral Therapist (as defined under TCA, Title 63, Ch. 22, Part 2)	
	☐ Professional Counselor (as defined under TCA, §63-22-104)	☐ Psychological Examiner (as defined under TCA, §63-11-202)	
Provider's Phone Number	☐ Official Representative of a Religious Institution (recognized under TCA, §63-22-204)	☐ Any other instructor approved for the judicial district for the county where license is issued	
Tennessee does not certify approved providers or who meet the qualifications as noted above may local telephone directory. Inclusion on the websi premarital preparation course.	be found at www2.state.tn.us/health/licer	nseure/index.htm or in your	
I swear or affirm that the participant(s) named about and on the date indicated. I further certify that the Annotated §36-6-413(b)(5).	AFFIDAVIT  ve attended the premarital preparation co instructor was qualified under the provisi	urse for the number of hours ons of Tennessee Code	
Signature of Instructor or Provider	Date	License Number (if applicable)	
Subscribed and sworn to before me, this		SEAL	
Notary Public	Commission Expiration Date		