

**CERTIFICATE 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.

PARTICIPANT INFORMATION

HUSBAND: _____ WIFE: _____

ADDRESS: _____ ADDRESS: _____

COURSE ATTENDED: _____

NUMBER OF HOURS COMPLETED: _____

DATE COURSE COMPLETED: _____

COURSE PROVIDER INFORMATION

Please complete below the information about the person or organization providing the premarital preparation course.

NAME: _____

ADDRESS: _____

QUALIFICATIONS (or relevant training, if representative of a religious institution)

- Psychologist (as defined under TCA 63-11-203)
- Licensed Marital and Family Therapist (as defined under TCA 63-22-115)
- Professional Counselor (as defined under TCA 63-22-104)
- Official Representative of a Religious Institution (recognized under TCA 63-22-204)
- Clinical Social Worker (as defined under TCA Title 63, Ch. 23, Part 1)
- Clinical Pastoral Therapist (as defined under TCA Title 63, Ch. 22, Part 2)
- Psychological Examiner (as defined under TCA 63-11-202)
- Any other instructor approved for the judicial district

Tennessee does not certify approved providers or maintain a central list of providers. The names of professionals who meet the qualifications as noted above may be found at: www2.state.tn.us/health/licensure/index.htm or your local telephone directory. Inclusion on the website does not guarantee that such professional is willing to provide the premarital preparation course.

AFFIDAVIT

I swear or affirm that the participant(s) named above attended the premarital preparation course for the number of hours and on the date indicated. I further certify that the instructor was qualified under the provisions of Tennessee Code Annotated 36-6-413(b)(5).

DATE

SIGNATURE OF INSTRUCTOR OR PROVIDER

LICENSE NUMBER
(if applicable)

Subscribed and sworn to before me, the _____ day of _____, 20_____.

Notary Public
My Commission Expires: _____