



### Information about marriage abroad

This form is used by authorities if these determine that the matter of the validity of a foreign marriage needs to be put before the Division of Family Affairs at the National Social Appeals Board. The authority in question must ensure that the parties involved fill out the form and must subsequently send the form and other case documents to the Division of Family Affairs, see chapter 9 of Guidelines on Administration of Matrimonial Cases.

All questions on the form must be answered, and the form must be signed by both parties.

#### The woman

First name(s):	
Surname:	
Name before marriage:	
Nationality:	
Date of birth/CPR number:	
Are you an asylum seeker or have you sought refuge in Denmark?	<input type="checkbox"/> No <input type="checkbox"/> Yes
What country did you seek refuge from?	
When were you granted refugee status?	
Your alien's number:	
Have you applied for asylum but not yet received a residence permit?	<input type="checkbox"/> No <input type="checkbox"/> Yes

#### The man

First name(s):	
Surname:	
Nationality:	
Date of birth/CPR number:	
Are you an asylum seeker or have you sought refuge in Denmark?	<input type="checkbox"/> No <input type="checkbox"/> Yes
What country did you seek refuge from?	
When were you granted refugee status?	
Your alien's number:	

Have you applied for asylum but not yet received a residence permit?	<input type="checkbox"/> No <input type="checkbox"/> Yes
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**The marriage**

Date of marriage:	
In what country was the marriage ceremony performed?	
What authority performed the marriage ceremony (church, town hall, court or the like)?	
Who officiated at the marriage?	Name:
	Position:
Were you both present at the marriage ceremony at the same time?	<input type="checkbox"/> No <input type="checkbox"/> Yes
If you were not both present at the marriage ceremony at the same time, you must state the particular circumstances of the marriage ceremony. State in particular exactly where you were, who was present at the ceremony, how the ceremony was performed, etc. (If necessary, continue writing on the back of this page):	
Were there witnesses to the marriage?	<input type="checkbox"/> No <input type="checkbox"/> Yes
Was the marriage registered?	<input type="checkbox"/> No <input type="checkbox"/> Yes
If the marriage was registered, with what authority was it registered?	Country:
	Name of authority:
	Address:

**Marriage certificate**

Was a marriage certificate issued?	<input type="checkbox"/> No <input type="checkbox"/> Yes
Can you obtain the original marriage certificate?	<input type="checkbox"/> No <input type="checkbox"/> Yes
If you cannot obtain the original marriage certificate: What is the reason why you cannot obtain the original marriage certificate? Would you be able to obtain a copy of the certificate? (If necessary, continue writing on the back of this page):	

**Collection of information**

I/We hereby permit the State Administration, the local authority and the Division of Family Affairs to request my/our case file(s) from the Danish Immigration Service/Ministry of Employment: <input type="checkbox"/> No <input type="checkbox"/> Yes	
I/We accept that questions about the authenticity of any documents of the file will be submitted to the Danish National Police or other police authority:	<input type="checkbox"/> No <input type="checkbox"/> Yes
I/We accept that the case will be submitted to:	
- the Danish embassy of my/our home	<input type="checkbox"/> No <input type="checkbox"/> Yes

country/countries:	
- the Danish embassy of the country in which the marriage ceremony was performed:	<input type="checkbox"/> No <input type="checkbox"/> Yes
- the authorities of my/our home country/countries:	<input type="checkbox"/> No <input type="checkbox"/> Yes
- the authorities of the country in which the marriage ceremony was performed:	<input type="checkbox"/> No <input type="checkbox"/> Yes
If you reply 'No' to the above, please state your reason(s):	

**Signatures**

**The woman**

Date:	Signature:
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**The man**

Date:	Signature:
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