

**CERTIFICATE OF COMPLETION OF QUALIFYING PREMARITAL
EDUCATION**

(This form must be completely filled out & notarized)

This will certify that _____ and _____ have completed a course of premarital education conducted by the undersigned on _____ [Date Completed] and that such course qualified under Section 19-3-30.1 of Official Code of Georgia Annotated in that it included at least six hours of instruction involving marital issues (which may include, but not be limited to conflict management, communication skills, financial responsibilities, child and parenting responsibilities, and extended family roles) and the couple underwent the course together.

I further certify that I am: *(Please initial appropriate item)*

_____ A professional counselor, social worker, or marriage and family therapist who is licensed pursuant to Chapter 10A of Title 43 of the Official Code of GA Annotated;

_____ A psychiatrist who is licensed as a physician pursuant to Chapter 34 of Title 43 of the Official Code of Georgia Annotated;

_____ A psychologist who is licensed pursuant to Chapter 29 of Title 43 of the Official Code of Georgia Annotated;

_____ An active member of the clergy who:

_____ Performed such education in course of my service as clergy; OR

_____ Designated to perform such education and I certify that my designee is trained and skilled in premarital education and has certified to me the completion of the course by the couple

This is a sworn statement under Georgia Law

Sworn to and certified before me Signature: _____

On: _____

Notary Public: _____ Printed Name: _____

My Commission Expires: _____

Address: _____

City: _____ State: _____ Zip: _____

(We can notarize but you must bring a photo ID and you must sign in our presence)