

Associated Archives at St. Mary's Seminary & University
Archdiocese of Baltimore, Associated Sulpicians of the United States,
and St. Mary's Seminary & University

Foreign Citizenship Document Request Form

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| Requestor |
| Address |
| City, State, Zip: |
| Telephone: |
| E-mail: |

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| Name at Time of Sacrament: |
| Sacrament (circle one): BAPTISM MARRIAGE |
| Name of Parish and/or Location: |
| Approximate Date of Sacrament: |
| Date of Birth and/or Date of Death: |
| Date of Marriage and Spouse's Name: |
| Name of Father: |
| Maiden Name of Mother: |
| Ethnic Group(s): |

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|--|
| Comments (Attach separate sheet if necessary): |
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|---|
| Authorized Signature: _____ Date: _____ |
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For Office Use Only

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| Documentation Submitted: | Research Fee: \$ Check MO CC |
| Certificate Issued: Y N # | Certificate Fee: \$ Check MO CC |
| Place Certificate Sent: | Date Sent: |
| CC#: | Check # |
| Exp.: SC: | |