



**California Department of
Corrections and Rehabilitation**

**DEPARTMENT OPERATIONS
MANUAL SUPPLEMENT**

Chapter: 10
Adult Programs

Subchapter 100000

Section: 101070
Marriages

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ARTICLE 7 — MARRIAGES

101070.1 Policy

Revised September 25, 2007

PC 2601 provides that all persons sentenced to the Department have the right to marry.

Unless legitimate penological interest would dictate otherwise, inmates shall be permitted to marry when they meet all legal and departmental requirements. This Article does not apply to registered domestic partnerships, which are legally distinct from marriages. The CDCR does not assist inmates to establish registered domestic partnerships because inmates, while they are incarcerated, cannot meet the common residency requirement of the California Domestic Partners Rights and Responsibilities Act.

101070.2 Purpose

The purpose of this procedure is to provide guidelines for the processing of inmate marriage requests and the solemnization of marriages.

101070.3 Definition of Marriage

"Marriage" is defined in California Family Code (FC) 300, as follows:

"Marriage is a personal relation arising out of a civil contract between a man and a woman, to which the consent of the parties capable of making that contract is necessary. Consent alone does not constitute marriage. Consent must be followed by the issuance of a license and solemnization as authorized by (other provisions of this code)."

101070.4 Roles and Responsibilities

The Warden delegates overall responsibility to the Associate Warden, Level II/III Operations, with the affected Facility Captain having daily supervisory responsibility for the approval of marriage requests. The Facility Correctional Counselor II (CC-II) Supervisors shall ensure that the assigned Correctional Counselor I (CC-I) initiates a Marriage Tracking Form (*Attachment A*) and collected and reviewed all appropriate documentation for the processing of the Marriage Plan (see MARRIAGE

PLAN attachments).

Locate DOM Supplement/Marriage Plan at \\soloffice2\Data\Public\SOL-Staff\Counselor Resources\Marriage Folder.

101070.5 Legal Requirements for the Issuance of a Marriage License

Both parties applying for a Marriage License must provide verification they are legally free to marry. If previously married a certified copy of the Divorce decree or death certificate must be provided to CC-I for verification. Once verified, the inmate may complete marriage license application and Affidavit of Inability to Appear, Pursuant to Family Code Section 426.

The Fiancée is also required to handwrite on Attachment B clearly stating the following:

- Inmates full name
- CDC#
- Committing Offense of proposed Groom

Note: Marriage License's expire 90 days after issuance, it is inmate's responsibility to make to make sure all appropriate documentation Has been provided and approved by CC-I.

Note: The PC sets forth criminal penalties for persons who solemnize incestuous or other marriages forbidden by law.

101070.6 Solemnization of Marriages

See DOM 101070

101070.7 Authentication of Marriages

The person who solemnized the marriage is required by statute to return the marriage license and the completed certificate of registry to the county recorder in the county in which the license was issued within 30 days after the ceremony. Failure to file the license and certificate within this time frame may subject that person to criminal penalties. The original certificate is forwarded to the State Registrar of Vital Statistics.



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101070.8 Processing the Marriage Request

The inmate's caseworker shall process the marriage request. Inmates who apply to be married must contact their assigned CC-I. CC-I will review central file to verify inmate's current/previous marital status and other social factors. The request must be submitted at least three months prior to tentative ceremony date to allow months prior to tentative ceremony date to allow for sufficient processing time. Marriages by proxy will not be allowed. Inmates who have less than six months to serve are not eligible to apply for a marriage.

MARRIAGE PLAN (Attachments):

Upon request inmate will be provided the following: Inmate Marriage Application Form (*Attachment B*). Fiancé Marriage Application Form, (*Attachment C*) Affidavit of Inability to Appear as described below; both fiancée and inmate must complete (*Attachment E*). The Affidavit of Inability to Appear must be signed in the presence of the Notary Public. Once the form has been notarized the bride-to-be will take the form and the Application for Marriage License. (*Attachment D*), Signed by CC-I)

- If he is a Lifer state that she understands that minimum eligible for parole date (MEPD) is not a release date.
- Life term inmates are not authorized to have Family Visits (overnight visiting).
- Must be of the opposite sex. Legally free to marry.
- All documents including Certified copies of Divorce Decree/ Death certificates must be mailed directly to inmate's assigned CC-I for verification and sent to:

California State Prison-Solano
P.O. Box 4000
Vacaville, CA 95696-4000
Attn: CC-I (inmate's CC-I)

Affidavit of Inability to Appear (*Attachment E*)

Once the items above have been received and verified by CC-I, inmate will complete a Request for Interview form addressed to the Litigation Coordinator requesting a Notary Public for the Affidavit of Inability to Appear.

once notary fee's are available on inmate's trust account.

Note: Notarized documents are \$10 each. Deposits in to an inmate's trust account are subject to collection of restitution, direct fines, and/or obligations. Once license number is received and a ceremony date been scheduled, it is inmate's responsibility to immediately inform CC-I of the license number and coordinate the date of ceremony. (Minimum of 14 days notice) CC-I will submit Final Approval (*Attachment F*) and forward a hard copy to Visiting Lieutenant. (Electronic mail reminder is recommended as well)

Note: (CC-I has 90 days to complete, not including managerial approval)

101070.10 Revisions

The Director, Division of Adult Institutions, shall ensure that the content of this Section is accurate and current. See DOM 101070

101070.9 Pastoral Duties/Officiating at Marriages

See DOM 101070

101070.11 References

PC §§ 359, 360, and 2601. CCR (15) § 3216.
EC § 663. FC §§ 301 et seq, 400, 402, and 500.
H&SC §§ 102100 et seq., 102285, and 103125 et. seq.
GC § 26840 et seq.

MARRIAGE REQUEST TRACKING FORM
To be maintained by CC1 throughout the approval process

Inmate's Name: _____	Housing: _____
CDC Number: _____	Counselor: _____
Prospective Spouse: _____	Telephone: _____

	Dates:
Fiancee and Inmate application for marriage provided to inmate:	_____
Attachment B (Handwritten) & Divorce Decree/Death Certificate: (Certified Copies)	_____
CC-1 received completed package verified both parties are legally free to marry:	_____
Trust Withdrawal and request for interview completed to litigation: (for Affidavit of Inability to Appear)	_____
CC-1 distributed copy of approval to Visiting Lieutenant:	_____
(Recommend to send visiting Lieutenant an email confirmation of delivery of marriage packet to include name number and date of marriage.	

Note: The purpose of this tracking sheet is to assist the CC1 to track the status to requests throughout the process until the marriage ceremony has occurred. Retention is mandatory through the approval process only.

INMATE MARRIAGE APPLICATION FORM

Date: _____

Inmate's Name: _____ CDC#: _____ AGE: _____

Number of Marriages: _____ Name(s): _____

Date of Divorce(s)/Death of Spouse(s) _____ Verified: _____

(Certified Copy of Divorce Decree/Death Certificate Mailed directly CCI)

<u>Inmate's Children</u>			
Name(s)	Age(s)	Name(s)	Age(s)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Bride-To-Be: _____ Age: _____

Address: _____ Telephone#: _____

Inmate's Request to Marry

I, Inmate _____, CDC# _____ wish to marry
Ms. _____. I am legally free to marry. I have known
Ms. _____ for _____ years/months.
We have () have not () lived together. There are () are not () children involved.

Inmate's Declaration

I have informed my Fiancée that I am incarcerated for the crime of (State Clearly the
Commitment Offense) _____

My release date from prison is (If serving a life term indicate Life) _____

Inmate Guest (limit two)

Note: Inmate guests may attend ONLY if their Work Incentive Program Schedules are not interrupted

Name: _____ CDC# _____ Housing: _____

Name: _____ CDC# _____ Housing: _____

Inmate Name (print): _____ CDC#: _____

Inmate Signature: _____ Date: _____

FIANCÉE MARRIAGE APPLICATION FORM

Date: _____
Bride-To-Be Name: _____ AGE: _____
Number of Marriages: _____ Name(s): _____

Date of Divorce(s)/Death of Spouse(s) _____
(I have requested Certified Copy of my/his Divorce Decree/Death Certificate to be sent directly to CCI for verification)

<u>Fiancées Children</u>			
Name(s)	Age(s)	Name(s)	Age(s)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Inmate Name/CDC#: _____ Age: _____

Fiancées Declaration

I, (Name) _____, am aware that my husband to-be,
Inmate _____ CDC# _____
is incarcerated for the crime(s) of:
(State Clearly the Commitment Offense, Not just the PC #,- List the Title of Offense, example Burglary 1st)

I understand that his release date from prison is (If serving a life term notating "life")

(Note: Inmates with a Life Term (Minimum Eligible Parole Date (MEPD) will NOT be eligible for Family Visits)

Bride to-be Guest (limit ten)

(Note: Visitors must be approved prior to day of ceremony, contact CSP-Solano Visiting Department)

Name: _____	DL# _____	Name: _____	DL# _____
Name: _____	DL# _____	Name: _____	DL# _____
Name: _____	DL# _____	Name: _____	DL# _____
Name: _____	DL# _____	Name: _____	DL# _____
Name: _____	DL# _____	Name: _____	DL# _____

Fiancée's Name (print): _____ Date: _____

Fiancée's Signature: _____

**APPLICATION FOR MARRIAGE LICENSE
SOLANO COUNTY JAIL AND CALIFORNIA STATE PRISON**

<input type="checkbox"/> Bride FIRST PERSON DATA <input type="checkbox"/> Groom SECOND PERSON DATA	1A. FIRST NAME				1B. MIDDLE					
	1C. CURRENT LAST				1D. LAST NAME AT BIRTH (IF DIFFERENT THAN 1C)					
	2. DATE OF BIRTH (MM/DD/CCYY)		3. STATE/COUNTRY OF BIRTH		4. #PREV. MARRIAGES/SRDP		5A. LAST MARRIAGE/SRDP ENDED BY:		5B. DATE ENDED	
	<input type="checkbox"/> DEATH <input type="checkbox"/> DISSO <input type="checkbox"/> ANNULMENT <input type="checkbox"/> TERM SRDP <input type="checkbox"/> N/A									
	6. ADDRESS				7. CITY		8. STATE/COUNTRY		9. ZIP CODE	
	10A. FULL BIRTH NAME OF FATHER/PARENT					10B. STATE OF BIRTH (IF OUTSIDE U.S. ENTER COUNTRY)				
	11A. FULL BIRTH NAME OF MOTHER/PARENT					11B. STATE OF BIRTH (IF OUTSIDE U.S. ENTER COUNTRY)				
	12A. FIRST NAME				12B. MIDDLE					
	12C. CURRENT LAST				12D. LAST NAME AT BIRTH (IF DIFFERENT THAN 12C)					
	13. DATE OF BIRTH (MM/DD/CCYY)		14. STATE/COUNTRY OF BIRTH		15. # PREV. MARRIAGES/SRDP		16A. LAST MARRIAGE/SRDP ENDED BY:		16B. DATE ENDED	
<input type="checkbox"/> DEATH <input type="checkbox"/> DISSO <input type="checkbox"/> ANNULMENT <input type="checkbox"/> TERM SRDP <input type="checkbox"/> N/A										
17. ADDRESS				18. CITY		19. STATE/COUNTRY		20. ZIP CODE		
21A. FULL BIRTH NAME OF FATHER/PARENT					21B. STATE OF BIRTH (IF OUTSIDE U.S. ENTER COUNTRY)					
22A. FULL BIRTH NAME OF MOTHER/PARENT					22B. STATE OF BIRTH (IF OUTSIDE U.S. ENTER COUNTRY)					
NEW MIDDLE AND LAST NAME OF PERSON LISTED IN 1A-1D (IF ANY) FOR USE UPON SOLEMNIZATION OF THE MARRIAGE (SEE BELOW FOR INFORMATION)										
30A. FIRST - MUST BE SAME AS 1A			30B. MIDDLE			30C. LAST				
NEW MIDDLE AND LAST NAME OF PERSON LISTED IN 12A-12D (IF ANY) FOR USE UPON SOLEMNIZATION OF THE MARRIAGE (SEE BELOW FOR INFORMATION)										
31A. FIRST - MUST BE SAME AS 12A			31B. MIDDLE			31C. LAST				

"NEW NAME(S)"—LAW APPLYING TO MIDDLE AND LAST NAMES (ITEMS 30B, 30C, 31B, AND 31C) OPTIONAL: PURSUANT TO FAMILY CODE SECTION 306.5, PARTIES TO THE MARRIAGE MAY ADOPT ANY OF THE FOLLOWING MIDDLE OR LAST NAMES UPON SOLEMNIZATION OF THE MARRIAGE: CURRENT LAST NAME OF THE OTHER SPOUSE; LAST NAME OF EITHER SPOUSE GIVEN AT BIRTH; NAME COMBINING INTO A SINGLE LAST NAME ALL OR A SEGMENT OF THE CURRENT LAST NAME OR THE LAST NAME OF EITHER SPOUSE GIVEN AT BIRTH; A HYPHENATED COMBINATION OF LAST NAMES.

NOTE: AFTER THE CEREMONY IS PERFORMED THE NAMES ENTERED IN BOXES 30A – 30C AND 31A – 31C WILL BECOME YOUR LEGAL NAME(S). IF LEFT BLANK YOUR NAME(S) WILL REMAIN THE SAME. IN ADDITION, THE NEW MIDDLE AND/OR LAST NAME MAY NOT BE CHANGED, ADDED OR AMENDED ON THE MARRIAGE CERTIFICATE AT A LATER DATE. THE FIRST NAME OF THE PARTIES MAY NOT BE CHANGED ON THE MARRIAGE LICENSE.

THIS IS AN APPLICATION ONLY!!

BOTH APPLICANTS MUST BE 18 YEARS OF AGE

A NON REFUNDABLE CASH OR ATM FEE OF \$75.00 DOLLARS IS REQUIRED ALONG WITH THE NOTARIZED AFFIDAVIT FOR PHYSICAL INABILITY TO APPEAR FORM AT TIME OF SUBMISSION

FIRST OR SECOND PERSON APPEARING IN THE COUNTY CLERK'S OFFICE DRIVER'S LICENSE/I.D. # _____

FIRST OR SECOND PERSON APPEARING IN THE COUNTY CLERK'S OFFICE PHONE # _____

LOCATION OF INMATE AND INMATE # _____

CEREMONY DATE _____ CEREMONY LOCATION _____

NAME OF PERSON SOLEMNIZING MARRIAGE AND PHONE # _____

PERSON SOLEMNIZING MARRIAGE DRIVER'S LICENSE/I.D. # _____

IF EITHER OR BOTH APPLICANTS HAVE BEEN DIVORCED IN THE PAST SIX MONTHS, PLEASE PROVIDE A COPY OF YOUR FINAL DIVORCE DECREE. YOUR WEDDING CEREMONY MUST TAKE PLACE WITHIN 90 DAYS OF THE ISSUE DATE OF YOUR MARRIAGE LICENSE

COUNSELOR'S NAME _____ DATE _____

COUNSELOR'S SIGNATURE _____ PHONE # _____

**AFFIDAVIT OF INABILITY TO APPEAR AND REQUEST FOR ISSUANCE OF A
PUBLIC MARRIAGE LICENSE PURSUANT TO FAMILY CODE SECTION 426**

We, the undersigned, do hereby declare:

That _____
(Print full legal name(s) of person(s) unable to appear)

is/are physically unable to appear in person at the County Clerk's Office to apply for a marriage license due to:

[] Incarceration

and hereby request the marriage license be issued to _____
(Print name of person solemnizing marriage)
as the officiate who will be solemnizing the marriage.

(Print Full Legal Name of First Person) [Date of Birth (MM/DD/CCYY)]

(Print Full Legal Name of Second Person) [Date of Birth (MM/DD/CCYY)]

We certify under penalty of perjury under the laws of the State of California that the foregoing information is true and correct.

Executed on: _____ at _____
(MM/DD/CCYY) (City/State)

▶ _____
(Signature of First Person)

Executed on: _____ at _____
(MM/DD/CCYY) (City/State)

▶ _____
(Signature of Second Person)

Executed on: _____ at _____
(MM/DD/CCYY) (City/State)

▶ _____
(Signature of Person Solemnizing Marriage)

NOTE: The person solemnizing the marriage must *physically* present the completed affidavit to the County Clerk at the time the marriage license is issued [Family Code Sections 426(a); 502(a)]. The signature(s) of the person(s) who is/are physically unable to appear in person at the County Clerk's Office *must be authenticated by a Notary Public or a Court* prior to the County Clerk issuing the marriage license [Family Code Sections 426(c); 502(c)]. **NOTE:** Government Code (GC) Section 8824(a) prohibits the notary public who has authenticated the signature(s) of the person(s) who is/are unable to physically appear in person at the County Clerk's Office from also being the person solemnizing the marriage.

INMATE MARRIAGE FINAL APPROVAL

All legal requirements have been met for Inmate _____

CDC# _____ and (Bride-to be) _____

to be married.

Counselor's Notes If denied: _____

Ceremony Date: _____

Marriage License #: _____

Bride to-be Guest (Limit Ten)

(Note: Visitors must be approved prior to day of ceremony, contact CSP-Solano Visiting Department)

Name: _____ DL# _____ Name: _____ DL# _____

Name: _____ DL# _____ Name: _____ DL# _____

Name: _____ DL# _____ Name: _____ DL# _____

Name: _____ DL# _____ Name: _____ DL# _____

Name: _____ DL# _____ Name: _____ DL# _____

Inmate Guest (Limit Two)

(Inmate guests may attend ONLY if their work Incentive Program Schedule are not interrupted)

Name: _____ CDC# _____ Housing: _____

Name: _____ CDC# _____ Housing: _____

Correctional Counselor-I: _____ Approved () Denied ()

Correctional Counselor-II: _____ Approved () Denied ()

Facility Captain : _____ Approved () Denied ()

Associate Warden: _____ Approved () Denied ()