

Domestic Partner Approval Form

I	am a(n)		at the University of	
Print first and last n	ame University status (s	student, staff, faculty, or alum)	
Pennsylvania. I am requesting that my spouse/partner, _				
		Print first and last name		
University of Pennsylvania sp	pouse/partner identification card	. We currently reside	at:	
Address	City	State	Zip Code	
Signature of sponsor	<u> </u>		Date	
Signature of partner		 Date		
Signature of partier			Date	
State of				
County of				
The foregoing document was	subscribed and sworn before me	e on the day of	of,	
Signature of Notary		Commission Expiration		
Notary Seal				

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