
INMATE MARRIAGE REQUEST TRACKING AND APPROVAL

This form will be attached to Inmate Marriage Request forms (OP-090128 Attachment A) received by the Agency Chaplain. The Agency Chaplain will review the request forms and forward them to the appropriate facility.

INMATE MARRIAGE REQUEST INFORMATION

Inmate's Last Name: _____ DOC Number: _____
Fiancé(e)'s Last Name: _____ Month of Marriage Ceremony: _____
Date Received: _____ Facility: _____

AGENCY CHAPLAIN REVIEW

Reviewed by the Oklahoma Department of Corrections Agency Chaplain to ensure the nature of the marriage does not violate the restrictions placed on the facility chaplain by their ordaining/endorsing religious organization, and if so to work with the facility administration to ensure such requests are processed appropriately through other staff:

Agency Chaplain Signature: _____ Date: _____

FOR FACILITY CHAPLAIN/FACILITY COORDINATOR USE

Marriage Ceremony Date: _____ Date Marriage License Obtained: _____
Clergy Information Verified by County Records: Verification Method (e.g. Online/Phone/Mail/Email) _____
Chaplain/Facility Coordinator Signature: _____ Date: _____

ADMINISTRATIVE REVIEW

Deputy Warden/Assistant Regional Supervisor (ARS) Review:

Approval: Yes No Signature: _____ Date: _____

Facility Head/Deputy Director Review:

Approval: Yes No Signature: _____ Date: _____