



The University of Georgia

Human Resources

Declaration of Domestic Partnership

Office use only	
Rec'd	_____
F/E/S ver	_____
UGAC email	_____
F/E/S email	_____
Log	_____

Name of <input type="checkbox"/> UGA faculty/staff member <input type="checkbox"/> UGA student (check one)		
_____	_____	_____
Last	First	MI

Name of partner <input type="checkbox"/> UGA faculty/staff <input type="checkbox"/> UGA student <input type="checkbox"/> Neither (check one)			
_____	_____	_____	_____
Last	First	MI	

by our signatures on page 2, we each certify and declare we are each other's sole domestic partner as described below.

- We are both **at least eighteen (18) years old** and mentally competent to consent to a civil contract; and
- We are not acting under force or duress; and
- Neither of us is married to or legally separated from any other person and neither of us is engaged in another domestic partnership; and
- We are not related by blood or marriage to a degree of closeness that would prohibit legal marriage in the state in which we reside; and
- We have shared residence or financial interdependence for **at least three (3) months** and intend to reside together indefinitely; and
- We are engaged in a committed relationship of mutual caring and support and are jointly responsible for our common welfare; and
- We share joint responsibility for our common welfare, living expenses, and financial obligation as provided by applicable law.
 - a. Qualifying domestic partnership agreement. NOTE: A qualifying domestic partnership agreement is a legally binding agreement between two individuals creating personal and financial interdependence (i.e., joint and several liability for each other's debts and expenses, responsibility for mutual care, etc.)
 - b. Co-parenting agreement
 - c. Adoption agreement
 - d. Joint deed, mortgage agreement, or lease
 - e. Joint ownership of a motor vehicle
 - f. Joint bank account
 - g. Joint credit card account or other liability
 - h. Designation of domestic partner as a primary beneficiary for life insurance
 - i. Designation of domestic partner as a primary beneficiary of retirement contract
 - j. Designation of domestic partner as a primary beneficiary in will
 - k. Durable property or health care power of attorney

Acknowledgements by the partners:

1. We understand that a civil action may be brought against one or both of us for any losses (including attorney's fees and costs) due to any false statement contained in this Declaration or for failure to notify the University of Georgia of changed circumstances as required in the "Termination" section on page 2. The undersigned faculty/staff/student further understands that falsification of information in this Declaration or failure to notify the University of Georgia of changed circumstances as described below may lead to disciplinary action, including discharge from employment (for faculty/staff) or suspension or expulsion (for students).
2. We have provided information in this Declaration for use by the University of Georgia for the sole purpose of determining our eligibility for certain UGA services. We understand and agree the University of Georgia is not legally required to extend such services to domestic partners and the University of Georgia may change or terminate these services in its discretion without consent of any faculty or staff member, student, or groups of faculty or staff members or students.
3. We understand the information provided in this Declaration will be treated as confidential by the University of Georgia but will be subject to disclosure upon the express written authorization of the undersigned individuals or if otherwise required by law.
4. We understand this Declaration may have legal implication relating, for example, to our ownership of property. We understand that before signing this Declaration we should seek competent legal and tax advice concerning such matters. We acknowledge that the University of Georgia has provided us with no advice in this regard.

Continue to page 2



Declaration of Domestic Partnership

◀ Continued from page 1

Process for termination of domestic partnership

If there is any change in the domestic partnership status that makes this *Declaration* invalid or erroneous, the faculty/staff/student must submit to the University of Georgia a written *Termination of Domestic Partnership*. The faculty/staff/student shall provide such written notice **within thirty (30) days** of such a change. The faculty/staff/student understands that another *Declaration of Domestic Partnership* may not be filed **until 90 days** after the date the relationship ends as indicated on the *Termination of Domestic Partnership*.

The faculty/staff/student understands that termination of services obtained as a result of this *Termination* will be effective on the last day of the month during which the domestic partnership ends. Receipt by the University of Georgia of a *Termination of Domestic Partnership* from either partner shall be deemed conclusive evidence of the termination of the domestic partnership status for purposes of these services. In the event more than one such *Termination of Domestic Partnership* is provided with conflicting dates of termination of domestic partnership, the University of Georgia shall rely on the document with the earlier date.

We affirm, under penalty of perjury, the statements in this Declaration are true and correct and we agree to the terms therein.

Faculty/staff/student signature Date Domestic partner signature Date

Faculty/staff/student printed name Date of birth Domestic partner printed name Date of birth

Faculty/staff/student complete home address Domestic partner complete home address

Faculty/staff SSN or student ID #

Faculty/staff/student email address or phone (REQUIRED)

✓ After receiving the *Declaration of Domestic Partnership*, Human Resources will contact the faculty/staff/student the next business day via email to communicate the next steps in accessing campus services. Please wait for the email communication from HR before attempting to obtain services.

Faculty/staff/students, mail or deliver this completed, signed form to: University of Georgia
Employee Benefits
Human Resources Bldg.
215 S. Jackson St.
Athens, GA 30602

Questions?
Call 706-542-2222