



NORTH CAROLINA BOARD OF FUNERAL SERVICE

1033 WADE AVE., SUITE 108
RALEIGH, NC 27605

PHONE (919) 733-9380
FAX (919) 733-8271

APPLICATION FOR INDIVIDUAL LICENSE

INSTRUCTIONS

- 1) This application must be typed or printed legibly in ink, signed by the applicant, and notarized. Illegible applications will be returned to the applicant.
- 2) This application must be accompanied by a fee of \$150.00. Review license requirements carefully as the fee is non-refundable. Pursuant to 21 NCAC 34A .0202 and N.C.G.S. 25-3-506, a fee of \$25.00 will be charged for returned checks.
- 3) This application must be accompanied by a small, recent photograph of the applicant.
- 4) All applicants must:
 - a. be at least 18 years of age;
 - b. be of good moral character;
 - c. have completed the requirements of a resident traineeship for the type of licensure being sought; and
 - d. have passed the North Carolina State Board Laws and Rules Exam.
- 5) All applicants for a funeral service license must:
 - a. be a graduate of and receive an associate degree from a mortuary science college approved by the Board or a school of mortuary science accredited by the American Board of Funeral Service Education, and have completed a minimum of 60 semester hours or 90 quarter hours of instruction as prescribed by a mortuary science college approved by the Board or a school of mortuary science accredited by the American Board of Funeral Service Education. You must request a **certified** transcript from each college where you attended courses towards this educational requirement. Each such transcript must be mailed directly to the NC Board of Funeral Service (the "Board"); and
 - b. have passed the National Board Exams administered by the International Conference of Funeral Service Examining Boards, or the North Carolina State Board Exam for Arts and the North Carolina State Board Exam for Science.
- 6) All applicants for a funeral directing license must:
 - a. be a graduate of a Funeral Director Program at a mortuary science college approved by the Board or a school of mortuary science accredited by the American Board of Funeral Service Education, and have completed a minimum of 32 semester hours or 48 quarter hours of instruction as prescribed by a mortuary science college approved by the Board or a school of mortuary science accredited by the American Board of Funeral Service Education. You must request a **certified** transcript from each college where you attended courses towards this educational requirement. Each such transcript must be mailed directly to the Board;
 - b. have passed the North Carolina State Board Exam for Arts; and
 - c. have passed the North Carolina State Board Exam for Pathology.
- 7) All applicants for an embalming license must:
 - a. be a graduate of a mortuary science college approved by the Board. You must request a **certified** transcript from each college where you attended courses towards this educational requirement. Each such transcript must be mailed directly to the Board; and
 - b. have passed the North Carolina State Board Exam for Science.
- 8) Applications that are not completed within ninety (90) days of submission to the North Carolina Board of Funeral Service shall be denied.
- 9) Upon receipt of a completed application, the Board will provide you with instructions on how to submit fingerprints to the NC State Bureau of Investigation for a criminal background check, along with the appropriate fee.

1. Full Name: _____

2. Physical Address of Personal Residence: _____

City: _____ County: _____ Zip: _____

Mailing Address of Personal Residence (if different than Physical Address): _____

City: _____ County: _____ Zip: _____

3. Work Phone #: _____ Home Phone #: _____ Cell Phone #: _____

4. E-mail address: _____ Social Security Number: _____

5. Date of Birth: _____ Place of Birth: _____ Sex: _____

6. Name and Address of Present Employer: _____

7. Which type of individual license are you seeking?

_____ Funeral Service _____ Funeral Director _____ Embalmer

8. Education:

(a) Name of college(s) attended: _____

(b) Dates of attendance: _____

(c) Graduation date and degree(s) obtained: _____

9. Employment History for Preceding Three (3) Years:

<u>Employer</u>	<u>Address</u>	<u>Dates of Employment</u>	<u>Nature of Work</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

10. Have you ever had any occupational or business license which has been denied, suspended, or revoked by any local, state, or federal agency?

_____Yes _____No **If yes, attach a statement providing complete details as to the reason for denial and the date, location and details of any violation that led to action against your license, the terms of any discipline imposed by the licensing authority and whether said terms have been satisfied.**

11. Have you ever been convicted of any felony or misdemeanor crime(s) (other than traffic infractions)?

_____Yes _____No **If yes, attach a detailed statement providing the jurisdiction, charge, and disposition of each conviction.**

12. Have you ever been the subject of adverse action by any local, state, or federal agency?

_____Yes _____No **If yes, attach a statement giving complete details as to location, date, and the type of adverse action. Also, include the terms of any action taken by the authority and if those terms have been satisfactorily completed.**

13. Within the preceding two (2) years, have you been the subject of any investigation for employee misclassification?

_____Yes _____No **If yes, attach a statement giving complete details as to the results of the investigation.**

VERIFICATION BY APPLICANT

State of North Carolina, County of _____

_____ (Applicant), being first duly sworn, deposes and says that he (she) is the applicant named in the foregoing application; that he (she) has read the foregoing application and that the same is true of his (her) own knowledge except as to matters and things therein stated on information belief and that as to such matters and things, he(she) believes them to be true. The applicant understands that, should a permit be granted, it may be revoked or suspended under the provisions of Article 13A, Chapter 90, North Carolina General Statutes and the Rules of the Board of Funeral Service adopted pursuant to said Article.

Signature of Applicant

STATE OF NORTH CAROLINA

COUNTY OF _____

Sworn to and subscribed before me by _____ this the _____
day of _____, 20 ____.

Name of Applicant

SEAL

Notary Public – Official Signature

My commission expires: _____

Notary Public – Printed Name