

**REGISTRATION FOR THE NORTH CAROLINA LAWS AND RULES
EXAMINATION**

(Please Type or Print Clearly)

For more information regarding the administration and certification of the North Carolina Laws and Rules Examination, please visit: www.scantron.com

1. Full Name: _____

2. Address: _____

City: _____ State: _____ Zip: _____

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

4. E-mail address: _____ Birthdate: _____
(Note – Important Exam Information will be sent to this E-mail Address)

5. Have you previously taken the North Carolina Laws and Rules Examination? Yes _____ No _____

6. Have you graduated from mortuary science college? Yes _____ No _____

If yes, a certified transcript of your mortuary science college records must be mailed directly to the Board by your mortuary science college.

7. Do you have a disability that requires a reasonable accommodation for you to take the North Carolina Laws and Rules Examination?

Yes _____ No _____

If yes, please review the reasonable accommodation policy at: www.scantron.com

By signing below, I authorize the North Carolina Board of Funeral Service (the “Board”) to verify to Scantron my eligibility to sit for the North Carolina Laws and Rules Examination (the “Examination”). I also authorize Scantron to release my results on the Examination to the Board. I understand that information set forth in this Registration may be provided to Scantron by the Board. I agree to abide by the rules and regulations governing the administration and certification of the Examination, and to accept the results of the Examination as evidence of my knowledge of the laws and rules governing the practice of funeral service in North Carolina. I understand that I am responsible for paying Scantron directly for any and all testing fees required for the Examination, and that such testing fee is non-refundable. I also understand that this Registration expires one (1) year from the date that it is submitted to the Board. The information provided in this Registration is true and accurate, to the best of my knowledge.

Signature

Date