

Please Type or Print in Ink  
Mail to: P.O. Box 309522  
Montgomery, AL 36130

ALABAMA BOARD OF FUNERAL SERVICE  
APPLICATION  
FOR PERMANENT LICENSE AS FUNERAL DIRECTOR

FORM- F.D.  
05-2015

Name: \_\_\_\_\_  
(First) (Middle) (Last)

Residence Address: \_\_\_\_\_  
(Street & No. / P.O. Box) (City, State Zip)

Business Address: \_\_\_\_\_  
(Street & No. / P.O. Box) (City, State Zip)

Telephone Number: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

EMAIL Address: \_\_\_\_\_

I have a certificate of High School graduation or its equivalent GED Certificate:  YES  NO

Date of Diploma or Certificate: \_\_\_\_\_

I have a certificate of completion from an accredited mortuary or funeral service school as having completed a course of instruction in funeral arts from \_\_\_\_\_ (Mortuary School).

Date of Completion: \_\_\_\_\_

I have a bachelor degree or higher from an accredited university or school.  YES  NO

Date of Completion: \_\_\_\_\_

**Attach herewith a transcript, diploma, bachelor degree, or certificate of completion from the above school.**

Name and Address of High School or of the Institution or Agency that granted Diploma or GED Certificate:

\_\_\_\_\_  
(Name) (Street & No. / P.O. Box) (City, State Zip)

Name and Address of Funeral Establishment where employed:

\_\_\_\_\_  
(Name) (Street & No. / P.O. Box) (City, State Zip)

Under the provision of §34-13-71 and 72 of the Code, I submit the following data as to training and experience as an Apprentice Funeral Director.:

Name and Address of Funeral Establishment at which training was received (if more than one establishment please list on a separate attach sheet of paper):

\_\_\_\_\_  
(Name) (Street & No. / P.O. Box) (City, State Zip)

Trained from: \_\_\_\_\_ to \_\_\_\_\_

Date of breaks in training within the past three years of which waiver of training time was requested and the reason thereof: \_\_\_\_\_ to \_\_\_\_\_ Reason: \_\_\_\_\_

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Have you ever been convicted of a felony or misdemeanor, other than a traffic violation?  YES  NO

If yes, please attach details.

I certify that I am a citizen of the United States or legally present in the United States?  YES  NO

Affidavits required by §34-13-71 are attached hereto and made a part of this application.

I hereby apply for license as a FUNERAL DIRECTOR for the fiscal year ending September 30, 20 \_\_\_\_ and in support of such application submit and attest to the information and data supplied herewith. I also attach herewith application fee of \$100.00. I have read and understand the provisions of Title 34, Chapter 13, Code of Alabama, 1975, which govern the issuance and maintenance of the License requested. I UNDERSTAND THAT ANY FALSE STATEMENT GIVEN HEREIN WILL SUBJECT MY LICENSE TO REVOCATION.

(Signature of Applicant)

Subscribed and sworn to before me, a Notary in the State of Alabama this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

Seal

Notary Public

My Commission expires \_\_\_\_\_.

Office Use Only

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State Law Exam		Arts		Science		Perm No.:		Control No.:	
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Score:		Date:		Date:		Original Issued:			
		Score:		Score:					