

179 Summers Street, Suite 319 Charleston, WV 25301 304.558.0302

If you make a false statement concerning any question on this application, you may be subject to disciplinary action including but not limited to revocation or suspension of your license.

DEMOGRAPHIC INFO	DRMATION:						
Funeral Director/Embalmer Name				License No. FD #	EMB#		
Mailing Address							
County of Residence	Day Phone Email			Employer			
Practice Status (A = Active I = Inactive E = Emeritus) Other States licensed:							
EMPLOYMENT STATUS: check ALL that apply.							
□ Employee at a funeral establishment □ Unemployed □ Retired □ Not employed at a funeral establishment □ Other (Explain):							
PRACTICE STATUS: check ALL that apply.							
☐ Active and currently pract☐ Active but not currently practIt is recommended that you like	acticing **Check t				" below.		
□ Inactive **Do not check this box if you are age 65 or older: see "Emeritus" below. You must pay the renewal fee. Inactive status exempts you from the continuing education requirements while your license is Inactive, BUT it also prohibits you from being employed as a funeral director/embalmer. In order to reactivate your license, you will be required to notify the Board in advance and obtain any continuing education credits missed while Inactive.							
□ Emeritus **Check this box if you are 65 years of age or older. You must pay the renewal fee. You are exempt from the continuing education requirements. CHILD SUPPORT OBLIGATION:							
Pursuant to W.Va. Code §48A- and correct. If you refuse to an	5A-5(c), each applic					of false swearing, th	at these answers are true
Do you have a child support obligation?						□ YES	S □ NO
2. If the answer to question 1, above, is YES, are you in arrearage (or behind in payment)?						□ YES	
3. If the answer to question 2, above, is YES, does your arrearage equal or exceed the amount of child support payable for 6 months?							
4. Are you the subject of a child support related subpoena or warrant?						□ YES	S □ NO
CRIMINAL BACKGRO	OUND:						
1. Have you ever been convicted of a felony or a federal crime?						□ YES	S □ NO
2. Have you been convicted of a felony or a federal crime since you last renewed your license?						□ YES	S □ NO
3. Are you currently charged with a felony crime, federal crime, or the equivalent? ☐ YES ☐ NO							
SIGNATURE:							
Iinformation is true and correct t	o the best of my kno	owledge.	do	hereby certify, under	r penalties of perju	ary and false swearin	g, that the above
Signature: Date:							
1	Do <u>NOT</u> separate	application fi	om stub. Return e	ntire form and pa	ayment to the ac	ddress below.	
State of West Virginia Board of Funeral Service	Examiners						
APPLICATION FEES: Attach the following fee to this application and mail to address listed below.							
License Number FD#	Due Date	Amount Due	After July 1		After one (1) year, this application becomes invalid and applicant must apply for reinstatement. Contact WVBFSE		
EMB#					for	more information on	ı reinstatement.
NAME:	June 30th	\$250.00	\$440.00		REINSTATEMENT FEE - \$350.00, RENEWAL FEE, \$ 250.00, LATE FEE - \$ 190.00 TOTAL - \$ 790.00		

Make check or money order payable to: "WVBFSE". Cash and credit card payments cannot be accepted.

NAME: ADDRESS: CITY, STATE, ZIP Mail ENTIRE FORM to: Board of Funeral Service Examiners 179 Summers Street, Suite 319 Charleston, WV 25301