



**CERTIFICATE OF REGISTRATION AS AN APPRENTICE EMBALMER
 APPLICATION FEE \$120**

SECTION A: APPLICANT INFORMATION						
Last Name		First		Middle Initial	Former Name (If applicable)	
Residence Address			City	State	Zip Code	
Residence Telephone Number		Date of Birth		Social Security Number		
Have you ever taken the California Embalmer License Exam? No <input type="checkbox"/> Yes <input type="checkbox"/> if yes, date you took the exam _____						
Have you previously been Registered as an Apprentice Embalmer in California? No <input type="checkbox"/> Yes <input type="checkbox"/> if yes, provide previous certificate number _____						
SECTION B: EDUCATION						
Have you requested/submitted "Official Transcripts" from your high school be sent directly to the Bureau? Yes <input type="checkbox"/> No <input type="checkbox"/> if no, you will not be issued a certificate, until the Bureau receives "Official Transcripts." "Official Transcripts" are transcripts sent directly from the educational institution, in a sealed envelope, to the Cemetery and Funeral Bureau at 1625 North Market Blvd., Suite S-208, Sacramento, CA 95834.						
SECTION C: APPRENTICE EMPLOYMENT						
Name of Employer's Funeral Establishment				License Number FD		
Establishment Address		City		State CA	Zip Code	
Establishment Mailing Address (if different than above)		City		State CA	Zip Code	
Establishment Telephone Number			Establishment Fax Number			
Name of Managing Funeral Director				License Number FDR		
Name of Supervising Embalmer				License Number EMB		
SECTION D: MORTUARY SCIENCE COLLEGE						
(To be completed only if you are currently enrolled in a Mortuary Science Program and want to be placed on Student status).						
<input type="checkbox"/> I want to be placed on Student Status while attending Mortuary Science College. (Complete Section I of the application.)						
FOR BUREAU USE ONLY						
Date Cashiered		Amount Cashiered		ATS Number		Receipt Number
Official High School Transcripts	SID Number/On File With/Date Received		Enforcement Check	Date License Issued		AE Number Issued

SECTION E: BACKGROUND INFORMATION

Has the Cemetery and Funeral Bureau ever issued you a personal license? No Yes

If yes, provide license type(s) and number(s).

Have you previously submitted fingerprint cards or a copy of a Request for Live Scan Service form to the Cemetery and Funeral Bureau? No Yes

If yes, for what license type, and the approximate date _____

If no, submit a copy of your Request for Live Scan Service form, along with this application, verifying that fingerprints have been scanned and all applicable fees have been paid.

Have you ever had any professional or vocational license or registration denied, suspended, revoked, placed on probation or other disciplinary action taken by this or any other governmental authority in this state or any other state, or any foreign country? No Yes

If yes, attach an explanation that includes the license type, the action taken, by what state, and the date. Also include a copy of the administrative action, and if applicable, copies of court documents, arrest records verification of restitution received by the court, and verification of successful completion of probation.

SECTION F: APPLICANT CERTIFICATION

I certify under penalty of perjury under the laws of the State of California that all statements furnished in connection with this application are true and accurate.

Signature of Applicant **Date**

SECTION G: 40 HOUR WORK WEEK CERTIFICATION

If a student apprentice is working a 40-hour week, and wishes to receive credit for his or her apprenticeship, the employer and supervising embalmer must sign below, thereby certifying that the apprentice is a full-time employee and is entitled to a regular apprenticeship credit.

Signature of the Managing Funeral Director **Date**

Signature of Supervising Embalmer **Date**

Note: The information solicited on this form is required pursuant to Business and Professions Code Section 7661 and 7662. All items in this application are mandatory; none are voluntary. Failure to provide any of the requested information will result in the application being considered incomplete (incomplete applications are subject to abandonment one year from the date the applicant is notified of deficiencies). All information provided will be used to determine qualification for licensure, per the Business and Professions Code that authorizes the collection of this information. Per California Civil Code Section 1798.17 (Information Practice Act), the Chief of the Cemetery and Funeral Bureau is responsible for maintaining information in this application. This information may be transferred to other governmental and enforcement agencies. Individuals have the right to review the records maintained on them by the agencies, unless the records are exempt by Section 1798.40 of the Civil Code. Requests for information may be addressed to the custodian of records: Bureau Chief, Cemetery and Funeral Bureau, 400 R Street, Suite 3080, Sacramento, CA 95814, (916) 322-7737.

Section 30 of the Business and Professions Code and Public Law 94-455 (42 U.S.C.A. 405 (c)(2)(c)) authorizes the collection of your Social Security Number (SSN). The disclosure of your SSN is mandatory. The information will be used exclusively for tax enforcement purposes and for purposes of compliance with Section 11350.6 of the Welfare and Institutions Code. If you fail to disclose your SSN, you will be reported to the Franchise Tax Board, which may assess a \$100.00 penalty against you. Questions regarding this requirement must be directed to the Franchise Tax Board: So. California (800) 852-7050, No. California (800) 852-5711, or Sacramento at (916) 369-0500.

SECTION H: FUNERAL ESTABLISHMENT CERTIFICATION

We, _____ holder of Funeral Establishment license number, _____ hereby certify under penalty of perjury under the laws of the State of California that _____ is employed as an apprentice in the art of embalming in the above establishment, and upon issuance of a *Certificate of Registration as an Apprentice Embalmer*, under the supervision of _____, who is employed as a full-time embalmer in this establishment as of this date, and is holder of Embalmer License Number _____ We also certify that we have been approved to train apprentices for the current year. We further certify that any changes affecting apprenticeship of said applicant will be promptly reported to the Cemetery and Funeral Bureau.

Signature of Managing Funeral Director _____
Date

SECTION I: SUPERVISING EMBALMER CERTIFICATION

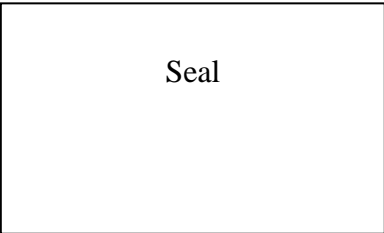
I, _____, licensed at least two years in the State of California, immediately preceding the date of this application and holder of Embalmer’s License No. _____ hereby certify under penalty of perjury under the laws of the State of California, that _____ will be employed as an apprentice embalmer under my supervision upon the issuance of a *Certificate of Registration as an Apprentice Embalmer*. I further certify that any changes affecting apprenticeship will be promptly reported to the Cemetery and Funeral Bureau.

Signature of Supervising Embalmer _____
Date

SECTION J: EMBALMING COLLEGE CERTIFICATION
(To be completed by Mortuary Science College only if applicant wants to be placed on Student Status.)

We, _____
(Name of College)
hereby certify that _____
(Name of Student)

- is attending this mortuary college
- has made arrangements to attend this Mortuary Science College beginning _____



Signature of College Official _____
Title _____
Date

Note: Business and Professions Code Section 7666(c) states: A student attending a Mortuary Science College may register as an apprentice during his or her college term but shall receive no credit for apprenticeship on the term required by this code unless he or she is also a full-time employee of a funeral establishment.



INFORMATION AND INSTRUCTIONS FOR AN APPRENTICE EMBALMER APPLICATION

California law requires all apprentice embalmers to serve a two-year apprenticeship under the supervision of an embalmer who has at least two years practical experience as a California licensed embalmer. Business and Professions Code Section 7662, states in order to qualify as an apprentice embalmer, an applicant shall comply with the following requirements:

- a) Be over 18 years of age;
- b) Not have committed acts or crimes constituting grounds for denial of licensure under Business and Professions Code (BPC) Section 480;
- c) Furnish proof showing completion of a high school course or instead he or she may furnish the Bureau with evidence that he or she has been licensed and has practiced as an Embalmer for a minimum of three years within the seven years preceding his or her application in any other state or country and that the license has never been suspended or revoked for unethical conduct.

The following application checklist has been provided to assist you with completing this application. Direct all questions regarding this application to the Cemetery and Funeral Bureau, Licensing Unit, at (916) 574-7870.

APPLICATION CHECKLIST

- ✓ Submit a completed and signed application with a \$120 application fee.
- ✓ Request an “*official*” high school transcript or your high school equivalency certificate be sent directly to the Bureau.

“*Official Transcripts*” are transcripts sent directly from the educational institution, in a sealed envelope, to the Cemetery and Funeral Bureau at 1625 North Market Blvd., Suite S-208, Sacramento, CA 95834.
- ✓ Included your completed Request for Live Scan Service form or provide information on when your fingerprints were previously submitted to the Bureau. For more information regarding Live Scan visit the Bureau’s website.
- ✓ Have your Supervising Embalmer and the Managing Funeral Director complete sections H and I.
- ✓ If you want to be placed on Student Status complete section D and have your College complete section J.

Business and Professions Code § 7666 (c): A student attending Mortuary Science College may register as an apprentice during his or her college term but shall receive no credit for apprenticeship on the term required by this code unless he or she is also a full-time employee of a funeral establishment.

Mail your completed application with the appropriate application fee payable to:

Cemetery and Funeral Bureau: P.O. Box 989003, West Sacramento, CA 95798-9003

CEMETERY AND FUNERAL BUREAU

1625 North Market Blvd., Suite S-208, Sacramento, CA 95834
 P (916) 574-7870 | F (916) 928-7988 | www.cfb.ca.gov



SUPPLEMENTAL APPLICATION FOR LICENSURE

Applicants for the following licensure categories must complete and submit this form with their application.

- Funeral Director
- Cemetery Manager
- Crematory Manager
- Embalmer
- Cemetery Broker
- Cremated Remains Disposer
- Apprentice Embalmer
- Cemetery Salesperson

APPLICANT INFORMATION			
LAST NAME	FIRST NAME		MIDDLE INITIAL
ADDRESS	CITY	STATE	ZIP CODE
PHONE NUMBER (optional)	SSN OR ITIN		
FORMER NAME ON LICENSE (if applicable)	LICENSE(S) APPLYING FOR		
BACKGROUND INFORMATION:			
<p>Have you ever served in the United States Military?</p> <p>If yes, you may qualify for expedited processing of your application. Any experience or education received while serving in the military may be eligible to be applied towards licensure requirements. While responding is optional, you must respond to the question to qualify.</p>			<input type="checkbox"/> YES <input type="checkbox"/> NO
<p>Business and Professions Code section 135.4 provides that the Cemetery and Funeral Bureau must expedite, and may assist, the initial licensure process for certain applicants described below.</p> <p>Do any of the following statements apply to you:</p> <ul style="list-style-type: none"> • You were admitted to the United States as a refugee pursuant to section 1157 of title 8 of the United States Code; • You were granted asylum by the Secretary of Homeland Security or the United States Attorney General pursuant to section 1158 of title 8 of the United States Code; or, • You have a special immigrant visa and were granted a status pursuant to section 1244 of Public Law 110-181, Public Law 109-163, or section 602(b) of title VI of division F of Public Law 111-8, relating to Iraqi and Afghan translators/interpreters or those who worked for or on behalf of the United States government. <p>If you selected YES, you must attach evidence of your status as a refugee, asylee, or special immigrant visa holder. Failure to do so may result in application review delays.</p>			<input type="checkbox"/> YES <input type="checkbox"/> NO
CERTIFICATION OF APPLICANT			
<p>I certify under penalty of perjury, under the laws of the State of California, that all information provided on this form is true and correct.</p>			
_____ SIGNATURE		_____ DATE	

CEMETERY AND FUNERAL BUREAU

1625 North Market Blvd., Suite S-208, Sacramento, CA 95834

P (916) 574-7870 | F (916) 928-7988 | www.cfb.ca.gov



NOTICE ON COLLECTION OF PERSONAL INFORMATION

Collection and Use of Personal Information

The Department of Consumer Affairs Cemetery and Funeral Bureau (Bureau) collects the personal information requested on this form in accordance with Business and Professions Code (BPC) sections 30, 114.5, 115.4, 115.5, 144, 144.5, 480, the Cemetery and Funeral Act (BPC section 7600, et. seq.), and the Information Practices Act (Civ. Code section 1798, et seq.). The Bureau uses this information principally to identify and evaluate applicants for licensure, issue and renew licenses, and enforce licensing and reporting standards set by law and regulation.

Mandatory Submission

Submission of the requested information is mandatory unless otherwise noted on the application and/or form. The Bureau cannot consider your application for licensure or renewal unless you provide all of the requested information.

Failure to provide any of the requested information will result in the application being deemed incomplete pursuant to California Code of Regulations, title 16, sections 1254, 2328 and 2329. Incomplete applications are subject to abandonment one year from the date the applicant is notified of deficiencies.

In addition, BPC sections 30 and Public Law 94-455 (42 U.S.C.A. 405 (c)(2)(C)) authorize the collection of your Federal Employer Identification Number (FEIN) or Social Security Number (SSN) at the time of licensure. The information will be used for purposes of tax or child support enforcement, and verification of licensure and examination status. If you fail to disclose your FEIN or SSN, you will be reported to the Franchise Tax Board, which may assess a \$100.00 penalty against you.

Access to Personal Information

The Bureau is responsible for maintaining the information contained within this application. You may request a copy of or review the records maintained by the Bureau that contain your personal information, as permitted by the Information Practices Act. You may submit your request to the Bureau's Custodian of Records listed in the contact information section below.

Possible Disclosure of Personal Information

The Bureau makes every effort to protect the personal information you provide us. The information you provide, however, may be disclosed under the following circumstances:

- In response to a Public Records Act request (Government Code Section 6250, et seq.),
- To another government agency as required by state or federal law; or,
- In response to a court or administrative order, a subpoena, or a search warrant.

Contact Information

For questions about this notice or access to your records, you may contact the Custodian of Records, Cemetery and Funeral Bureau at 1625 North Market Boulevard, Suite S-208, Sacramento, CA 95834, by phone at (916) 574-7870, or by e-mail at emailcfb@dca.ca.gov. For questions about the Department's Privacy Policy, you may contact the Department of Consumer Affairs at 1625 North Market Boulevard, Sacramento, CA 95834, by phone at (800) 952-5210, or by e-mail at dca@dca.ca.gov.