

SCREEN	Α	CTION
CFB User Dashboard	1.	Locate CFB User
		Dashboard
Connect Support		
Welcor ofile Sign Out Link License		
Licenses Links & Resources		
License Type License# Issuance Date Expiration Date Name		
No records round. Cemerally and runeral bureau <<		
Applications Notifications		
New Application Q. Search Keyword		
Application Type License Type Application# Submitted Date Business Name Status Action Subject Date Sent		
No applications found. No records found.		
Showing 0 to 0 of 0 entries 《 〈 〉 》 10 ~ 《 〈 〉 》		
Create a New Application	2.	Click the New
		Application button
Applications		on the top right of
New Application		the Application's
		pane
Application Type License Type Application# Submitted Date Business Name Status Action		
No applications found.		
	~	
Application Type Selection	3.	Click the dropdown
Please select the application type from the drop down list below.		Director (EDP)
Application Funeral Director (FDR) Examination and License		Examination and
Create Application Cancel		License
Application Type Selection	4.	With the
Please select the application type from the drop down list below.		application
Application Funeral Director (FDR) Examination and License 🗸		selected, click the
Create Application Cancel		Application button

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Introduction Information Privacy Act Applicant Information Special Consideration Education Information	© © ©	Introduction tab Funeral Director (FDR) Examination and License Introduction Thank you for your interest in a California Funeral Director license.		5. 6.	Read the Introduction
Introduction Information Privacy Act Applicant Information Special Consideration Education Information	8 8 8	Funeral Director (FDR) Examination and License Introduction Thank you for your Interest in a California Funeral Director license.	d	6.	Click the green
Information Privacy Act Applicant Information Special Consideration Education Information	8 8 8	Introduction Thank you for your interest in a California Funeral Director license.	ſ	0.	
Applicant Information special Consideration	8 8	Thank you for your interest in a California Funeral Director license.			Save & Continue
pecial Consideration ducation Information	⊗				button
lucation Information	-	A funeral director is an individual who:			
	•	 Prepares for the transportation, burial, or disposal of human remains, Directs and supervises others who perform those functions, 			
	•	 Maintains and is responsible for the compliance of an establishment that prepares for the transportation, disposition, or care of human remains, Is employed by, or be the proprietor of, a licensed funeral establishment, and Maximum is consention with their name the word "fingual director", "undertaked" "montrials", or circular title implying they are opposed as a funeral director. 			
am Information	⊗	 Biglibility Requirements for Licensure; 			
ckground Information	\bigotimes	Be at least 18 years of age, Presses an Associate in Arts or Associate in Crience degree or equivalent and			
testation	⊗	Fossess an Associate in Ario of Associate in Science degree, or equivalent, and Have committed no acts or crimes constituting grounds for denial of licensure under Section 480 of the Business and Professions Code.			
e and Payment	8	To apply for licensure as a funeral director, you must:			
		 Pay the application and examination fee with a debit or credit card: Pay the application and examination fee with a debit or credit card: Payment of the license fee by a debit at this time, or you may wait until a passing examination result has been received to submit payment. Payment of the licensing fee prior to you examination will automatically issue your funeral director license once a passing score is received. This avoids any unnecessary delays. Pave official transcripts sent directly from the educational institution, in a sealed envelope, to the Cemetery and formeral Dureau at 1625 North Market Blod, Suite 5-208, Sacramento, CA 95534, and and due to the the dure to the Dureau for the Dureau for the Dureau to the Dureau for the Dureau to Tameter and the Dureau to Tameter and the Dureau to Tameter and the Dureau to the Institution on the Dureau to Tameter and the Dureau to Tameter and Dureau to the Dureau to Tameter and the Dureau to Tameter and the Dureau to Tameter and Dureau to the D			
		 Have completed the Live scan process or submitted manual ingerprint cards to the Bureau. For Live scan, have the form with you when you apply as you will need to input the All number. The funeral director license term is one year. 			
		For additional information contact the Bureau's Licensing Unit at emailcfb@dca.ca.gov or (916) 574-7870.			
			-		
		Information Privacy Act tab	,	7.	Read the Information Prive
roduction	0	Funeral Director (FDR) Examination and License			Act
ormation Privacy Act	8	3 Information Privacy Act		~	
plicant Information	8		8	8.	Click the green
ecial Consideration	8	Collection and Use of Personal Information			Save & Continue
ucation Information	8	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, 1145, 1154, 1155, 144, 1455, 1456, 446, edited by a funeral Act (BPC) section 7300, etc. and the Information Practices Act (C.C. dod section 1739, 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.			button
m Information	8	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			
kground Information	8	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			
	8	sugrect to abanoonment one year from the date the applicant is notified of dehoencies. 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			
testation		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.			
estation e and Payment	8				
estation 2 and Payment	8	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.			
estation	8	Access to Personal Information The Reveau incerponsible 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:			
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testation	8	Access to Personal Information The Reursal insepondiel 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. Positile Disclosure of Personal Information The Bureau takes every effort to protect the personal information you provide us. The information you provide, however, may be disclosed under the following circumstances: The Bureau takes every effort to protect the personal information you provide us. The information you provide, however, may be disclosed under the following circumstances: The Bureau takes every effort to protect the personal information you provide us. The information you provide, however, may be disclosed under the following circumstances: The Bureau takes every effort to protect the personal information you provide us. The information you provide, however, may be disclosed under the following circumstances: The Bureau takes every effort to protect the personal information you provide us. The information you provide, however, may be disclosed under the following circumstances: To approve the source of administrative order, a subpeena, or a search warrant. To and the generating taping of a subpeena, or a search warrant. To request the should the indice or access to your records, you may contact the Custodian of Records. Cemetery and Funeral Bureau at 1625 North Market Boulevard. Suite S-208. Spramento, CA 95834, by phone at (916) 574-7870, or by =-mail at emailstic bacca.com, or summation should be partment s' Privacy Policy, you may contact the Department of Consumer Affairs at 1625 North Market Boulevard. Suite S-208. Spramento, CA 95834, by phone at (916) 574-7870, or by =-mail at emailstic bacca.com, or examption to provide the personal and the contact and the docal cac			



SCREEN		ACTION
	Applicant Information tab	9. Complete all
		required Applicant
14.07012s	Funeral Director (FDR) Examination and Lirense	Information and
Introduction		
Applicant Information	Applicant Information If there ' Middle have or Initial Last have '	fields
Special Consideration	Interview Interview Latit Suffix Image: Interview Image: Interview Image: Interview	neids
Education Information	Other of Birth (D01) * Social Security Number or Individual Tapaget Identification Number (SSN or ITIN) *	
Exam Information	Former Name	*Note: All required
Background Information	0	fields have a red
Attestation	Address Type * Reserver Reserver	asterisk
Fee and Payment	Imail Address*	
		10 Click the green
	Telephone Number 1	Savo & Continuo
	- Malling Address	nonud
	b Mailing Address Same as ADR Address?	
	Street Like 1 Street Like 2	
	Suite City Zp	
/		
	Special Considerations tab	11. Answer all Special
		Considerations
Introduction	Funeral Director (FDR) Examination and License	questions and
Information Privacy Act		upload any
Applicant Information	Special Consideration	required
Special Consideration	Business and Professions Code section 195.4 provides that the Cemetery and Funeral Bureau (78) must expedite, and may assist, the initial licensure process for certain applicants.	documentation
Education Information	L De any of the following statements apply to you? * Yis	docomentation
Exam Information		
Background Information	 Now were somitted to the livines state endoge pursant to section 1157 of the 8 of the livines States Code; Now were spinished singuine by the Society of Homesand Society or the livines States Code; Now are spinished and your by the Society of Homesand Society or the Advice state States Code; Now are spinished and your by the Society of Homesand Society or the Homesand Society or the	Note: when
Fee and Payment	Unders States government.	answering Yes to any
	CIB also provides statistance to veterais, active-duity military personnel, and their spouse/domestic partners who would like to become icensed in California or are currently licensed and called to active duity.	of the questions,
	More information can be found on the GID Military Information page or email on at emailch@doc.co.gov. You can also email the Department of Consumer Affairs at military@doc.co.gov.	additional informatio
	2. One of the following must be selected: (In the full of the selected o	and lor uploading
		supporting
	Save & Continue Save & Eat	documentation
	/	
		be required
		12. Click the green
		12. Click the green Save & Continue
		12. Click the green Save & Continue button
		12. Click the green Save & Continue button
		12. Click the green Save & Continue button
		12. Click the green Save & Continue button



SCREEN		ACTION
	Education Information tab	13. Read the
		Instructions and
		answer the Official
Introduction	Funeral Director (FDR) Examination and License	Transcripts
Information Privacy Act	Success Internation	question
Applicant Information	Instructions	900000
Education Information	to strot me number searing on material postation and backets in material and backets on more sequence on the compared and backets	*Note: If Yes is
Exam Information	Have you requested "Official Transcripts" be sent to the Bareau?	selected the
Background Information	O'ne Ne	'Educational
Attestation S	Sine & Centinue Sine & Cell	Institution Name' will
		ho required and
		'Official Transcripts'
		provided by the
		educational institution
		14. Click the green
		Save & Continue
		button
	Exam Information tab	15. Answer the Exam
		question
Introduction	Funeral Director (FDR) Examination and License	
Information Privacy Act	Barn Information	*Note: If Yes is
Applicant Information	Hore you previously takes the California Functial Director Examination 7 *	selected, Exam
Special Consideration		date(s) is(are)
Exam Information	Size & Curtinue Size & Cult	required. To enter an
Background Information		Exam date, click the
Attestation		Add New button,
Fee and Payment		select the date, and
		click the Save button
		16 Click the green
		Save & Continue
		button
		0011011
1		



SCREEN		ACTION
	Background Information tab	17. Answer the
		Backaround
luturalization 🖉	Funeral Director (FDR) Examination and License	Information
Introduction		questions
Information 📿	2 Background Information	
Privacy Act		*Note: When
Applicant	Background Information	answering Yes to any
Information		of the questions,
Special	1. Have you ever been issued a personal license by the Cemetery and Funeral Bureau? If Yes, provide license type(s),	additional informatior
Consideration	number(s) and date(s) issued. *	and/or uploading
		supporting
Education V	2. Have you completed your Live Scan process or submitted manual fingerprint cards directly to the Cemetery and Funeral	documentation will
_	Bureau? *	be required
Exam 📿	ý Yes () No	
	3. Have you ever had any professional or vocational license or registration denied, suspended, revoked, placed on probation	18. Click the green
Background	or other disciplinary action taken by this or any other governmental authority in this state or any other state, or any foreign	Save & Continue
Information	Yes No	button
Attestation		
-		
Fee and 🛛 🗙 Payment		
	Save & Continue Save & Exit	
	<u>Attestation tab</u>	19. Check the box to
		certify all
Introduction	Funeral Director (FDR) Examination and License	information
Information Privacy Act	a Cateston	contained in the
Applicant Information	Icertify under penalty of perjary under the laws of the State of Galifornia that all statements furnished in connection with this application are true and accurate. *	application is true
Special Consideration	Signature * Dele *	and accurate
Exam Information		
Background Information	She Control She &	20. Type your name in
Attestation		the Signature field
LEE AND PAYMEN	<i>y</i>	
		Note: Your typed
		name will serve as
		your electronic
		signature for the FDR
		Application
		21. Click the green
		Save & Continue
		button



Fee and Payment tab 22.	
	Select Credit Card
	from the Payment
Introduction 🖉 Funeral Director (FDR) Examination and License	Method dropdown
Information Privacy Act 📀 🗳 Fee and Payment	Answer the Initial
Applicant Information See and Payment	License fee
Special Consideration Payment Method: * Credit Card × V	question
Education Information	ata: Tha Tatal Food
Background Information	l auto populate
Attestation	
Fee and Payment 😵	Complete the
	Information fields
Order Information Billing Information Required Fields *	ote: If the 'Billing
Total Fees 190 Copy Details From Address of Record	ormation' is the
Payment Information Of I	Record'. click on
VISA MasterCard DISCOVER First Name: *	py Details from
	dress of Record
Card Number: * Last Name: * DOX	X
25.	Click the blue Pay
Succe i.	and Submit button
Expiration Month: * Mo Vear: * Year Vear Street 2:	
State/Province: *	
City *	
Zip/Postal Code: *	
Pay and Submit	