



DEPARTMENT OF FINANCIAL SERVICES
Division of Funeral, Cemetery & Consumer Services
 200 East Gaines Street
 Tallahassee, FL 32399- 0361

MORTUARY SCIENCE COURSE INFORMATION FORM

This form is used by applicants who completed a mortuary science course at a school or institution that was NOT accredited by the American Board of Funeral Science Education (ABFSE) at the time the course was taken. This form provides the Board of Funeral, Cemetery and Consumer Services with information to assist it in determining whether the mortuary science course satisfies the requirements of s. 497.370(2), and s. 497.368(1)(d), Florida Statutes.

Section 1. APPLICANT PERSONAL INFORMATION		
First name	MI	Last Name
Birth Date (mm/dd/yyyy)		
Section 2		
1. Name of school or other institution that conducted the course:		
2. Address of school or other institution that conducted the course (street, city, state, zip) (this should be the main administrative offices of the school or institution):		
3. Phone number of the main administrative offices of the school or institution that conducted the course: Area code() _____ - _____		
Section 3		
1. Name of the Course:		
2. Month and year you began the course _____		
3. Month and year you completed the course _____		
Section 4		
1. Is the school or other institution that conducted the course accredited by any regional association of colleges and schools recognized by the United States Department of Education? YES NO		
2. If yes, provide the name and full address (street, city, state, zip) of the accrediting organization:		

Section 5

1. Did the course include coverage of the subject of theory and practice of embalming? YES NO

If NO, skip to next section. If YES, answer the following questions:

2. How many hours of instruction were dedicated to this subject? _____

3. Name of instructor for this subject:

4. Was the instructor for this subject a licensed funeral director or licensed embalmer?

Yes NO Don't know

5. Did you receive the instruction in this subject by attending class in person, or by on-line study, or both? (check one)

Attending class in-person On-line study Both of the preceding

6. Did you take and pass a written test on this subject? YES NO

7. Name of any textbooks, and name of the textbook author, which the school required or recommended you use for this subject matter:

Section 6

1. Did the course include coverage of the subject of restorative art? YES NO

If NO, skip to next section. If YES, answer the following questions:

2. How many hours of instruction were dedicated to this subject? _____

3. Name of instructor for this subject:

4. Was the instructor for this subject a licensed funeral director or licensed embalmer?

Yes NO Don't know

5. Did you receive the instruction in this subject by attending class in person, or by on-line study, or both? (check one)

Attending class in-person On-line study Both of the preceding

6. Did you take and pass a written test on this subject? YES NO

7. Name of any textbooks, and name of the textbook author, which the school required or recommended you use for this subject matter:

Section 7

1. Did the course include coverage of the subject of pathology? YES NO

If NO, skip to next section. If YES, answer the following questions:

2. How many hours of instruction were dedicated to this subject? _____

3. Name of instructor for this subject:

4. Was the instructor for this subject a licensed funeral director or licensed embalmer?

___Yes ___NO ___Don't know

5. Did you receive the instruction in this subject by attending class in person, or by on-line study, or both? (check one)

___Attending class in-person ___On-line study ___Both of the preceding

6. Did you take and pass a written test on this subject? YES NO

7. Name of any textbooks, and name of the textbook author, which the school required or recommended you use for this subject matter:

Section 8

1. Did the course include coverage of the subject of anatomy? YES NO

If NO, skip to next section. If YES, answer the following questions:

2. How many hours of instruction were dedicated to this subject? _____

3. Name of instructor for this subject:

4. Was the instructor for this subject a licensed funeral director or licensed embalmer?

___Yes ___NO ___Don't know

5. Did you receive the instruction in this subject by attending class in person, or by on-line study, or both? (check one)

___Attending class in-person ___On-line study ___Both of the preceding

6. Did you take and pass a written test on this subject? YES NO

7. Name of any textbooks, and name of the textbook author, which the school required or recommended you use for this subject matter:

Section 9

1. Did the course include coverage of the subject of microbiology? YES NO

If NO, skip to next section. If YES, answer the following questions:

2. How many hours of instruction were dedicated to this subject? _____

3. Name of instructor for this subject:

4. Was the instructor for this subject a licensed funeral director or licensed embalmer?

___ Yes ___ NO ___ Don't know

5. Did you receive the instruction in this subject by attending class in person, or by on-line study, or both? (check one)

___ Attending class in-person ___ On-line study ___ Both of the preceding

6. Did you take and pass a written test on this subject? YES NO

7. Name of any textbooks, and name of the textbook author, which the school required or recommended you use for this subject matter:

Section 10

1. Did the course include coverage of the subject of chemistry? YES NO

If NO, skip to next section. If YES, answer the following questions:

2. How many hours of instruction were dedicated to this subject? _____

3. Name of instructor for this subject:

4. Was the instructor for this subject a licensed funeral director or licensed embalmer?

___ Yes ___ NO ___ Don't know

5. Did you receive the instruction in this subject by attending class in person, or by on-line study, or both? (check one)

___ Attending class in-person ___ On-line study ___ Both of the preceding

6. Did you take and pass a written test on this subject? YES NO

7. Name of any textbooks, and name of the textbook author, which the school required or recommended you use for this subject matter:

Section 11

1. Did the course include coverage of the subject of hygiene? YES NO

If NO, skip to next section. If YES, answer the following questions:

2. How many hours of instruction were dedicated to this subject? _____

3. Name of instructor for this subject:

4. Was the instructor for this subject a licensed funeral director or licensed embalmer?

___ Yes ___ NO ___ Don't know

5. Did you receive the instruction in this subject by attending class in person, or by on-line study, or both? (check one)

___ Attending class in-person ___ On-line study ___ Both of the preceding

6. Did you take and pass a written test on this subject? YES NO

7. Name of any textbooks, and name of the textbook author, which the school required or recommended you use for this subject matter:

Section 12

1. Did the course include coverage of the subject of public health and sanitation? YES NO

If NO, skip to next section. If YES, answer the following questions:

2. How many hours of instruction were dedicated to this subject? _____

3. Name of instructor for this subject:

4. Was the instructor for this subject a licensed funeral director or licensed embalmer?

___ Yes ___ NO ___ Don't know

5. Did you receive the instruction in this subject by attending class in person, or by on-line study, or both? (check one)

___ Attending class in-person ___ On-line study ___ Both of the preceding

6. Did you take and pass a written test on this subject? YES NO

7. Name of any textbooks, and name of the textbook author, which the school required or recommended you use for this subject matter:

Section 13

Please provide the following materials when submitting this form:

1. Certificate of course completion, issued by the school, naming you and the course and the date of completion.
2. Original or copy of all course materials provided to you by the school (for example: course outline, course schedule, class schedule, lab schedule, study materials).
3. Copy of all tests you took, showing your grades or pass/fail status on the test.

Section 14. Signature

<p>_____</p> <p>Signature of Applicant</p>	<p>_____</p> <p>Date signed</p>
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Social Security No. _____