



December 7, 2017  
Training Room #2  
1:00 p.m.

# Agenda

## Virginia Board of Funeral Directors & Embalmers Ad Hoc Committee on Funeral Internships

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**Call to Order – Blair H. Nelsen, FSL, Committee Chair**

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**Public Comment**

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**Discussion – Funeral Service Internship Program**

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- **Consideration of Revisions to NOIRA – Funeral Service Intern Regulations**
  - **Revisions to Reporting Forms**
  - **Funeral Internship Supervisor Training**
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**Discussion – Embalming by Funeral Service Students at Funeral Establishments**

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**Meeting Adjournment**

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This information is in DRAFT form and is subject to change. The official agenda and packet will be approved by the public body at the meeting and will be available to the public pursuant to Virginia Code Section 2.2-3708(D).

**Attachments:**

1. Statutes and Regulations – Funeral Internship Program
2. Agency Background Document – NOIRA – Funeral Service Intern Regulations
3. Internship Applications and Forms (current)

# **1. Statutes and Regulations – Funeral Internship Program**

Code of Virginia  
Title 54.1. Professions and Occupations  
Chapter 28. Funeral Services

### § 54.1-2817. Funeral service interns.

A person desiring to become a funeral service intern shall apply on a form provided by the Board. The applicant shall attest that he holds a high school diploma or its equivalent. The Board, in its discretion, may approve an application to be a funeral service intern for an individual convicted of a felony, if he has successfully fulfilled all conditions of sentencing, been pardoned, or has had his civil rights restored. The Board shall not, however, approve an application to be a funeral service intern for any person convicted of embezzlement or of violating subsection B of § 18.2-126.

The Board, in its discretion, may refuse to approve an application to be a funeral service intern for an individual who has a criminal or disciplinary proceeding pending against him in any jurisdiction in the United States.

When the Board is satisfied as to the qualifications of an applicant, it shall issue a certificate of internship. When a funeral service intern wishes to receive in-service training from a person licensed for the practice of funeral service, a request shall be submitted to the Board. If such permission is granted and the funeral service intern later leaves the proctorship of the licensee whose service has been entered, the licensee shall give the funeral service intern an affidavit showing the length of time served with him. The affidavit shall be filed with the Board and made a matter of record in that office. Any funeral service intern seeking permission to continue in-service training shall submit a request to the Board.

A certificate of internship shall be renewable as prescribed by the Board. The Board shall mail at such time as it may prescribe by regulation, to each registered funeral service intern at his last known address, a notice that the renewal fee is due and that, if not paid by the prescribed time, a penalty fee shall be due in addition to the renewal fee.

The registration of any funeral service intern who is in the active military service of the United States may, at the discretion of the Board, be held in abeyance for the duration of his service. The Board may also waive the renewal fees for such military personnel.

All registered funeral service interns shall report to the Board on a schedule prescribed by the Board upon forms provided by the Board, showing the work which has been completed during the preceding period of internship. The data contained in the report shall be certified as correct by the person licensed for the practice of funeral service under whom he has served during this period and by the person licensed for the practice of funeral service owning or managing the funeral service establishment.

Before such funeral service intern becomes eligible to be examined for the practice of funeral service, evidence shall be presented along with an affidavit from any licensee under whom the intern worked showing that the intern has assisted in embalming at least 25 bodies and that the intern has assisted in conducting at least 25 funerals. In all applications of funeral service interns for licenses for the practice of funeral service, the eligibility of the applicant shall be determined

by the records filed with the Board. The successful completion by any person of the internship shall not entitle him to any privilege except to be examined for such license.

Credit shall not be allowed for any period of internship that has been completed more than three years prior to application for license or more than five years prior to examination for license. If all requirements for licensure are not completed within five years of initial application, the Board may deny an additional internship. A funeral service intern may continue to practice for up to 90 days from the completion of his internship or until he has taken and received the results of all examinations required by the Board. However, the Board may waive such limitation for any person in the armed service of the United States when application for the waiver is made in writing within six months of leaving service or if the Board determines that enforcement of the limitation will create an unreasonable hardship.

The Board shall have power to suspend or revoke a certificate of internship for violation of any provision of this chapter.

No more than two funeral service interns shall be concurrently registered under any one person licensed for the practice of funeral service, funeral directing or embalming. Each sponsor for a registered funeral service intern must be actively employed by or under contract with a funeral establishment.

Code 1950, §§ 54-260.34 through 54-260.38; 1956, c. 220; 1970, c. 513, § 54-260.72; 1972, c. 797; 1973, c. 296; 1974, c. 157; 1978, c. 849; 1981, c. 258; 1986, c. 43; 1988, c. 765; 2005, c. 477; 2006, c. 56.

*Commonwealth of Virginia*



**REGULATIONS  
FOR THE  
FUNERAL SERVICE INTERNSHIP  
PROGRAM**

**VIRGINIA BOARD OF  
FUNERAL DIRECTORS AND EMBALMERS**

**Title of Regulations: 18 VAC 65-40-10 et seq.**

**Statutory Authority: § 54.1-2400 and Chapter 28  
of Title 54.1 of the *Code of Virginia***

**Revised Date: January 14, 2015**

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## **Part I. General Provisions.**

### **18VAC65-40-10. Definitions.**

In addition to words and terms defined in § 54.1-2800 of the Code of Virginia, the following words and terms when used in this chapter shall have the following meanings, unless the context clearly indicates otherwise:

"Direct supervision" means that a licensed funeral service professional is present and on the premises of the facility.

"Supervisor" means a licensed employee at the training site who has been approved by the board to provide supervision for the funeral intern.

"Training site" means the licensed funeral establishment, facility, or institution that has agreed to serve as a location for a funeral service internship and has been approved by the board.

### **18VAC65-40-20 to 18VAC65-40-30. [Repealed]**

### **18VAC65-40-40. Fees.**

A. The following fees shall be paid as applicable for registration:

- |   |       |
|---|-------|
| 1. Funeral service intern registration                  | \$150 |
| 2. Funeral service intern renewal                       | \$125 |
| 3. Late fee for renewal up to one year after expiration | \$45  |
| 4. Duplicate copy of intern registration                | \$25  |
| 5. Returned check                                       | \$35  |
| 6. Registration of supervisor                           | \$35  |
| 7. Change of supervisor                                 | \$35  |
| 8. Reinstatement fee                                    | \$195 |

B. Fees shall be made payable to the Treasurer of Virginia and shall not be refundable once submitted.

### **18VAC65-40-50 to 18VAC65-40-80. [Repealed]**

### **18VAC65-40-90. Renewal of registration.**

A. The funeral service intern registration shall expire on March 31 of each calendar year and may be renewed by submission of the renewal notice and prescribed fee.

B. A person who fails to renew a registration by the expiration date shall be deemed to have an invalid registration. No credit will be allowed for an internship period served under an expired registration.

C. The funeral service intern is responsible for notifying the board within 14 days of any changes in name, address, employment, or supervisor. Any notices shall be validly given when mailed to the address on record with the board.

**18VAC65-40-100. [Repealed]**

**18VAC65-40-110. Reinstatement of expired registration.**

A. A funeral service intern whose registration has expired may be reinstated within one year following expiration by payment of the current renewal fee and the late renewal fee.

B. A funeral service intern whose registration has been expired for more than one year shall apply for reinstatement by submission of an application and payment of a reinstatement fee. The board may consider reinstatement of an expired registration for up to three years following expiration.

C. When a registration is not reinstated within three years of its expiration date, a new application for registration shall be filed and a new internship begun.

**18VAC65-40-120. [Repealed]**

**Part II. Funeral Service Internship Requirements.**

**18VAC65-40-130. Funeral service internship.**

A. The internship shall consist of at least 3,000 hours of training to be completed within no less than 12 months and no more than 48 months. For good cause shown, the board may grant an extension of time for completion of an internship.

B. The funeral service intern shall be assigned a work schedule of not less than 20 hours nor more than 60 hours per week in order to receive credit for such training. For good cause shown, the board may waive the limitation on an intern's work schedule.

C. A funeral service intern shall receive training in all areas of funeral service.

**18VAC65-40-140 to 18VAC65-40-170. [Repealed]**

**18VAC65-40-180. Intern application package.**

A. Any person who meets the qualifications of §54.1-2817 of the Code of Virginia may seek registration with the board as a funeral service intern by submission of an application package, which shall include documentation of the qualifications and signatures of any supervising licensees.



B. Applicants shall submit school transcripts as part of an application package, including the required fee and any additional documentation as may be required to determine eligibility.

**18VAC65-40-190 to 18VAC65-40-200. [Repealed]**

**18VAC65-40-201. Failure to register.**

If the internship is not approved by the board prior to initiation of training, no credit shall be allowed for the length of time served.

**18VAC65-40-210. Training sites.**

A. Funeral training shall be given at the licensed funeral service establishment or at any branch of such establishment that complies with the provisions of this chapter and is approved by the board as a training site.

B. An individual, firm, or corporation owning or operating any funeral service establishment shall apply to and be approved by the board prior to permitting funeral training to be given or conducted in the establishment.

**18VAC65-40-220. Qualifications of training site.**

A. The board shall approve only an establishment or two combined establishments to serve as the training site or sites that:

1. Have a full and unrestricted Virginia license;
2. Have complied in all respects with the provisions of the regulations of the Board of Funeral Directors and Embalmers; and
3. Have 50 or more funerals and 50 or more bodies for embalming over a 12-month period for each person to be trained. This total must be maintained throughout the period of training. If the establishment does not meet the required number of funerals or embalmings, the funeral service intern may seek approval for an additional training site.

B. The board may grant approval for a resident trainee to receive all or a portion of the embalming training at a facility of state or federal government or an accredited educational institution.

**18VAC65-40-230 to 18VAC65-40-240. [Repealed]**

**18VAC65-40-250. Requirements for supervision.**

A. Training shall be conducted under the direct supervision of a licensee or licensees approved by the board. Credit shall only be allowed for training under direct supervision.

B. The board shall approve only funeral service licensees, licensed funeral directors, or licensed embalmers to give funeral training who have a full and unrestricted Virginia funeral license, have at

least two consecutive years in practice and are employed full time in or under contract with the establishment, facility, or institution where training occurs.

C. A supervisor licensed as an embalmer or a funeral director shall provide supervision only in the areas of funeral practice for which he is licensed.

D. Failure to register as a supervisor may subject the licensee to disciplinary action by the board.

E. If a supervisor is unable or unwilling to continue providing supervision, the funeral service intern shall obtain a new supervisor. Credit for training shall resume when a new supervisor is approved by the board and the intern has paid the prescribed fee for the change of supervisor.

**18VAC65-40-260 to 18VAC65-40-270. [Repealed]**

**18VAC65-40-280. Supervisor application package.**

A. A licensee seeking approval by the board as a supervisor shall submit a completed application and any additional documentation as may be required to determine eligibility.

B. The application for supervision of a funeral service intern shall be signed by the establishment manager and by the persons who will be providing supervision for embalming and for the funeral services.

**18VAC65-40-290. through 18VAC65-40-310. [Repealed]**

**18VAC65-40-320. Reports to the board: six-month report; partial report.**

A. The intern, the supervisor or supervisors, and the establishment shall submit a written report to the board at the end of every 1,000 hours of training. The report shall:

1. Specify the period of time in which the 1,000 hours has been completed and verify that the intern has actually served in the required capacity during the preceding period; and
2. Be received in the board office no later than 14 days following the end of the completion of 1,000 hours. Late reports may result in additional time being added to the internship.

B. If the internship is terminated or interrupted prior to completion of 1,000 hours or if the intern is changing supervisors or training sites, the intern and the supervisor shall submit a partial report to the board with a written explanation of the cause of program termination or interruption or of the change in training or supervision.

1. The partial report shall provide the amount of time served and the dates since the last reporting period. Credit for partial reports shall be given for the number of hours of training completed.
2. Partial reports shall be received in the board office no later than 14 days after the interruption or termination of the internship or after the change in supervisors or training sites. Credit may be deducted for late reports.

**18VAC65-40-330. Failure to submit training report.**

If the intern, supervisor, or establishment manager fails to submit the reports required in 18VAC65-40-320, the intern may forfeit all or partial credit for training or disciplinary action may be taken against the intern, supervisor and establishment manager.

### **Part III. Internship: Funeral Supervisors' Responsibilities.**

#### **18VAC65-40-340. Supervisors' responsibilities.**

- A. The supervisor shall provide the intern with all applicable laws and regulations or sections of regulations relating to the funeral industry.
- B. The supervisor shall provide the intern with copies of and instruction in the use of all forms and price lists employed by the funeral establishment.
- C. The supervisor shall provide the intern with instruction in all aspects of funeral services and shall allow the intern under direct supervision to conduct all necessary arrangements for a minimum of 25 funerals.
- D. The embalming supervisor shall provide instruction on all necessary precautions, embalming functions, and reporting forms and shall allow the intern under direct supervision to perform a minimum of 25 embalmings.
- E. The supervisor shall provide the intern with instruction in making preneed funeral arrangements and instruction on the laws and regulations pertaining to preneed funeral contracts and disclosures.
- F. The supervisor shall provide instruction on cremation and on the laws and regulations pertaining to cremation.
- G. If a training site does not offer preneed funeral planning or cremation services, the supervisor shall arrange for such training at another licensed funeral establishment that does.

#### **18VAC65-40-350 to 18VAC65-40-630. [Repealed]**

### **Part IV. Refusal, Suspension, Revocation, and Disciplinary Action.**

#### **18VAC65-40-640. Disciplinary action.**

The board may refuse to issue or renew a license, registration, or approval to any applicant; and may suspend for a stated period of time or indefinitely, or revoke any license, registration, or approval, or reprimand any person, or place his license or registration on probation with such terms and conditions and for such time as it may designate or impose a monetary penalty for failure to comply with the regulations of the Board of Funeral Directors and Embalmers.

## **2. Agency Background Document – NOIRA – Funeral Service Intern Regulations**



[townhall.virginia.gov](http://townhall.virginia.gov)

## Notice of Intended Regulatory Action (NOIRA) Agency Background Document

<b>Agency name</b>	Board of Funeral Directors and Embalmers, Department of Health Professions
<b>Virginia Administrative Code (VAC) citation(s)</b>	18VAC65-40-10 et seq.
<b>Regulation title(s)</b>	Regulations for the Funeral Service Intern Program
<b>Action title</b>	More accountability for funeral service interns
<b>Date this document prepared</b>	8/25/17

This information is required for executive branch review and the Virginia Registrar of Regulations, pursuant to the Virginia Administrative Process Act (APA), Executive Orders 17 (2014) and 58 (1999), and the *Virginia Register Form, Style, and Procedure Manual*.

### Subject matter and intent

*Please describe briefly the subject matter, intent, and goals of the planned regulatory action.*

At its meeting on July 18, 2017, the Board of Funeral Directors and Embalmers adopted a report of the Ad Hoc Committee on Funeral Interns recommending that a Notice of Intended Regulatory Action be initiated to do the following: 1) Amend 18VAC65-40-130 (A) to indicate training should be completed within not less than 18 months nor more than 60 months, and that the Board would only consider extensions for extenuating circumstances; 2) Reduce initial intern supervisor application fee to \$25 but institute a yearly renewal fee of \$25 to allow the Board to track active supervisors and make sure supervisors are in good standing; and 3) Add a regulation requiring that interns be identified to the public as interns in titles, correspondence, and communications with the public.

### Legal basis

Please identify the (1) the agency (includes any type of promulgating entity) and (2) the state and/or federal legal authority for the proposed regulatory action, including the most relevant citations to the Code of Virginia or General Assembly chapter number(s), if applicable. Your citation should include a specific provision, if any, authorizing the promulgating entity to regulate this specific subject or program, as well as a reference to the agency's overall regulatory authority.

**18VAC65-40-10 et seq. Regulations for the Funeral Service Intern Program** are promulgated under the general authority of Chapter 24 of Title 54.1 of the Code of Virginia. Section 54.1-2400 (6) provides the Board with authority to promulgate regulations to administer the regulatory system:

**§ 54.1-2400 -General powers and duties of health regulatory boards**

*The general powers and duties of health regulatory boards shall be:*

...

*6. To promulgate regulations in accordance with the Administrative Process Act (§ 2.2-4000 et seq.) which are reasonable and necessary to administer effectively the regulatory system. Such regulations shall not conflict with the purposes and intent of this chapter or of Chapter 1 (§ 54.1-100 et seq.) and Chapter 25 (§ 54.1-2500 et seq.) of this title.*

Authority for the Board to take disciplinary action for failure to adequately supervise funeral service interns is found in:

**§ 54.1-2806. Refusal, suspension, or revocation of license.**

*The Board may refuse to admit a candidate to any examination, refuse to issue a license to any applicant and may suspend a license for a stated period or indefinitely, or revoke any license or censure or reprimand any licensee or place him on probation for such time as it may designate for any of the following causes:...*

*21. Failure to comply with the reporting requirements as set forth in § 54.1-2817 for registered funeral service interns;*

*22. Failure to provide proper and adequate supervision and training instruction to registered funeral service interns as required by regulations of the Board;*

Authority to regulation funeral service interns is found in:

**§ 54.1-2817. Funeral service interns.**

*A person desiring to become a funeral service intern shall apply on a form provided by the Board. The applicant shall attest that he holds a high school diploma or its equivalent. The Board, in its discretion, may approve an application to be a funeral service intern for an individual convicted of a felony, if he has successfully fulfilled all conditions of sentencing, been pardoned, or has had his civil rights restored. The Board shall not, however, approve an application to be a funeral service intern for any person convicted of embezzlement or of violating subsection B of § 18.2-126.*

*The Board, in its discretion, may refuse to approve an application to be a funeral service intern for an individual who has a criminal or disciplinary proceeding pending against him in any jurisdiction in the United States.*

*When the Board is satisfied as to the qualifications of an applicant, it shall issue a certificate of internship. When a funeral service intern wishes to receive in-service training from a person licensed for the practice of funeral service, a request shall be submitted to the Board. If such permission is granted and the funeral service intern later leaves the proctorship of the licensee whose service has been entered, the licensee shall give the funeral service intern an affidavit showing the length of time served with him. The affidavit shall be filed with the Board and made a matter of record in that office. Any funeral service intern seeking permission to continue in-service training shall submit a request to the Board.*

*A certificate of internship shall be renewable as prescribed by the Board. The Board shall mail at such time as it may prescribe by regulation, to each registered funeral service intern at his last known address, a notice that the renewal fee is due and that, if not paid by the prescribed time, a penalty fee shall be due in addition to the renewal fee.*

*The registration of any funeral service intern who is in the active military service of the United States may, at the discretion of the Board, be held in abeyance for the duration of his service. The Board may also waive the renewal fees for such military personnel.*

*All registered funeral service interns shall report to the Board on a schedule prescribed by the Board upon forms provided by the Board, showing the work which has been completed during the preceding period of internship. The data contained in the report shall be certified as correct by the person licensed for the practice of funeral service under whom he has served during this period and by the person licensed for the practice of funeral service owning or managing the funeral service establishment.*

*Before such funeral service intern becomes eligible to be examined for the practice of funeral service, evidence shall be presented along with an affidavit from any licensee under whom the intern worked showing that the intern has assisted in embalming at least 25 bodies and that the intern has assisted in conducting at least 25 funerals. In all applications of funeral service interns for licenses for the practice of funeral service, the eligibility of the applicant shall be determined by the records filed with the Board. The successful completion by any person of the internship shall not entitle him to any privilege except to be examined for such license.*

*Credit shall not be allowed for any period of internship that has been completed more than three years prior to application for license or more than five years prior to examination for license. If all requirements for licensure are not completed within five years of initial application, the Board may deny an additional internship. A funeral service intern may continue to practice for up to 90 days from the completion of his internship or until he has taken and received the results of all examinations required by the Board. However, the Board may waive such limitation for any person in the armed service of the United States when application for the waiver is made in writing within six months of leaving service or if the Board determines that enforcement of the limitation will create an unreasonable hardship.*

*The Board shall have power to suspend or revoke a certificate of internship for violation of any provision of this chapter.*

*No more than two funeral service interns shall be concurrently registered under any one person licensed for the practice of funeral service, funeral directing or embalming. Each sponsor for a registered funeral service intern must be actively employed by or under contract with a funeral establishment.*

### Purpose

*Please describe the specific reasons why the agency has determined that the proposed regulatory action is essential to protect the health, safety, or welfare of citizens. In addition, please explain any potential issues that may need to be addressed as the regulation is developed.*

The purpose of this regulatory action is to provide clear, enforceable regulations for the supervision and practice of interns, so that interns and funeral homes are not misleading the public about their status and that they are being appropriately supervised to protect the public health and safety in the handling of human remains.

### Substance

*Please briefly identify and explain the new substantive provisions that are being considered, the substantive changes to existing sections that are being considered, or both.*

The Board intends to make the following changes to regulations: 1) Amend 18VAC65-40-130 (A) to indicate training should be completed within not less than 18 months nor more than 60 months, and that the Board would only consider extensions for extenuating circumstances; 2) Reduce initial intern supervisor application fee to \$25 but institute a yearly renewal fee of \$25 to allow the Board to track active supervisors and make sure supervisors are in good standing; and 3) Add a regulation requiring that interns be identified to the public as interns in titles, correspondence, and communications with the public.

### Alternatives

*Please describe any viable alternatives to the proposal considered and the rationale used by the agency to select the least burdensome or intrusive alternative that meets the essential purpose of the action. Also, include discussion of less intrusive or less costly alternatives for small businesses, as defined in § 2.2-4007.1 of the Code of Virginia, of achieving the purpose of the regulation.*

The Board has considered the use of guidance documents but believes definitive rules are necessary for public health and safety. Because the time frame for a funeral service internship is not clear in § 54.1-2817, the Board has also submitted a legislative proposal relating to the amount of time someone can remain an intern.

### Public participation



*Please indicate whether the agency is seeking comments on the intended regulatory action, including ideas to assist the agency in the development of the proposal and the costs and benefits of the alternatives stated in this notice or other alternatives. Also, indicate whether a public hearing is to be held to receive comments. Please include one of the following choices: 1) a panel will be appointed and the agency's contact if you're interested in serving on the panel is \_\_\_\_\_; 2) a panel will not be used; or 3) public comment is invited as to whether to use a panel to assist in the development of this regulatory proposal.*

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The agency is seeking comments on this regulatory action, including but not limited to: ideas to be considered in the development of this proposal, the costs and benefits of the alternatives stated in this background document or other alternatives, and the potential impacts of the regulation.

The agency is also seeking information on impacts on small businesses as defined in § 2.2-4007.1 of the Code of Virginia. Information may include: projected reporting, recordkeeping, and other administrative costs; the probable effect of the regulation on affected small businesses; and the description of less intrusive or costly alternatives for achieving the purpose of the regulation.

Anyone wishing to submit comments may do so via the Regulatory Town Hall website (<http://www.townhall.virginia.gov>), or by mail, email, or fax to Elaine Yeatts at Department of Health Professions, 9960 Mayland Drive, Suite 300, Richmond, VA 23233 or [elaine.yeatts@dhp.virginia.gov](mailto:elaine.yeatts@dhp.virginia.gov) or by fax to (804) 527-4434. Written comments must include the name and address of the commenter. In order to be considered, comments must be received by midnight on the last day of the public comment period.

A public hearing will be held following the publication of the proposed stage of this regulatory action and notice of the hearing will be posted on the Virginia Regulatory Town Hall website (<http://www.townhall.virginia.gov>) and on the Commonwealth Calendar website (<https://www.virginia.gov/connect/commonwealth-calendar>). Both oral and written comments may be submitted at that time.

The Board will not convene a regulatory advisory panel but will hear and consider comment at any meeting at which this subject matter will be discussed.

### **3. Internship Applications and Forms**

# COMMONWEALTH OF VIRGINIA

## Board of Funeral Directors and Embalmers

Perimeter Center – 9960 Mayland Drive, Suite 300, Henrico, Virginia 23233-1463

Phone: 804-367-4479      FAX: 804-527-4413

Website: [www.dhp.virginia.gov](http://www.dhp.virginia.gov)      Email: [FANBd@dhp.virginia.gov](mailto:FANBd@dhp.virginia.gov)

### FIRST 1000 HOUR FUNERAL INTERNSHIP REPORT

Funeral Service Intern's Name: \_\_\_\_\_ License No. \_\_\_\_\_  
 Supervisor's Name: \_\_\_\_\_ License No. \_\_\_\_\_

1. Indicate the level of knowledge and proficiency you observe in the performance of your intern on a scale of 1-10: (1- Unsatisfactory, 10- Excellent). Please comment on each area.

AREA OF KNOWLEDGE AND PROFICIENCY	Rating ( 1-10)
A) Virginia Laws	
B) Federal Laws: FTC, OSHA, ADA	
C) Vital Statistics and Post-Mortem Regulations	
D) Merchandise/Merchandising	
E) Funeral Arranging (At Need & Preneed with families)	
F) Cremation Laws	
G) Funeral Directing	
H) Preneed Funeral Laws	
I) General Business Procedures	

2. Please estimate the number of hours of the Intern's time during an average work week spent in each of the following areas:

	Hours
A) First Calls/Removals	
B) Driving of Vehicles	
C) Assisting in Funeral Arrangements	
D) Funeral Services (Visitations, Services, etc.)	
E) Administrative Duties (Filing Death Certificates, paperwork, etc)	
F) Maintenance (Explain)	
G) Other Duties (Explain)	

3. Please indicate the number completed by the intern, during this reporting period, in the following areas:

A) Funeral Arrangements	
B) Embalmings	

4. The Intern has completed the 1<sup>st</sup> 1,000 hours of his/her internship. Please rate and comment on the Intern's progress and improvement during the last three months utilizing the following scale:

1-Unsatisfactory Progress, 2-Marginal Progress, 3-Good Progress, 4-Exceptional Progress

AREA OF KNOWLEDGE AND PROFICIENCY	Scale (1-4)
A) Anatomy	
B) Restorative Art	
C) Safety and Sanitation	
D) Embalming and Proficiency	
F) Reliability	
I) Attitude toward funeral service industry	
I) Overall quality of work	

I certify this is an accurate report on the progress of the above-named Intern and has been prepared without consultation with the Funeral Service Intern.

\_\_\_\_\_  
 Signature of Supervisor      Date \_\_\_\_\_

\_\_\_\_\_  
 Signature of Funeral Service Intern      Date \_\_\_\_\_

**Revised 08/23/16**

**FUNERAL SERVICE INTERN HOURS ATTESTATION FORM  
FIRST (1<sup>ST</sup>) REPORT**

**Virginia Board of Funeral Directors and Embalmers**

Perimeter Center – 9960 Mayland Drive, Suite 300, Henrico, Virginia 23233-1463

Phone: 804-367-4479      FAX: 804-527-4413

Email: [FanBd@dhp.virginia.gov](mailto:FanBd@dhp.virginia.gov)      Website: [www.dhp.virginia.gov](http://www.dhp.virginia.gov)

**TO BE COMPLETED BY FUNERAL SERVICE INTERN:**

Full Legal Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of Funeral Service Establishment Employed:  
\_\_\_\_\_

License# of Funeral Service Establishment: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ License#: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ \*Total Hours worked: \_\_\_\_\_

**\*The Virginia Board of Funeral Directors and Embalmers reserve the right to request verification of hours worked.**

**We attest to the accuracy of the hours reported and compliance with the Virginia regulations and statutes governing the practice of funeral services.**

Funeral Service Intern: \_\_\_\_\_ Date: \_\_\_\_\_

Funeral Service Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

**FUNERAL SERVICE INTERN HOURS ATTESTATION FORM  
SECOND (2<sup>ND</sup> ) REPORT**

**Virginia Board of Funeral Directors and Embalmers**

Perimeter Center – 9960 Mayland Drive, Suite 300, Henrico, Virginia 23233-1463

Phone: 804-367-4479 FAX: 804-527-4413

Email: [FanBd@dhp.virginia.gov](mailto:FanBd@dhp.virginia.gov) Website: [www.dhp.virginia.gov](http://www.dhp.virginia.gov)

**TO BE COMPLETED BY FUNERAL SERVICE INTERN:**

Full Legal Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of Funeral Service Establishment Employed:

\_\_\_\_\_

License# of Funeral Service Establishment: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ License#: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ \*Total Hours worked: \_\_\_\_\_

**\*The Virginia Board of Funeral Directors and Embalmers reserve the right to request verification of hours worked.**

**We attest to the accuracy of the hours reported and compliance with the Virginia regulations and statutes governing the practice of funeral services.**

Funeral Service Intern: \_\_\_\_\_ Date: \_\_\_\_\_

Funeral Service Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

# COMMONWEALTH OF VIRGINIA

## Board of Funeral Directors and Embalmers

Perimeter Center – 9960 Mayland Drive, Suite 300, Henrico, Virginia 23233-1463

Phone: 804-367-4479      FAX: 804-527-4413

Website: [www.dhp.virginia.gov](http://www.dhp.virginia.gov) Email: [FANBd@dhp.virginia.gov](mailto:FANBd@dhp.virginia.gov)

### SECOND 1000 HOUR FUNERAL INTERNSHIP REPORT

Funeral Service Intern's Name: \_\_\_\_\_ License No. \_\_\_\_\_  
 Supervisor's Name: \_\_\_\_\_ License No. \_\_\_\_\_

1. Indicate the level of knowledge and proficiency you observe in the performance of your intern on a scale of 1-10: (1- Unsatisfactory, 10- Excellent). Please comment on each area.

AREA OF KNOWLEDGE AND PROFICIENCY	Rating ( 1-10)
A) Virginia Laws	
B) Federal Laws: FTC, OSHA, ADA	
C) Vital Statistics and Post-Mortem Regulations	
D) Merchandise/Merchandising	
E) Funeral Arranging (At Need & Preneed with families)	
F) Cremation Laws	
G) Funeral Directing	
H) Preneed Funeral Laws	
I) General Business Procedures	

2. Please estimate the number of hours of the Intern's time during an average work week spent in each of the following areas:

	Hours
A) First Calls/Removals	
B) Driving of Vehicles	
C) Assisting in Funeral Arrangements	
D) Funeral Services (Visitations, Services, etc.)	
E) Administrative Duties (Filing Death Certificates, paperwork, etc)	
F) Maintenance (Explain)	
G) Other Duties (Explain)	

3. Please indicate the number completed by the intern, during this reporting period, in the following areas:

A) Funeral Arrangements	
B) Embalmings	

4. The Intern has completed the 2<sup>ND</sup> 1,000 hours of his/her internship. Please rate and comment on the Intern's progress and improvement during the last three months utilizing the following scale:

1-Unsatisfactory Progress, 2-Marginal Progress, 3-Good Progress, 4-Exceptional Progress

AREA OF KNOWLEDGE AND PROFICIENCY	Scale (1-4)
A) Anatomy	
B) Restorative Art	
C) Safety and Sanitation	
D) Embalming and Proficiency	
F) Reliability	
I) Attitude toward funeral service industry	
I) Overall quality of work	

I certify this is an accurate report on the progress of the above-named Intern and has been prepared without consultation with the Funeral Service Intern.

\_\_\_\_\_  
 Signature of Supervisor      Date \_\_\_\_\_

\_\_\_\_\_  
 Signature of Funeral Service Intern      Date \_\_\_\_\_

**Revised 08/23/16**

**FUNERAL SERVICE INTERN HOURS ATTESTATION FORM  
THIRD (3<sup>RD</sup>) REPORT**

**Virginia Board of Funeral Directors and Embalmers**

Perimeter Center – 9960 Mayland Drive, Suite 300, Henrico, Virginia 23233-1463

Phone: 804-367-4479

FAX: 804-527-4413

E-Mail: [FanBd@dhp.virginia.gov](mailto:FanBd@dhp.virginia.gov)

Website: [www.dhp.virginia.gov](http://www.dhp.virginia.gov)

**TO BE COMPLETED BY FUNERAL SERVICE INTERN:**

Full Legal Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of Funeral Service Establishment Employed:

\_\_\_\_\_

License# of Funeral Service Establishment: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ License#: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ \*Total Hours worked: \_\_\_\_\_

**\*The Virginia Board of Funeral Directors and Embalmers reserve the right to request verification of hours worked.**

**We attest to the accuracy of the hours reported and compliance with the Virginia regulations and statutes governing the practice of funeral services.**

Funeral Service Intern: \_\_\_\_\_ Date: \_\_\_\_\_

Funeral Service Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

# COMMONWEALTH OF VIRGINIA

## Board of Funeral Directors and Embalmers

Perimeter Center – 9960 Mayland Drive, Suite 300, Henrico, Virginia 23233-1463

Phone: 804-367-4479      FAX: 804-527-4413

Website: [www.dhp.virginia.gov](http://www.dhp.virginia.gov) Email: [FANBd@dhp.virginia.gov](mailto:FANBd@dhp.virginia.gov)

### THIRD 1000 HOUR FUNERAL INTERNSHIP REPORT

Funeral Service Intern's Name: \_\_\_\_\_ License No. \_\_\_\_\_  
 Supervisor's Name: \_\_\_\_\_ License No. \_\_\_\_\_

1. Indicate the level of knowledge and proficiency you observe in the performance of your intern on a scale of 1-10: (1- Unsatisfactory, 10- Excellent). Please comment on each area.

AREA OF KNOWLEDGE AND PROFICIENCY	Rating ( 1-10)
A) Virginia Laws	
B) Federal Laws: FTC, OSHA, ADA	
C) Vital Statistics and Post-Mortem Regulations	
D) Merchandise/Merchandising	
E) Funeral Arranging (At Need & Preneed with families)	
F) Cremation Laws	
G) Funeral Directing	
H) Preneed Funeral Laws	
I) General Business Procedures	

2. Please estimate the number of hours of the Intern's time during an average work week spent in each of the following areas:

	Hours
A) First Calls/Removals	
B) Driving of Vehicles	
C) Assisting in Funeral Arrangements	
D) Funeral Services (Visitations, Services, etc.)	
E) Administrative Duties (Filing Death Certificates, paperwork, etc)	
F) Maintenance (Explain)	
G) Other Duties (Explain)	

3. Please indicate the number completed by the intern, during this reporting period, in the following areas:

A) Funeral Arrangements	
B) Embalmings	

4. The Intern has completed the 3<sup>RD</sup> 1,000 hours of his/her internship. Please rate and comment on the Intern's progress and improvement during the last three months utilizing the following scale:

1-Unsatisfactory Progress, 2-Marginal Progress, 3-Good Progress, 4-Exceptional Progress

AREA OF KNOWLEDGE AND PROFICIENCY	Scale (1-4)
A) Anatomy	
B) Restorative Art	
C) Safety and Sanitation	
D) Embalming and Proficiency	
F) Reliability	
I) Attitude toward funeral service industry	
I) Overall quality of work	

I certify this is an accurate report on the progress of the above-named Intern and has been prepared without consultation with the Funeral Service Intern.

\_\_\_\_\_  
 Signature of Supervisor      Date \_\_\_\_\_

\_\_\_\_\_  
 Signature of Funeral Service Intern      Date \_\_\_\_\_

**Revised 08/23/16**





**COMMONWEALTH OF VIRGINIA**  
**Board of Funeral Directors and Embalmers**

Department of Health Professions  
 Perimeter Center  
 9960 Mayland Drive, Suite 300  
 Henrico, Virginia 23233-1463

E-Mail: FanBd@dhp.virginia.gov  
 Website: www.dhp.virginia.gov  
 Phone: 804-367-4479

**Funeral Service Internship Program**  
**Change of Supervisor Application**

Application fee is \$35.00 check or money order made payable to the Treasurer of Virginia.  
**ALL FEES ARE NON-REFUNDABLE**

**1. INTERN PERSONAL INFORMATION (Please Print or Type)**

First	Middle and Maiden Name	Last Name and Suffix	
Street	City	State	Zip Code
Phone Number	Anticipated Date of Employment	Intern Registration Number	

**2. Supervisor Information:**

Establishment Name and License Number:	#of Funeral Services Conducted in the Past Year:	#of Embalming procedures performed at establishment in the past year:
Establishment Manager's Name and License Number:	Manager's Signature	
Funeral Service Supervisor and License Number:	Funeral Service Supervisor Signature:	
Embalming Supervisor and License Number:	Embalming Supervisor Signature:	
Anticipated Date Employment Will Began	Total Hours Scheduled to Work Each Week	

Submit address changes in writing immediately. Applications will not be processed and will be returned without the required fee. Applications will remain in process no longer than **one (1) year**. If, at the end of one (1) year, a license/certification is not issued, the application file is **destroyed**. An applicant shall reapply for licensure, submit fees, required documentation, and meet the qualifications for licensure/certification in effect at the time of the new application.

**QUALIFICATIONS OF SUPERVISOR:**

Hold a current, unrestricted Virginia Funeral Service Provider, Funeral Director, or Embalmer license and have at least two consecutive years in practice and employed full time in or under contract with the establishment where training occurs. **Credit shall only be allowed for training under direct supervision and the supervisor shall provide supervision only in the areas of funeral practice for which he is licensed.**

**QUALIFICATIONS OF TRAINING SITE:**

The establishment shall have a full unrestricted Virginia license and have complied in all respects with the regulations of the Board of Funeral Directors and Embalmers; and have 50 or more funerals and 50 or more bodies for embalming over a 12 month period for each person to be trained. This total must be maintained throughout the period of training.

In accordance with §54.1-116 Code of Virginia, you are required to submit your Social Security Number or your control number\*\* issued by the Virginia Department of Motor Vehicles. If you fail to do so, the processing of your application will be suspended and fees will not be refunded. This number will be used by the Department of Health Professions for identification and will not be disclosed for other purposes except as provided by law. Federal and state law requires that this number be shared with other state agencies for child support enforcement activities. **NO LICENSE WILL BE ISSUED TO ANY INDIVIDUAL WHO HAS FAILED TO DISCLOSE ONE OF THESE NUMBERS.** \*\*In order to obtain a Virginia driver's license control number, it is necessary to appear in person at an office of the Department of Motor Vehicles in Virginia. A fee and disclosure to DMV of your Social Security Number will be required to obtain this number.

**APPLICANTS DO NOT USE SPACES BELOW THIS LINE – FOR OFFICE USE ONLY**

APPROVED BY: \_\_\_\_\_ FEE RECEIPT # \_\_\_\_\_

**3. AFFIDAVIT OF APPLICANT**

- (a) I have read and understand the Virginia Board of Funeral Directors and Embalmers statutes and regulations and am aware that I am required to comply with any laws and regulations of the Board of Funeral Directors and Embalmers.
- (b) I hereby give permission to the Virginia Board of Funeral Directors and Embalmers to secure additional information concerning me or any statement in this application from any person or any source the Board may desire. I further agree to submit to questioning by the Board or any Agent thereof, and to substantiate my statement(s) if desired by the Board.
- (c) I shall present any credentials or documents required or requested by the Board.
- (d) I, \_\_\_\_\_, the applicant herein, depose and say that all facts, statements, and answers contained in this application are true and correct; I am not omitting any information which might be of value to this Board in determining my qualifications and character, whether it is called for or not; and I agree that any falsification, omission, or withholding of information or facts concerning this application shall be sufficient grounds for the denial, suspension, cancellation, or revocation of my Virginia Board of Funeral Directors and Embalmers internship even though it is not discovered until after issuance.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

## REGISTRATION FOR FUNERAL SERVICE INTERNSHIP PROGRAM CHECKLIST AND INSTRUCTIONS

Board of Funeral Directors and Embalmers  
Perimeter Center-9960 Mayland Drive, Suite 300-Richmond, VA 23233-1463  
Email: [FanBd@dhp.virginia.gov](mailto:FanBd@dhp.virginia.gov) Website: [www.dhp.virginia.gov](http://www.dhp.virginia.gov) Phone: 804-367-4479

If all documentation/information has been received from the applicant, the licensing process takes approximately 5 to 7 business days. Upon receipt of the registration application an acknowledgement letter is sent to the applicant advising the applicant what items are lacking.

Applications will remain in process no longer than **one (1) year**. If, at the end of one (1) year, registration is not issued, the application file is destroyed. An applicant shall reapply for registration, submit fees, required documentation, and meet the qualifications for registration in effect at the time of the new application.

### SUBMIT THE FOLLOWING:

- 1. **THE 2-PAGE APPLICATION FOR REGISTRATION IN A FUNERAL SERVICE INTERN PROGRAM** - This application will not be considered until all sections have been completed. If you answered yes to question #3 on page two (2) of the application, attach your state criminal history record; a certified copy of the final order, decree, or case decision by a court or regulatory agency with lawful authority to issue such order, decree or case decision; and any other information you wish to have considered with your application (i.e., information on the status of incarceration, parole, or probation; reference letters; documentation of rehabilitation; etc.).
- 2. **FEES** – All fees are non-refundable. The fee for registration as a Funeral Service Intern is **\$150.00**. Make check or money order payable to the Treasurer of Virginia. Attach the fee to the 2-page application and submit to the Virginia Board of Funeral Directors and Embalmers. **Applications received without the fee and/or fees received without an application will be returned to the sender.**
- 3. **PROOF OF PROFESSIONAL EDUCATION** – Submit OFFICIAL transcript from your High School or General Equivalency Diploma (GED), and Mortuary School to include school seal and date of graduation.
- 4. **REGISTRATION OF SUPERVISOR** – Ensure that your supervisor is registered with the Board as a Supervisor. Supervisors are required to complete the Funeral Supervisor Registration Application. The Board will approve only Funeral Service Licensees, Funeral Directors, or Embalmers to give funeral training who have a current/active and full and unrestricted Virginia Funeral license and have at least **two consecutive years in practice** and are employed full time in or under contract with the establishment where training occurs. A supervisor licensed as an embalmer or a funeral director shall provide supervision only in the areas of funeral practice for which he is licensed. Funeral Service Licensees may provide both embalming and directing if it is in their area of funeral practice. **Credit shall only be allowed for training under direct supervision.**

### PLEASE NOTE:

- 1. It is unlawful to practice funeral services in Virginia until you have been issued a Virginia license or until you have been issued written authorization from the board office to serve in an internship program under the direct supervision of a licensed Funeral Service Licensee, Funeral Director, or Embalmer in Virginia.
- 2. **FAXED DOCUMENTS ARE NOT ACCEPTABLE; only original documents will be accepted.**
- 3. Applications altered in any way may not be accepted.



## COMMONWEALTH OF VIRGINIA Board of Funeral Directors and Embalmers

Department of Health Professions  
Perimeter Center  
9960 Mayland Drive, Suite 300  
Henrico, Virginia 23233-1463

E-Mail: FanBd@dhp.virginia.gov  
Website: www.dhp.virginia.gov  
Phone: 804-367-4479

### Funeral Service Internship Program Application

Application fee is \$150.00 check or money order made payable to the Treasurer of Virginia.  
**ALL FEES ARE NON-REFUNDABLE**

**1. Full Legal Name (Please Print or Type)**

First Name		Middle Name and Maiden Name		Last Name and Suffix	
Social Security No. or VA DMV Control No.*		Date of Birth _____ MM DD YY		Place of Birth (City and State)	
Address of Record: Street		City		State	ZIP Code
Alternate Public Address: Street		City		State	ZIP Code
Business Name & Address: Street		City		State	ZIP Code
<p><b>ADDRESS:</b> Virginia law allows persons regulated by boards within the Department of Health Professions to provide an alternative address for public disclosure if they want their address of record to remain confidential, used only for agency purposes. Health professionals may choose to provide a work address, a post office box, or a home address as the public address. If an alternative public address is not provided, the address of record will also be used as the public address and may be disclosed if specifically requested. However addresses of individuals <u>are not posted</u> on the "License Lookup" program available through the board's website.</p>					
Home Phone:		Work Phone:		Mobile Phone	
E-Mail Address					
Graduation Date MM DD YY		Degree (Official Transcript required)		High School/College/University and City, State	

Submit address changes in writing immediately. Attach check or money order made payable to the Treasurer of Virginia. Applications will not be processed without the fee or vice versa. Incomplete applications **WILL BE RETURNED**. Applications will remain in process no longer than **one (1) year**. If, at the end of one (1) year, a license is not issued, the application file is **destroyed**. An applicant shall reapply for licensure, submit fees, required documentation, and meet the qualifications for licensure in effect at the time of the new application.

\*In accordance with §54.1-116 Code of Virginia, you are required to submit your Social Security Number or your control number\*\* issued by the Virginia Department of Motor Vehicles. If you fail to do so, the processing of your application will be suspended and fees will not be refunded. This number will be used by the Department of Health Professions for identification and will not be disclosed for other purposes except as provided by law. Federal and state law requires that this number be shared with other state agencies for child support enforcement activities. **NO LICENSE WILL BE ISSUED TO ANY INDIVIDUAL WHO HAS FAILED TO DISCLOSE ONE OF THESE NUMBERS.**

\*\*In order to obtain a Virginia driver's license control number, it is necessary to appear in person at an office of the Department of Motor Vehicles in Virginia. A fee and disclosure to DMV of your Social Security Number will be required to obtain this number.

**APPLICANTS DO NOT USE SPACES BELOW THIS LINE – FOR OFFICE USE ONLY**

APPROVED BY \_\_\_\_\_

REGISTRATION NUMBER	APPLICANT NUMBER	FEE RECEIPT #	FEE
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**2. Training Site Information (Supervisor must be Registered with the Board)**

Establishment Name and License Number:	#of Funeral Services Conducted in the Past Year:	#of Embalming procedures performed at establishment in the past year:
Establishment Address:		Establishment Telephone #:
Establishment Manager's Name and License Number:		Manager's Signature:
Funeral Service Supervisor and License Number:	Telephone #:	Funeral Service Supervisor Signature:
Embalming Supervisor and License Number:	Telephone #:	Embalming Supervisor Signature:
Anticipated Date of Employment:	Total Hours Scheduled to Work Each Week:	

**QUALIFICATIONS OF FUNERAL SERVICE INTERNSHIP:**

The internship shall consist of at least 3000 hours of training to be completed **within no less than 12 months and no more than 48 months**. The funeral service intern shall be assigned a work schedule of not less than 20 hours and no more than 60 hours per week in order to receive credit for training. **Credit shall only be allowed for training under direct supervision.**

**QUALIFICATIONS OF SUPERVISOR:**

Hold a current, unrestricted Virginia Funeral Service Licensee, Funeral Director, or Embalmer license and have at least two consecutive years in practice and employed full time in or under contract with the establishment where training occurs. **Credit shall only be allowed for training under direct supervision and the supervisor shall provide supervision only in the areas of funeral practice for which he is licensed.**

**QUALIFICATIONS OF TRAINING SITE:**

The establishment shall have a full unrestricted Virginia license and have complied in all respects with the regulations of the Board of Funeral Directors and Embalmers; and have 50 or more funerals and 50 or more bodies for embalming over a 12 month period for each person to be trained. This total must be maintained throughout the period of training.

**QUESTIONS MUST BE ANSWERED.** If any of the following questions (3-6) is answered **yes**, explain and substantiate with documentation.

- |  | YES   | NO    |
|--|-------|-------|
| 3. Have you ever been convicted of a violation of /or pled Nolo Contendere to any federal, state or local statute, regulation, or ordinance, or entered into any plea bargaining relating to a felony or misdemeanor or convicted of a felony or any crime involving moral turpitude? <b>Including</b> convictions for driving under the influence; excluding traffic violations. Attach your state criminal history record, a certified copy of any final order, decree, or case decision by a court or regulatory agency with lawful authority to issue such order, decree, or case decision, and any other information you wish to be considered with your application (i.e. information on the status of incarceration, parole, or probation, reference letters documentation of rehabilitation, etc.). Include explanation on events. | _____ | _____ |
| 4. Have you ever had any of the following disciplinary actions taken against a license/registration to practice funeral services or any such actions pending? (a) suspension/revocation (b) probation (c) reprimand/cease and desist (d) had your practice monitored (e) monetary penalty (f) denied licensure (g) refused renewal (i) denied examination? If <b>yes</b> , submit notices, orders, etc., from the regulatory authority.  | _____ | _____ |
| 5. Have you been physically or emotionally dependent upon the use of alcohol/ drugs or treated by, consulted with, or been under the care of a professional for any substance abuse within the last two years? If <b>yes</b> , please provide a letter from the treating professional, on letterhead, to include diagnosis, treatment, prognosis and fitness to practice.  | _____ | _____ |
| 6. Do you have a physical disease, mental disorder, or any condition, which could affect your performance of professional duties? If <b>yes</b> , please provide a letter from the treating professional, on letterhead, to include diagnosis, treatment, prognosis and fitness to practice.   | _____ | _____ |

7. AFFIDAVIT OF APPLICANT

- (a) I have read and understand the Virginia Board of Funeral Directors and Embalmers statutes and regulations and am aware that if granted a funeral internship in Virginia, I am required to comply with any laws and regulations of the Board of Funeral Directors and Embalmers.
- (b) I hereby give permission to the Virginia Board of Funeral Directors and Embalmers to secure additional information concerning me or any statement in this application from any person or any source the Board may desire. I further agree to submit to questioning by the Board or any Agent thereof, and to substantiate my statement(s) if desired by the Board.
- (c) I shall present any credentials or documents required or requested by the Board.
- (d) I, \_\_\_\_\_, the applicant herein, depose and say that all facts, statements, and answers contained in this application are true and correct; I am not omitting any information which might be of value to this Board in determining my qualifications and character, whether it is called for or not; and I agree that any falsification, omission, or withholding of information or facts concerning my qualification as an applicant shall be sufficient grounds for the denial, suspension, cancellation, or revocation of my Virginia Board of Funeral Directors and Embalmers internship even though it is not discovered until after issuance.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date



**COMMONWEALTH OF VIRGINIA**  
**Department of Health Professions**

Board of Funeral Directors and Embalmers  
 Perimeter Center  
 9960 Mayland Drive, Suite 300  
 Henrico, Virginia 23233-1463

E-Mail: FanBd@dhp.virginia.gov  
 Website: www.dhp.virginia.gov  
 Phone: 804-367-4479

### Funeral Supervisor Registration Application

Application fee is **\$35.00** check or money order made payable to the Treasurer of Virginia.  
**ALL FEES ARE NON-REFUNDABLE**

**1. Legal Full Name (Please Print or Type)**

First Name		Middle Name and Maiden Name		Last Name and Suffix	
Social Security No. or VA Control No.*		Date of Birth _____ MM DD YY		Place of Birth (City and State)	
Address of Record: Street		City		State	ZIP Code
Alternate Public Address: Street		City		State	ZIP Code
Business Name & Address: Street		City		State	ZIP Code
<p><b>ADDRESS:</b> Virginia law allows persons regulated by boards within the Department of Health Professions to provide an alternative address for public disclosure if they want their address of record to remain confidential, used only for agency purposes. Health professionals may choose to provide a work address, a post office box, or a home address as the public address. If an alternative public address is not provided, the address of record will also be used as the public address and may be disclosed if specifically requested. However addresses of individuals <u>are not posted</u> on the "License Lookup" program available through the board's website.</p>					
Home Phone:		Work Phone:		Mobile Phone:	
E-Mail Address				VA FSP License Number:	

Submit address changes in writing immediately. Attach check or money order made payable to the Treasurer of Virginia. Applications will not be processed without the fee or vice versa. Incomplete applications **WILL BE RETURNED**. Applications will remain in process no longer than **one (1) year**. If, at the end of one (1) year, a license is not issued, the application file is **destroyed**. An applicant shall reapply for licensure, submit fees, required documentation, and meet the qualifications for licensure in effect at the time of the new application.

\* In accordance with §54.1-116 Code of Virginia, you are required to submit your Social Security Number or your control number\*\* issued by the *Virginia* Department of Motor Vehicles. If you fail to do so, the processing of your application will be suspended and fees will not be refunded. This number will be used by the Department of Health Professions for identification and will not be disclosed for other purposes except as provided by law. Federal and state law requires that this number be shared with other state agencies for child support enforcement activities. **NO LICENSE WILL BE ISSUED TO ANY INDIVIDUAL WHO HAS FAILED TO DISCLOSE ONE OF THESE NUMBERS.** \*\*In order to obtain a Virginia driver's license control number, it is necessary to appear in person at an office of the Department of Motor Vehicles in *Virginia*. A fee and disclosure to DMV of your Social Security Number will be required to obtain this number.

**APPLICANTS DO NOT USE SPACES BELOW THIS LINE – FOR OFFICE USE ONLY**

APPROVED BY \_\_\_\_\_

LICENSE NUMBER	PENDING NUMBER	BASE STATE	RECEIPT NUMBER
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**QUALIFICATIONS OF SUPERVISOR:**

Hold a current, unrestricted Virginia Funeral Service Licensee, Funeral Director, or Embalmer license and have at least two consecutive years in practice and employed full time in or under contract with the establishment where training occurs. **Credit shall only be allowed for training under direct supervision and the supervisor shall provide supervision only in the areas of funeral practice for which he is licensed.**

**2. QUALIFICATIONS OF TRAINING SITE:**

The establishment shall have a full unrestricted Virginia license and have complied in all respects with the Virginia regulations and statutes governing the practice of funeral service; and have 50 or more funerals and 50 or more bodies for embalming over a 12 month period for each person to be trained. This total must be maintained throughout the period of training.

<input checked="" type="checkbox"/> <b>CHECK AREA OF FUNERAL PRACTICE TO PROVIDE SUPERVISION - Must be licensed in area of practice.</b>			
<input type="checkbox"/> <b>Embalming</b>		<input type="checkbox"/> <b>Directing</b>	
- If licensed in both areas check both.			
Full Name of Intern to supervise		Full Name of Intern to supervise	
No more than <b>two (2) funeral service interns</b> shall be concurrently registered under any one supervisor.			
Establishment Name		Establishment License Number	
Establishment Address: Street	City	State	Zip Code

**3. WORK HISTORY**

**A resume may not be used as a substitute for any question on this application.**  
 List in chronological order professional, full time work experience as a funeral service licensee, funeral director, or licensed embalmer for at least two consecutive years.

From	To	Employer	City/State

**QUESTIONS MUST BE ANSWERED.** If any of the following questions (4-7) is answered **yes**, include explanation and substantiate with documentation.

- |  | YES   | NO    |
|--|-------|-------|
| 4. Have you ever been convicted of a violation of /or pled Nolo Contendere to any federal, state or local statute, regulation, or ordinance, or entered into any plea bargaining relating to a felony or misdemeanor or convicted of a felony or any crime involving moral turpitude? <b>Including</b> convictions for driving under the influence; excluding traffic violations. Attach a copy of your state criminal history record, a certified copy of any final order, decree, or case decision by a court or regulatory agency with lawful authority to issue such order, decree, or case decision, and any other information you wish to be considered with your application (i.e. information on the status of incarceration, parole, or probation, reference letters documentation of rehabilitation, etc.). Include explanation on events. | _____ | _____ |
| 5. Have you ever had any of the following disciplinary actions taken against your license to practice or any such actions pending? (a) suspension/revocation (b) probation (c) reprimand/cease and desist (d) had your practice monitored (e) monetary penalty (f) denied licensure (g) refused renewal (i) denied examination? If <b>yes</b> , submit notices, orders, etc., from the regulatory authority.   | _____ | _____ |
| 6. Have you been physically or emotionally dependent upon the use of alcohol/ drugs or treated by, consulted with, or been under the care of a professional for any substance abuse within the last two years? If <b>yes</b> , please provide a letter from the treating professional, on letterhead, to include diagnosis, treatment, prognosis and fitness to practice.  | _____ | _____ |
| 7. Do you have a physical disease, mental disorder, or any condition, which could affect your performance of professional duties? If <b>yes</b> , please provide a letter from the treating professional, on letterhead, to include diagnosis, treatment, prognosis and fitness to practice.   | _____ | _____ |



8.

**AFFIDAVIT OF APPLICANT (owner)**

- (a) I have read and understand the Virginia Board of Funeral Directors and Embalmers statutes and regulations and am aware that if granted this registration in Virginia, I am required to comply with any laws and regulations of the Board of Funeral Directors and Embalmers.**
- (b) I hereby give permission to the Virginia Board of Funeral Directors and Embalmers to secure additional information concerning me or any statement in this application from any person or any source the Board may desire. I further agree to submit to questioning by the Board or any Agent thereof, and to substantiate my statement(s) if desired by the Board.**
- (c) I shall present any credentials or documents required or requested by the Board.**
- (d) I, \_\_\_\_\_, the applicant herein, depose and say that all facts, statements, and answers contained in this application are true and correct; I am not omitting any information which might be of value to this Board in determining my qualifications and character, whether it is called for or not; and I agree that any falsification, omission, or withholding of information or facts concerning my qualification as an applicant shall be sufficient grounds for the denial, suspension, cancellation, or revocation of my Virginia Board of Funeral Directors and Embalmers license even though it is not discovered until after issuance.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date