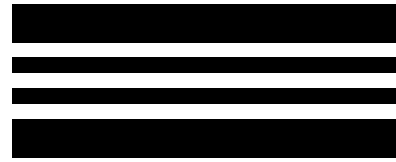




Funeral Directors/Embalmers Verification of Out-of-State License



24001-SUPPORTING

Applicant instructions

Send a copy of this form to each state board where you have been licensed.

State licensing board

The individual named below is applying for a license to practice as a funeral director and/or embalmer in Washington State. We need you to verify that our applicant is or has been licensed in your state. Please complete this form and return it to:

Scan and email: Funerals@dol.wa.gov

Or mail: Funeral and Cemetery Board Department of Licensing PO Box 9012 Olympia, WA 98507

For questions or language help call: (360) 664-1555

Applicant—Applicant complete this section

Form with fields for Name, Date of birth, Address, City, State, ZIP code, States of initial license, (Area code) Phone number, and Email.

Verification—Issuing jurisdiction complete this section

Verification section with fields for License information (Funeral director, Embalmer, Mortician), Basis of licensure (National Board examination, Reciprocity, State examination), and disciplinary actions.

I declare that the foregoing is true and correct to the best of my knowledge.

TYPE or PRINT Name (Area code) Phone number

Title Certifying state/jurisdiction

X Signature

Date and place