



ARKANSAS INSURANCE DEPARTMENT
FUNERAL SERVICES DIVISION | EMBALMERS & FUNERAL DIRECTORS

APPRENTICE FUNERAL DIRECTOR'S CASE REPORT

Apprenticeship No.: _____

IMPORTANT

Per Rule V – Apprenticeship, (3), all case reports must be filed in the Board Inspector's office by the 10th of the month following the month in which work was actually performed. The report may be mailed, e-mailed (as a scanned attachment), or faxed, but it must be received by the Inspector by the close of business on the 10th day of the month. If the 10th day of the month falls on a weekend day or state holiday, then the report is due by the close of business on the first business day following the weekend or holiday.

Apprentice Funeral Director's Name _____ Date _____ Case Number _____

IDENTIFICATION SECTION:

Name of Deceased: _____ Address: _____
Age at Death: _____ Sex: _____ Place of Death: _____ DOD: _____ Hour: _____
Location of Funeral: _____ Date: _____ Hour: _____
Location of Burial: _____ Cremation? [] Yes [] No Where? : _____
Cause(s) of Death: _____ How ascertained? _____
Was the Body Embalmed? [] Yes [] No Casket Type: _____
Outer Burial Container Type: _____ Condition of Body - Day of Funeral: _____

DUTIES/RESPONSIBILITIES: [Refer to Rule V, (5) for required number of services. Check All That Apply]

- A. Make the arrangements or observe the arrangements being made with the family, including the selection of merchandise.
B. Set up the church and organize how family and friends are to be directed.
C. Direct family, or assist in doing so, at the funeral and cemetery service, and dismiss the family and friends at the conclusion of the service.
D. Be in charge of the movement of the casket and instruct the pallbearers.
E. Organize the funeral procession and determine where and how parking is to be done at the chapel or church or any other place.
F. Arrange flowers.
G. Direct movement of people when viewing the deceased at the chapel or church or any other place.
H. Organize the "Order of Service" with minister and musicians.

NARRATION REQUIRED: On Page 2 of this report form, in your own words, describe, in detail, your duties/responsibilities on this case.

Apprentice Funeral Director's Signature

I certify that the information contained in this case report is a true and correct statement of the work done in the above-referenced funeral service and that this work was done under my direct supervision.

Licensed Funeral Director's Signature

Board ID No.

IMPORTANT: All portions of this form MUST BE COMPLETED or the case report will not be accepted

