

## TEXAS FUNERAL SERVICE COMMISSION

333 Guadalupe Street, Suite 2-110 Austin, TX 78701 Telephone: 512-936-2474 Fax: 512-479-5064

## Monthly Reporting Form of Provisional Licensees for Funeral Director/Embalmer

<b>Report Type:</b>	Funeral Director	Embalmer					
PROVISIONAL LICENSEE NAME:							
LICENSE NUMBER:	LICENSE NUMBER:						
Reporting Period: From:Through:							
Name, Address and License Number of Funeral Establishment:							
Name of Funeral Director In Charge/Embalmer In Charge:							
License Number of FDIC/EIC:							

## PLEASE READ CAREFULLY

- The provisional licensee must keep a record of the name(s) of the deceased, the date the provisional assisted with the case, and the name and license number of the licensee that provided the direct supervision for each case.
- > List the name of the deceased, the date activities performed, the name and license number of the licensees who provided direct supervision. You must indicate if it was funeral directing or embalming by checking the appropriate line at the top of this form. Use one report for funeral directing and a separate report for embalming.
- > Upon completion the form must be signed, and returned to the Funeral Director or Embalmer in Charge, whichever is applicable.
- > All forms are subject to inspection by the Commission and must be provided for inspection if requested.
- > It is the responsibility of the Funeral Director or the Embalmer in Charge, whichever is applicable, to arrange and ensure that direct supervision is provided to each provisional licensee under their employment. Failure to do so may be considered a violation and may result in disciplinary actions against all licenses involved.
- > It is the responsibility of the provisional licensee and the Funeral Director in Charge/Embalmer in Charge, whichever is applicable, to keep a copy of all forms, case activities, and any documentation pertaining to the provisional licensing program for a minimum of two years. Failure to do so may be considered a violation and may result in disciplinary actions taken against all license involved. All forms are subject to inspection by the Commission and must be provided for inspection if requested.
- > FUNERAL DIRECTOR ONLY LICENSEES MAY NOT SUPERVISE PROVISIONAL EMBALMERS AND EMBALMER ONLY LICENSEES MAY NOT SUPERVISE PROVISIONAL FUNERAL DIRECTORS.
- Make copies of blank forms as needed.

	Name Of Deceased	Date	Printed Name & License Number Of Supervisor	Supervisor's Signature
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	Name Of Deceased	Date	Printed Name & License Number Of Supervisor	Supervisor's Signature
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29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40.			1 1		
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36. 37. 38. 39. 40.	34.				
37.   38.   39.   40.	35.				
38.   39.   40.	36.	_			
Name Of Deceased   Date   Printed Name & License Number Of Supervisor   Supervisor   Signature	37.				
Name Of Deceased   Date   Printed Name & License Number Of Supervisor   Supervisor's Signature	38.	_			
Name Of Deceased	39.				
41.         Of Supervisor         Signature           42.         43.         44.           44.         45.         46.           47.         48.         49.           50.         51.         52.           53.         54.         54.	40.	_			
41.       42.         43.       44.         45.       46.         47.       48.         49.       50.         51.       52.         53.       54.		Name Of Deceased	Date	Printed Name & License Number	Supervisor's
43.         44.         45.         46.         47.         48.         49.         50.         51.         52.         53.         54.	41.			Of Supervisor	Signature
44.       45.         45.       46.         47.       48.         49.       50.         51.       52.         53.       54.	42.				
45.       46.         47.       48.         49.       50.         51.       52.         53.       54.	43.				
46.       47.         48.       49.         50.       51.         52.       53.         54.       54.	44.				
47.         48.         49.         50.         51.         52.         53.         54.	45.	_			
48.         49.         50.         51.         52.         53.         54.	46.	_			
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Dec	Dy signing my name as the supervisor on the above mentioned cases I hereby contify that I was the licensed funeral				

By signing my name as the supervisor on the above mentioned cases I hereby certify that I was the licensed funeral director and/or embalmer that provided direct supervision for the cases listed above.

Signature of Provisional Licensee		Date
	or	
Signature of Funeral Director In Charge		Signature of Embalmer In Charge

**IMPORTANT NOTE:** The licensee that provided direct supervision should be the only licensee signing as such on your report. This report must be returned to the Funeral Director In Charge or Embalmer In Charge, whichever is applicable.