



STATE OF NEW HAMPSHIRE  
BOARD OF REGISTRATION OF FUNERAL DIRECTORS AND EMBALMERS

7 Eagle Square  
Concord, NH 03301  
(603) 271-4648  
FAX (603) 271-5056

**APPRENTICE FUNERAL DIRECTING FORM**  
(Please Print or Type)

**Apprentice**

Report No. \_\_\_\_\_

Name of Apprentice: \_\_\_\_\_  
(First) (Last) Apprentice Lic. No. \_\_\_\_\_

Name of Licensed Sponsor: \_\_\_\_\_  
(First) (Last) License No. \_\_\_\_\_

Name and Address of Funeral Home: \_\_\_\_\_

**Deceased**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Place of Death: \_\_\_\_\_ Date of Death: \_\_\_\_\_

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

**Type of Funeral Service** (Check all that apply)

Full Service Funeral  Calling/Visitation Hours  Memorial Service  Graveside Service  Direct Cremation

**Location of Funeral Service**

Place of Funeral Service: \_\_\_\_\_ Time: \_\_\_\_\_

Address of Funeral Service: \_\_\_\_\_

Officiating Clergy: \_\_\_\_\_ Faith: \_\_\_\_\_

**Funeral Participation** (Check all that apply)

_____ Assisted in filing death certificate	_____ Assisted in obtaining burial permit	
_____ Assisted family with selection of merchandise	_____ Assisted with arrangement conference	
_____ Arranged for clergy	_____ Arranged for organist	_____ Arranged flowers
_____ Checked/recorded flowers	_____ Arranged for military honors	_____ Parked cars
_____ Assisted with office work	_____ Ordered casket/vault	_____ Carried casket
_____ Directed traffic	_____ Drove family car	_____ Drove hearse
_____ Prepared newspaper notices	_____ Received visitors	_____ Drove service car
_____ Seated guests at service	_____ Contacted cemetery	_____ Arrange for cremation
_____ Arranged for fraternal services	_____ S.S. and V.A. forms	

I hereby state this is a true description of this case.

Signature of Apprentice: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Sponsor: \_\_\_\_\_ Date: \_\_\_\_\_

NOTE: Reports shall be filed MONTHLY with the Board of Registration of Funeral Directors and Embalmers, 7 Eagle Square, Concord, NH 03301