South Carolina Department of Labor, Licensing and Regulation
South Carolina Board of Funeral Service
110 Centerview Dr. • Columbia • SC • 29210
P.O. Box 11329 • Columbia • SC 29211-1329
Phone: 803-896-4497 • Contact.Funeral@llr.sc.gov • Fax: 803-896-4554
llr.sc.gov/fs

EXPLANATION OF "YES" ANSWERS

Name: _____ Email: _____

Type of License/Registration Applying For (check one):

- ☐ Crematory Operator
- ☐ Funeral Director and/or Embalmer Student
- ☐ Funeral Director and/or Embalmer Apprentice
- ☐ Funeral Director and/or Embalmer
- ☐ Funeral Establishment Parent/Branch
- ☐ Crematory
- ☐ Retail Sales Outlet

Explanation of "Yes" answer to Personal History Question no. (Check one only):

☐ 1 ☐ 2 ☐ 3

Jurisdiction in which the action/event occurred (City, County & State): _____

Any case, file or credential number: _____

Offense(s) Explanation: You must provide a detailed statement of the events surrounding the conviction(s), denial or discipline of licensure, including all pertinent information (such as charges, dates, locations, and sentences). Provide copies of any case, file or licensing documents or records showing the final disposition, if applicable. Attach additional pages or copies of this form if necessary.

AFFIRMATION

I certify that that all statements, answers and representations made in this form, including all supplementary documents submitted with the form, are true and correct to the best of my knowledge after undertaking due diligence to determine their accuracy. I understand that providing any false, incomplete or misleading information herein is grounds for the denial or revocation of my license or registration in South Carolina.

_____ _____

Signature Date