



South Carolina Department of Labor, Licensing and Regulation
South Carolina State 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
www.llr.sc.gov/fs

VERIFICATION OF COMPLETION OF APPRENTICESHIP

Name: _____ Apprentice Certificate No: _____

Preceptor should complete the below information:

Funeral Facility Name: _____ Permit No.: _____

Mailing Address: _____

Phone: _____ Fax: _____ Email: _____

Apprenticeship Dates:

From: _____ To: _____
Mo./Day/Year Mo./Day/Year

I hereby certify that the above named individual has completed their apprenticeship under my direct supervision and has performed all of the duties required of an apprentice in a competent and professional manner.

Supervising Funeral Director:

Supervising Funeral Director (Signature)

Funeral Director's License Number

Supervising Funeral Director (Print Name)

Date

Supervising Embalmer:

Supervising Embalmer (Signature)

Embalmer's License No.

Supervising Embalmer (Print Name)

Date

Funeral Home Manager:

Funeral Home Manager (Signature)

Funeral Home Manager's License No.

Funeral Home Manager (Print Name)

Date