FUNERAL DIRECTOR CONTINUING EDUCATION SPONSOR REQUEST FOR APPROVAL OF COURSES

State Form 51391 (R4 / 4-26)

STATE BOARD OF FUNERAL & CEMETERY SERVICE
PROFESSIONAL LICENSING AGENCY
402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Telephone: (317) 234-3031
E-mail: pla12@pla.in.gov
www.pla.IN.gov

INSTRUCTIONS: *1. Please include course outline(s).*
2. Completed form and course outline(s) must be received at least two weeks prior to the scheduled board meeting to be considered.

Check here if you are a new sponsor to Indiana.

Name of sponsor	Date *(month, day, year)*
Address *(number and street, city, state, and ZIP code)*	Telephone number
Name of contact person	E-mail address

COURSE(S)

NAME OF COURSE	DATE OF COURSE *(month, day, year)*	TOTAL HOURS FOR THE COURSE	TOTAL HOURS OF INDIANA LAW	INDICATE WHAT AREA OF THE LAW (1, 2, 3 , OR 4)*	INDICATE NON-INDIANA LAW SUBJECTS COVERED IN COURSE	CHECK HERE IFTHE COURSE IS DISTANCE LEARNING

BOARD COMMENTS

Signature of Board | Date *(month, day, year)*

* 1.) Preneed burial service or merchandise (IC 30-2-13)
2.) The practice of funeral service (IC 25-15-2-22)
3.) The cremation act (IC 23-14-31)
4.) The cemetery act (IC 23-14)

Proper proof of course subject information should be included on the attendee's proof of completion.