STATE OF NEVADA
FUNERAL AND CEMETERY SERVICES BOARD
3740 Lakeside Drive, Suite 201, Reno, Nevada 89509
Phone (775) 825-5535 * Fax (775) 507-4102
Email: nvfuneralboard@fb.nv.gov * Website: http://funeral.nv.gov/

Apprentice Embalmer Request for Change in Preceptor

Apprentice Embalmer Information				
Full Legal Name:			Certificate No.	
Mailing Address:	City:		State:	Zip:
Phone Number: ☐ Home ☐ Cell	E-mail Address:			
Prior Preceptor and License No.	New Preceptor and License No.		Effective Date:	

Employment Information			
Name of Employer:			
Work Mailing Address:	City:	State:	Zip:
Phone Number: ☐ Work ☐ Cell	Work E-mail Address:		

Preceptor Affidavit for Registration as Apprentice Embalmer

In accordance with NRS 642.642.190, applicant for a certificate of registration as a registered apprentice embalmer must submit an affidavit from preceptor confirming that applicant shall enter upon duties as soon as the certificate is granted.

I, _____, hereby state that I am a licensed embalmer in the State of Nevada with license number_____, and that I will serve as the preceptor for _____. Additionally, I certify that I will submit the required reporting forms to the Board pursuant to NRS 642.240.

_____ _____
Signature of Preceptor Date

State of Nevada
County of _____

Signed and sworn to (or affirmed) before me on this_____ day of _____, in the year_____ by _____.

_____
Notary Public Seal

For Board Use Only:

☐ Date Received:		☐ Database Updated:	