Wisconsin Department of Regulation & Licensing

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Madison, WI 53703
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Website: http://drl.wi.gov

FUNERAL DIRECTORS EXAMINING BOARD

CERTIFICATE OF EMPLOYER

I, _____ holding funeral director license # _____
(Name of licensee under whom apprenticeship is being served)
agree to comply with the requirements of the law providing that if the apprentice under my supervision leaves my employ, it shall be my duty to give said apprentice an affidavit showing the length of time served as an apprentice with me and the work done in detail. SUCH AFFIDAVIT SHALL BE FILED WITH THE FUNERAL DIRECTORS EXAMINING BOARD BY THE APPRENTICE AND MADE A MATTER OF RECORD IN THAT OFFICE.

I, under the penalties of perjury, certify that the above requirements shall be met.

Starting date of apprentice's: APPRENTICESHIP _____ EMPLOYMENT _____

_____ _____
Date Name of Funeral Establishment

_____ _____
Funeral Director Signature Street Address

_____
City State Zip Code

I, _____ have entered the employ of _____
(Name of Apprentice) (Name of Funeral Establishment)
and will serve my apprenticeship under the supervision of _____ .
(Licensed Funeral Director)
I shall notify the Funeral Directors Examining Board and forward the affidavit showing the length of time served under the previous funeral director if I enter the employ of another licensed funeral director in this state. I understand that my certificate of registration must be renewed annually upon the payment of the renewal fee of $10.00 before January 1, of each year.

I, under the penalties of perjury, certify that the above requirements shall be met.

_____ _____ _____
Apprentice Signature Social Security # Date

_____
Name of Funeral Establishment

_____
Street Address

_____
City State Zip Code

For Receipting Use Only

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Ch. 445, Stats.