



## Funeral Directing Case Report — Internship Form

### Board of Mortuary Science

Date: \_\_\_\_\_ Case Number: \_\_\_\_\_

Intern Name, License Number: \_\_\_\_\_

Preceptor Name, License Number: \_\_\_\_\_

Funeral Establishment Name, License Number: \_\_\_\_\_

Establishment Phone Number: \_\_\_\_\_

Expiration Date of Internship: \_\_\_\_\_

Deceased Name: \_\_\_\_\_ Date of Death: \_\_\_\_\_ Place of Death: \_\_\_\_\_

**Give a short synopsis of the funeral: Example:** A 73-year-old male died at the Manor Nursing Home in Springfield. Arrangements were made Tuesday morning with visitation Wednesday afternoon and evening at Garden Chapel. Funeral was held 10:30 AM Thursday at Springfield Church with burial at city cemetery.

1. **Removal and Arrangements:** Describe your duties for the following, be specific for each funeral.

First call and removal:

Preparation room and dressing room, including cosmetics, dressing and casketing:

Arrangement conference:

2. **Merchandising:** Describe your duties regarding selling of merchandise, such as casket, urn, and vault.

3. **Visitation:** Describe your duties prior to and during visitation, including your responsibilities to the family.



4. **Funeral:** Describe your duties for the initial set up, the funeral service and the post funeral activities including family follow-up.

Describe the paperwork completed for this service:

5. **Learning:** What did you learn from this experience?

Intern Performed	Funeral Directing Task (To be completed by intern)	Intern Comments Intern must provide comments on their activities (Describe in general how you performed your duties)
	Complete Arrangement Paperwork	
	Contact Ministries	
	Contact Cemeteries/Crematories	
	Contact Outer Burial Container Provider	
	Contact Florist	
	Contact Musicians/Vocalists	
	Complete Obituaries	
	Conduct Funerals	
	Set-up Floral Arrangements	
	Set-up Register Book	
	Prepare Memorial Folders	
	Greet Funeral Attendees	
	Assist Casket Bearers	
	Prepare for Funeral Procession	
	Drive a Vehicle in Procession	
	Assist at Graveside Committal	
	Transport Flowers	
	Care for Funeral Attendees at Cemetery	



6. **Preceptor Comments:** Preceptor must provide comments on the intern's activities. The first 5 must be more in depth.

Signature of Intern: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Preceptor: \_\_\_\_\_ Date: \_\_\_\_\_

**Signature indicates that the intern's duties were satisfactory.**