



## Preceptor Application

### Board of Mortuary Science

**\*Must be submitted by Funeral Director**

**Funeral Director Name, License Number:** \_\_\_\_\_

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

**Establishment Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Number of funerals directed per year:** \_\_\_\_\_

**Number of current Interns:** \_\_\_\_\_

I hereby certify that \_\_\_\_\_ (name of proposed intern) has this day entered into a contract of employment with me as a Funeral Director Preceptor for the period of one year internship period for the purpose of completing their post-graduate education in Funeral Directing.

I agree to give \_\_\_\_\_ my sincere cooperation and supervise the internship as stated in the Administrative Rules. I will physically be present for the first 5 embalming cases and funeral cases. I will supervise the activity in the preparation room during the embalming of at least 25 cases. I will also supervise at least 25 funeral directing cases. I will attest to the accomplishment by assisting the completion of the individual embalming and funeral directing case reports.

#### Attestation Statement

I hereby attest that I have completed the preceptor training as outlined by the Board of Mortuary Science and have submitted proof of completion to the Board. I further attest that neither my funeral director license nor any of my associated funeral establishment licenses have been subject to disciplinary action within the past 5 years.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

#### Department of Inspections, Appeals, & Licensing

Board of Mortuary Science

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