



EMBALMING AND RESIDENT TRAINEE RATING REPORT

Authority: 1980 PA 299

Please indicate the total number of services performed this period in the spaces indicated below.

____ Removing remains from the place of death
____ Securing information for death certificate and newspapers
____ Filing death certificate/obtaining burial transit permit
____ Contacting newspapers for placement of death notice
____ Arranging for clergy
____ Checking/placing flowers
____ Receiving visitors
____ Assisting in selling funeral merchandise
____ Assisting in making funeral arrangements
____ Arranging cemetery details
____ Assisting at the funeral
____ Applying cosmetics and arranging hair of deceased

A minimum of 20 services are required to complete the training in each of the above categories.

Embalming

A minimum of 25 embalmings are required to complete the training.

____ Arranging for or providing music
____ Completing and filing social security forms
____ Completing and filing veterans' forms
____ Performing restorative work
____ Arranging the receiving/transferring of human remains by common carrier
____ Contacting the deceased's lodge, club, or place of employment concerning the death

A minimum of 3 services are required to complete the training in each of the above categories.

Is the Resident Trainee terminating employment at this time? Yes No

Resident Trainee Certification

I attest to the completeness and accuracy of the information contained on this report. I am aware that a false statement or dishonest answer may be grounds for disciplinary action against my license.

Resident Trainee's Signature _____ Date _____

Print Name _____

Resident Trainee License Number _____

Sponsor Certification

I certify the data contained in this report is correct and the resident trainee performed these services under my supervision on a full-time basis during establishment hours.

Sponsor Signature _____ Date _____

Print Name _____

Sponsor License Number _____