

Has this individual been licensed as an embalmer for at least five years? Yes _____ No _____

Did they pass the NBE examination of the International Conference of Funeral Service Examining Boards? Yes _____ No _____

If so, please list the date of the examination if you have it on file: _____
(Month Date Year)

Signed: _____ (Print) _____
(State Board Executive Director) (Name of the State Board Executive Director)

Secretary of the _____ State Board of _____
(Name of State) (Name of state board, EXAMPLE: Embalming)

STATE SEAL

Today's Date: _____

PLEASE MAIL DIRECTLY TO:

Kansas State Board of Mortuary Arts
700 SW Jackson, Suite 904
Topeka, Kansas 66603-3733
Phone: (785) 296-3980
Fax: (785) 296-0891
Email: boma1@ksbma.state.ks.us
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