

This form must be completed and submitted each quarter along with the master reports

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## Funeral Director Report

Apprentice's Name

Master's Name

Funeral Home

Current month in  
apprenticeship

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### Transfer

Name of deceased

Date of death

Time of death

Place of transfer

### Arrangements

Actual Funeral Director

Preneed Funeral?

Full Service Funeral?

Graveside Service

Direct Burial

Direct Cremation?

Cremation with service?

Other:

# Funeral Directing

Place of service?

How did you assist with  
organizing the service?

Did you open/close casket?

Did you instruct the pall  
bearers?

Describe your additional  
duties prior to and during  
visitation including your  
responsibilities to the family?

Was there a cemetery  
procession?

If so, describe participation

Indicate your level of participation in each task on this case: (P) Performed (A) Assisted (O) Observed (N) No involvement:  
**Apprentice Participation**

	Performed	Assisted	Observed	No Involvement
Took first call, obtained necessary information				
Obtained necessary family information via phone				
Obtained biographical information				
Operated and assembled equipment necessary for transportation of remains				
Obtained and prepared documentation for transfer from place of death.				
Used universal precautions related to transfer from place of death				
Directed and assisted family members that were present				
Dressing the deceased				
Cosmetizing and casketing				
Scheduling and observing the beautician, barber, or cosmetologist				
Scheduled necessary personnel				
Completed death certificate using EDRS				
Prepared certificate of service, if required				
Prepared burial permit/cremation permit using EDRS				
Scheduled time/place for family meeting				
Contacted and scheduled clergy, is applicable				
Completed funeral arrangement forms, including statement of goods and services				
Contacted cemeteries and/or crematories and scheduled necessary services				
Secured outer burial container provider, if necessary				
Contacted and scheduled services of florist, musicians, and vocalists, if necessary				
Special requests of the family				
Placed flowers				
Greeted visitation/funeral attendees				
Arranged music				
Arranged seating				
Opened/closed casket				
Instructed and assisted pall bearers				

	Performed	Assisted	Observed	No Involvement
Drove vehicle in procession				
Performed graveside committal service				
Directed and instructed funeral attendees as they left the services				
Completed the post service process with client families				

If this was a cremation, indicate your level of participation in each task on this case: (P) Performed (A) Assisted (O) Observed (N) No involvement

**Apprentice Participation**

	Performed	Assisted	Observed	No Involvement
Verified the identity of the human remains to be cremated				
Prepared remains for receiving crematory				
Prepared required cremation forms				
Escorted human remains to crematory				
Observed cremation				
Transferred cremated remains to temporary container or urn				

I certify the accuracy of the information recorded on this report.

Electronic Signature

I certify that this accurate reporting on the participation and progress of the above named apprentice for this case.

(Master) Electronic Signature