

State of Ohio
 Board of Embalmers and Funeral Directors
 77 South High Street, 16th Floor
 Columbus Ohio 43215-6108

APPLICATION FOR EXEMPTION OF CONTINUING EDUCATION REQUIREMENTS

Submit signed and dated original, no facsimiles accepted

Embalmer license #	Funeral Director license #
Date of Birth	
Licensee's name	
Address	
Address	
City	
State	
Zip code	
Telephone No (include area code)	

If granted an exemption of the continuing education requirements:	Circle one
I understand the exemption is valid for an indefinite period	Yes or No
I understand I will continue to pay renewal fees	Yes or No
I understand if I fail to pay renewal fees, my license/s will be lapsed and to be reinstated, I will pay renewal fees and \$50 per month penalty fees.	Yes or No
I understand that I am not permitted to serve as manager of a funeral home	Yes or No
I understand that I am not permitted to serve as funeral director actually in charge of and ultimately responsible for a funeral home.	Yes or No
I understand that I am not permitted to serve as a person actually in charge of an embalming facility	Yes or No

This application will be denied if you answer NO to any of the above statements

I will not engage in the practice of embalming and funeral directing in Ohio without first complying with all regulations governing reinstatement after exemption.

I understand to be reinstated (remove exemption) I must make a written request, and furnish proof of one of the following:

(1) Full-time practice of embalming and funeral directing in another state, and completion of CE hours for each year on the exemption equal to the requirements of Rule 4717-1-23 OAC. Or

(2) Completion of total number of CE hours equal to that required during the exempted period or

(3) Successful completion of the Ohio laws exams
 (see Rule 4717-1-23 OAC for specific requirements)

Licensee's signature

Date signed:

Bd mtg	Approved	Denied	Exemption started compliance period	CE Hours completed at time of exemption approval
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