



STATE OF LOUISIANA

PARISH OF _____

TO WHOM IT MAY CONCERN:

THIS IS TO NOTIFY THAT _____ (INTERN)

HAS COMPLETED ONE THOUSAND FIVE HUNDRED SIXTY (1560) CONTACT HOURS,
UNDER MY SUPERVISION, AS OUTLINED IN LA R.S. 37:842.

FUNERAL HOME NAME AND ADDRESS

BEGINNING _____, AND ENDING _____
DATE DATE

DURING THIS PERIOD _____ (INTERN)

HAS ASSISTED IN THE EMBALMING OF AT LEAST _____ BODIES AND
ASSISTED IN CONDUCTING AT LEAST _____ FUNERALS.

INTERNSHIP REPORTS HAVE BEEN VERIFIED AND SIGNED BY ME AND
FORWARDED TO THE BOARD'S OFFICE.

The above affidavit was signed in the presence of a NOTARY, and in the presence of the
undersigned INTERN and LICENSED EMBALMER and FUNERAL DIRECTOR and/or

FUNERAL DIRECTOR OF LOUISIANA on this ____ day of _____, 20____ after
due reading of the whole.

INTERN: _____ (Signature and Intern number)

LICENSED SUPERVISOR: _____ (Signature and License number)

NOTARY: _____

(SEAL)

