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STATE OF WEST VIRGINIA
Board of Funeral Service Examiners
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INACTIVE CERTIFICATION FORM

I hereby certify that I am currently licensed as a funeral director and/or an embalmer in the State of West Virginia. Furthermore, although I wish to maintain such license(s) with payment of license renewal fees, I no longer wish to actively practice embalming and funeral directing in the State of West Virginia.

Therefore, I am requesting that the West Virginia Board of Funeral Service Examiners place my license on inactive status. I understand that inactive status is a better alternative to allowing my license to lapse because I will not be required to pay any reinstatement fees or take the state law examination in the future. I understand that if I wish to change my license status from inactive to active at any time other than when I renew my license, I will be required to pay a twelve dollar (\$12.00) activation fee plus the renewal fee at the time of reinstatement.

I understand that inactive status will exempt me from all continuing education requirements mandated by W. Va. Code '30-6-1 et. seq. and 6CSR1 '18.3 during the time that my license is inactive. I understand that in order to place my license on active status in the future, I must obtain all continuing education credits not obtained while inactive. For example, if my license is inactive for two (2) years, I must earn seven (7) credits before I would be eligible for active status.

I hereby certify that I will not practice funeral directing and/or embalming in the State of West Virginia at any time while my license is on inactive status. I understand that, in the event I wish to resume the active practice of funeral directing and/or embalming, I must first comply with all continuing education requirements by submitting: (1), proof of continuing education attendance and, (2), a request to change my status to active to the West Virginia Board of Funeral Service Examiners. I will not practice until such time as an Active wallet card has been issued.

I understand that failure to abide by this mandate may result in appropriate disciplinary action with regard to my license or future license.

Signature of Licensee

Date