

Texas Occupations Code Chapter 651

Section 651.502. LICENSE DENIAL; EFFECT OF CRIMINAL CONVICTION

In order for the Commission to properly evaluate an application for licensing or request for reinstatement of a license, the following information should be transmitted to the Commission.

PERSONAL IDENTIFIERS:

1. Full Name, Date of Birth, and Social Security Number
2. Complete Address and Phone Number
3. Nearest Living Relative Not Living at the Same Address

OFFENSE INFORMATION:

1. Offense for which charged
2. Offense for which convicted
3. City, County, state of Conviction
4. Name of court and Presiding Judge
5. Copies of Final Judgment or Court Decree
6. If incarcerated, provide the Name, Location, and Times for each Instance
7. Name, Address and Phone Number for Probation or Parole Officer(s) Assigned
8. Statement from Parole Officer or Probation Officer on your status of Parole or Probation

ADDITIONAL INFORMATION:

1. Must submit to an FBI fingerprint background check. (all forms may be downloaded from the TFSC website)
2. Letters of Reference(s) and Recommendation(s) (not to include personal attorney)
3. Statement of interest or intent of becoming a Funeral Director/Embalmer in Texas and why the Texas Funeral Service Commission should approve the request.

I, _____ do hereby certify the attached information is true and correct to the best of my ability. I further authorize the release of information to the Texas Funeral Service Commission for the purpose of determining my eligibility for licensing as a Funeral Director and/or Embalmer in accordance with Texas Occupations Code Chapter 651 Section 651.502(a)(1).

Witness my signature this the ____ day of _____, 200__.

SWORN and SUBSCRIBED TO THIS the ____ day of _____, 200__.

Notary Public