Directions for Application for Funeral Director Certificates

Promulgated in Order Tai-Nei-Min-Zi No. 1030122477 on March 27, 2014 Articles 2, 3 and 6 and Appendixes 1 and 5 amended and promulgated in Order Tai-Nei-Min-Zi No. 1041101096 on March 11, 2015 All articles amended in Order Tai-Nei-Min-Zi No. 1061105201 on December 29, 2017

- Article 1 The Directions for Application for Funeral director Certificates (hereinafter referred to as the Directions) are formulated in accordance with Article 2 of the Regulations for Administration on Funeral Director, which stipulates that those having a Class B technician certificate or above for mortuary services, completing more than 20 credits of professional courses on mortuary services in public or private colleges or above, and having operated or having been employed to provide mortuary services for more than 2 years since July 1, 2003, may apply to the Ministry of the Interior for the issuance, renewal or re-issuance of a funeral director's certificate.
- Article 2 Funeral directors applying for a funeral director's certificate for the first time shall submit the following documents:
 - 1. Application form (Appendix 1).
 - 2. Qualification documents:
 - (1) Copy of Class B technician certificate for mortuary services;
 - (2) Certificate of completion of more than 20 credits of professional courses on mortuary services in public or private colleges or above (Appendix 2); and
 - (3) Certificate of service in mortuary services for 2 years or more (Appendixes 3 and 4).
 - 3. Copy of ID documents; and
 - 4. 2 half-length photos (2-inch, front, and uncapped) in the last 6 months.
- Article 3 When a funeral director's certificate is defaced, damaged, lost or destroyed, funeral directors shall submit the documents specified in Subparagraph 1, 3 and 4 of Article 2 to apply for re-issuance.
- Article 4 Six months before the expiration of a funeral director's certificate, funeral directors shall submit the following documents for re-issuance:
 - 1. Documents specified in Subparagraph 1, 3 and 4, of Article 2; and
 - 2. A certificate of completion of 30 hours of professional training.
- Article 5 When a funeral director's certificate expires, funeral directors shall submit the following documents to apply for issuance:
 - 1. Documents specified in Article 2; and
 - 2. A certificate of completion of 30 hours of professional training in the last 6 years.
- Article 6 In case of a change in the operation or employment, funeral directors shall submit the Funeral director Job Change Form (Appendix 5) to the Ministry of the Interior for future reference and inform the municipal or city/county government authority of the operation within 30 days.
- Article 7 Funeral directors shall apply on line and submit the written application by mail:
 - 1. After inputting application data on the mortuary service information website of the Ministry of the Interior, an applicant shall submit the application form and qualification documents to the Ministry of the Interior by mail (Appendix 6).
 - 2. An application fee is charged in accordance with the Standards for Funeral director Certificate Fees and shall be paid as follows:
 - (1) Paid by postal money order (beneficiary: Ministry of the Interior) which shall be mailed to the Ministry of the Interior with application documents.
 - (2) Paid on line via e-Bill.

Article 8 Instructions:

1. Unless otherwise stated, qualification documents shall be original. The results of review shall be sent to the contact address by registered mail with AR within 30 working days after the receipt of the documents by the Ministry of the Interior. If documents are not

- complete or qualifications are not met, the documents and the postal money order will be returned; for an application fee paid via e-Bill, the fee will be returned to the account specified in the application form; if qualifications are met, the certificate will be returned.
- 2. If qualification documents submitted are found inconsistent with the original or fraudulent, an applicant involved in criminal liability will be transferred to the investigation agency; for those having obtained a funeral director's certificate, the original issuance shall be abolished and the certificate shall be annulled.
- 3. If finding information on the funeral director's certificate incorrect after the receipt of the funeral director's certificate, an applicant shall submit the original certificate to the Ministry of the Interior for cancellation and re-issuance within 1 month after the receipt of the certificate
- 4. For the qualifications and conditions for funeral directors, application or renewal (re-issuance) of a funeral director's certificate, management of mortuary services, and other matters to be observed, refer to the Regulations for Administration on Funeral Director.

Article 9 Procedures for on line registration are as follows:

- 1. Visit the mortuary service information website of the Ministry of the Interior and click "Funeral directors" to access the "Application for Funeral director Certificates".
- 2. Use a personal email box as the personal account and set a password to fill in and correct application data. The personal password will be sent to the personal email box. Keep personal information properly from any illegal use by others.
- 3. Input and save personal information according to the instructions. If personal information is mistakenly input, correct it in the system by entering the personal account and password. After confirming that input data are correct, click "Cause of Application" to export an application form and complete on line registration.
- 4. After input data are submitted, the input data are for inquiry only and cannot be corrected unless returned by the Ministry of the Interior for correction due to unmet qualifications. If application data are mistakenly input, correct them in the written application with the seal affixed.
- 5. After completing on line registration, access the "Application for Funeral director Certificates" by entering the personal account and password to check the status of the application.

Article 10 For the application process, refer to Appendix 7.

| Chinese Name Date of Birth (mm/dd/yyyy) National ID Namber Residential Address Telephone Number Mobile Phone Number Number Email Highest Education Name of Mortuary Service Industry Business/Company Address Date of Operation or Employment (mm/dd/yyyy) The application fee may be paid as follows: Paid by postal money order (beneficiary: Ministry of the Interior) which shall be mailed to the Ministry of the Interior with applicantion documents. Paid on line via e-Bill ("Government Fees - "Treasury Payment"): An applicant may transfer the paymen on e-Bill by debit card (refer to "Funeral directors" - "FAQ") and fill in the date of transfer (mm/dd/yyyy) and attach the account information for checks and refunds: Bank Name: Bank Branch Account Name: Applicant Account Number: Not receipt will be issued for on line payment. To receive a receipt, tick in the check box. Attach a Copy of ID Document (Front) Attach a Copy of Tochnician Certificate for Mortuary Services (Back) *Not required for reissuance and renewal of a funeral director's certificate. Attach a Copy of Bankbook for on line Payment (including Bank Name and Account Number) Ihereby declare the following: 1. Thave thoroughly read the Regulations for Administration on Funeral Director and the Directions for Application. For Funeral director Certificates and agree to abide by the related requirements for application. 2. Thave verified the documents submitted or review. I shall be solely responsible for the returned application. Ioss of contact in case of an emergency, or failure to serve important notices caused by falseness of the documents submitted or involving criminal liability. 3. Thave no circumstances specified in Article 5 of the Regulations for Administration on Funeral Director that prohibit me from acting as a funeral director, and agree that the authority in charge may check the correctness and authenticity of the documents submitted and that the Ministry of the Interior may revoke my qualifications for a funeral director and | | | Re-issu Second | ance Issuance | Fun | eral Directo Applicatio | | |
|--|--|---|---|--|--|---|--------------------------|---------------------|
| Date of Birth (mm/dd/yyyy) Number Residential Address Telephone Number Number Number Photos (2-inch,) | Chinese Name | | | English N | lame | | | |
| Permanent Address Telephone Number Mobile Phone Number | Date of Birth | (mm/dd/yy | уу) | | | | | Attach |
| Telephone Number Number Number Photos (2-inch,) | | | | Residential A | Address | | | Front, and |
| Righest Education | | | | | | | | 2 Half-length |
| Name of Mortuary Service Industry Business/Company Address Date of Operation or Employment (mm/dd/yyyy) The application fee may be paid as follows: Paid by postal money order (beneficiary: Ministry of the Interior) which shall be mailed to the Ministry of the Interior with application documents. Paid on line via e-Bill ("Government Fees - "Treasury Payment"): An applicant may transfer the payment on e-Bill by debit card (refer to "Funeral directors" - "FAQ") and fill in the date of transfer (mm/dd/yyyy) and attach the account information for checks and refunds: Bank Branch Account Name: Applicant Account Number: Not receipt will be issued for on line payment. To receive a receipt, tick in the check box. Attach a Copy of ID Document (Front) Attach a Copy of ID Document (Back) Attach a Copy of Technician Certificate for Mortuary Services (Font) Who required for reissuance and renewal of a funeral director's certificate. Attach a Copy of Bankbook for on line Payment (including Bank Name and Account Number) I hereby declare the following: 1. I have thoroughly read the Regulations for Administration on Funeral Director and the Directions for Application. 2. I have verified the documents submitted for review. I shall be solely responsible for the returned application, loss of contact in case of an emergency, or failure to serve important notices caused by falseness of the documents submitted or involving criminal liability. 3. I have no circumstances specified in Article 5 of the Regulations for Administration on Funeral Director that prohibit me from acting as a funeral director, and agree that the authority in charge may check the correctness and authenticity of the documents submitted and that the Ministry of the Interior may revoke my qualifications for a funeral director and cancel my certificate if I violate the regulations. 4. I agree that the Ministry of the Interior may collect, handle, use and retain my basic information, input data and certificates submitted when performing its legal duties | Er | nail | | | | | | ,,, |
| Date of Operation or Employment | Highest | Education | | | | | | |
| Date of Operation or Employment (mm/dd/yyyy) The application fee may be paid as follows: Paid by postal money order (beneficiary: Ministry of the Interior) which shall be mailed to the Ministry of the Interior with application documents. Paid by postal money order (beneficiary: Ministry of the Interior) which shall be mailed to the Ministry of the Interior with application documents. Paid by postal money order (beneficiary: Ministry of the Interior) which shall be mailed to the Ministry of the Interior with application documents. Paid by postal money order (beneficiary: Ministry of the Interior) which shall be mailed to the Ministry of the Interior which shall be mailed to the Ministry of the Interior may capture and reason of the Interior which shall be mailed to the Ministry of the Interior may capture and reason of the Interior may capture for reisval and the Ministry of the Interior may capture and renewal of a funeral director's certificate. Attach a Copy of ID Document (Front) Attach a Copy of ID Document (Back) | | • | | | | | | |
| Employment | Business/Cor | mpany Address | | | | | | |
| The application fee may be paid as follows: Paid by postal money order (beneficiary: Ministry of the Interior) which shall be mailed to the Ministry of the Interior with application documents. Paid on line via e-Bill ("Government Fees - "Treasury Payment"): An applicant may transfer the payment on e-Bill by debit card (refer to "Funeral directors" - "FAQ") and fill in the date of transfer. (mm/dd/yyyy) and attach the account information for checks and refunds: Bank Name: | | | (mm/dd/ | уууу) | | | | |
| Attach a Copy of ID Document (Front) Attach a Copy of Technician Certificate for Mortuary Services (Front) **Not required for reissuance and renewal of a funeral director's certificate. Attach a Copy of Bankbook for on line Payment (including Bank Name and Account Number) I hereby declare the following: 1. I have thoroughly read the Regulations for Administration on Funeral Director and the Directions for Application for Funeral director Certificates and agree to abide by the related requirements for application. 2. I have verified the documents submitted for review. I shall be solely responsible for the returned application, loss of contact in case of an emergency, or failure to serve important notices caused by falseness of the documents submitted or involving criminal liability. 3. I have no circumstances specified in Article 5 of the Regulations for Administration on Funeral Director that prohibit me from acting as a funeral director, and agree that the authority in charge may check the correctness and authenticity of the documents submitted and that the Ministry of the Interior may revoke my qualifications for a funeral director and cancel my certificate if I violate the regulations. 4. I agree that the Ministry of the Interior may collect, handle, use and retain my basic information, input data and certificates submitted when performing its legal duties based on the specific purpose of "information disclosure". To: Ministry of the Interior | the Interior Paid on lin on e-Bill (mm/dd/yy Bank Name | with application e via e-Bill ("Go by debit card (yy) and attach the e: umber: | document vernment refer to e account Bank | ts. Fees - "Treasi "Funeral dire information fo Branch | ury Payn ectors" - r checks Account | nent"): An applica "FAQ") and fi and refunds: Name: <u>Applicant</u> | ant may tr ill in the | cansfer the payment |
| Attach a Copy of Technician Certificate for Mortuary Services (Front) Not required for reissuance and renewal of a funeral director's certificate. Attach a Copy of Bankbook for on line Payment (including Bank Name and Account Number) I hereby declare the following: 1. I have thoroughly read the Regulations for Administration on Funeral Director and the Directions for Application for Funeral director Certificates and agree to abide by the related requirements for application. 2. I have verified the documents submitted for review. I shall be solely responsible for the returned application, loss of contact in case of an emergency, or failure to serve important notices caused by falseness of the documents submitted or involving criminal liability. 3. I have no circumstances specified in Article 5 of the Regulations for Administration on Funeral Director that prohibit me from acting as a funeral director, and agree that the authority in charge may check the correctness and authenticity of the documents submitted and that the Ministry of the Interior may revoke my qualifications for a funeral director and cancel my certificate if I violate the regulations. 4. I agree that the Ministry of the Interior may collect, handle, use and retain my basic information, input data and certificates submitted when performing its legal duties based on the specific purpose of "information disclosure". To: Ministry of the Interior | | | | • | | | | nent (Back) |
| director's certificate. Attach a Copy of Bankbook for on line Payment (including Bank Name and Account Number) I hereby declare the following: 1. I have thoroughly read the Regulations for Administration on Funeral Director and the Directions for Application for Funeral director Certificates and agree to abide by the related requirements for application. 2. I have verified the documents submitted for review. I shall be solely responsible for the returned application, loss of contact in case of an emergency, or failure to serve important notices caused by falseness of the documents submitted or involving criminal liability. 3. I have no circumstances specified in Article 5 of the Regulations for Administration on Funeral Director that prohibit me from acting as a funeral director, and agree that the authority in charge may check the correctness and authenticity of the documents submitted and that the Ministry of the Interior may revoke my qualifications for a funeral director and cancel my certificate if I violate the regulations. 4. I agree that the Ministry of the Interior may collect, handle, use and retain my basic information, input data and certificates submitted when performing its legal duties based on the specific purpose of "information disclosure". To: Ministry of the Interior | | Services (Fro | ont) | • | | Servic | es (Back) | • |
| I hereby declare the following: I have thoroughly read the Regulations for Administration on Funeral Director and the Directions for Application for Funeral director Certificates and agree to abide by the related requirements for application. I have verified the documents submitted for review. I shall be solely responsible for the returned application, loss of contact in case of an emergency, or failure to serve important notices caused by falseness of the documents submitted or involving criminal liability. I have no circumstances specified in Article 5 of the Regulations for Administration on Funeral Director that prohibit me from acting as a funeral director, and agree that the authority in charge may check the correctness and authenticity of the documents submitted and that the Ministry of the Interior may revoke my qualifications for a funeral director and cancel my certificate if I violate the regulations. I agree that the Ministry of the Interior may collect, handle, use and retain my basic information, input data and certificates submitted when performing its legal duties based on the specific purpose of "information disclosure". Ministry of the Interior | 1 | | | | , | _ | | |
| I have thoroughly read the Regulations for Administration on Funeral Director and the Directions for Application for Funeral director Certificates and agree to abide by the related requirements for application. I have verified the documents submitted for review. I shall be solely responsible for the returned application, loss of contact in case of an emergency, or failure to serve important notices caused by falseness of the documents submitted or involving criminal liability. I have no circumstances specified in Article 5 of the Regulations for Administration on Funeral Director that prohibit me from acting as a funeral director, and agree that the authority in charge may check the correctness and authenticity of the documents submitted and that the Ministry of the Interior may revoke my qualifications for a funeral director and cancel my certificate if I violate the regulations. I agree that the Ministry of the Interior may collect, handle, use and retain my basic information, input data and certificates submitted when performing its legal duties based on the specific purpose of "information disclosure". To: Ministry of the Interior | Attach | a Copy of Bankb | ook for o | n line Payment | (includi | ng Bank Name an | d Account | t Number) |
| | I have thoroughly read the Regulations for Administration on Funeral Director and the Directions for Application for Funeral director Certificates and agree to abide by the related requirements for application. I have verified the documents submitted for review. I shall be solely responsible for the returned application, loss of contact in case of an emergency, or failure to serve important notices caused by falseness of the documents submitted or involving criminal liability. I have no circumstances specified in Article 5 of the Regulations for Administration on Funeral Director that prohibit me from acting as a funeral director, and agree that the authority in charge may check the correctness and authenticity of the documents submitted and that the Ministry of the Interior may revoke my qualifications for a funeral director and cancel my certificate if I violate the regulations. I agree that the Ministry of the Interior may collect, handle, use and retain my basic information, input data and certificates submitted when performing its legal duties based on the specific purpose of "information disclosure". | | | | | | | |
| Applicant: (signature) Date of Application: (mm/dd/yyyy) | Ministry of the l Applicant: | Interior (signature) | | Date of | Applicat | ion: | (mm/dd/ | (yyyy) |

Instructions:

- 1.Instructions for data input:
 - (1) Chinese name: If the name is rare and cannot be input or shown, input instead, such as Lin, ○-Ta, and write it down on the printed application form with the seal affixed.
- (2) English name: Fill in the English name specified in the passport. If a passport is unavailable, search for English name spellings on the website of the Bureau of Consular Affairs. If English name is blank, the authority in charge will convert the Chinese name using Pinyin.
- (3) Attach 2 half-length photos (2-inch, front, and uncapped) in the last 6 months (1 for the certificate)
- (4) Name of mortuary service industry: Fill in the full title of the existing employer, if any.
- (5) Attach a copy of ID documents: ID documents include the national ID card; dependent resident certificate for the Taiwan area or long-term resident certificate for the Taiwan area for people in Mainland China; resident certificate for the Taiwan area or exit & entry permit for the Taiwan area for people in Hong Kong or Macao; alien resident certificate or alien permanent resident certificate for foreigners; and resident certificate for the Taiwan area for people in Taiwan without household registration.
- (6) Fill in each field in the application form. If any fields lack information downloaded from the system, correct it on the printed application form with the seal affixed.
- 2. The qualification documents are as follows:
 - (1) Copy of Class B technician certificate for mortuary services.
 - (2) For an applicant completing more than 20 credits of professional courses on mortuary services, the original of the following documents shall also be attached:
 - A.List of credits of professional courses on mortuary services specified in Subparagraph 2, Paragraph 1, Article 2 of the Regulations for Administration on Funeral Director studied or taught.
 - B.Original certificate of certificate of creditscredits or teaching certificate:
 - (a) The original certificate of completion of credits refers to the original certificate of credits or transcript of professional courses on mortuary services opened by schools in accordance with the central government authority's announcement (including the department name, course year and semester, and course name).
 - (b) Original teaching certificate: For applicants having taught the subjects of professional courses on mortuary services announced by the central government authority in public or private colleges or above for at least 1 semester per subject or for 36 hours or more in total with each subject having at least 2 credits, they may submit the teaching certificate issued by the schools to waive the credits of the subjects (including the department name, course year and semester, course name, and teacher).
- 3. For an applicant having operated or having been employed to provide mortuary services for more than 2 years, the following qualification documents shall also be attached:
- (1) For an applicant having operated mortuary services, the following documents shall also be attached:
 - A. A copy of certificate of company or business registration: A copy of official letter for approval of operation licenses issued by the municipal or city/county government authority in accordance with the Mortuary Service Administration Act shall be attached.
 - B. The proof of person in charge qualifications for more than 2 years issued by the mortuary service industry association, with the chop of the association affixed.

- (2) For an applicant having been employed to provide mortuary services, the following documents shall also be attached:
 - A. A certificate of labor insurance refers to the labor insurance data sheet issued by the Bureau of Labor Insurance, Ministry of Labor or city/county bureau of labor insurance in accordance with the law (including the years of service insured by the employer or mortuary service industry association and insurance details).
 - B. A proof of work in the mortuary service industry for more than 2 years shall be issued by the mortuary service industry specified in Article 42 of the Mortuary Service Administration Act, with the chop affixed, specifying mortuary services provided by the applicant.

List of Credits of Professional Courses on Mortuary Services Specified in Subparagraph 2, Paragraph 1, Article 2 of the Regulations for Administration on Funeral Director Studied or Taught

| credits of the following | the applicant, Na ng professional courses on mortu | uary services specified in Subpa | aragraph 2, Para | udied or taught a total of 20 agraph 1, Article 2 of the |
|----------------------------|---|----------------------------------|------------------|--|
| Regulations for Admi | inistration on Funeral Director u | pon the Ministry of the Interior | 's verification. | |
| Profes | ssional Course | School and Department | Semester | Course Studied (Taught) |
| Required- Humanities | Funeral Etiquette | | | |
| Required- Humanities | View of Life and Death | | | |
| Required- Humanides | Funeral Ethics | | | |
| | Funeral Instruments | | | |
| Required- Humanities | Master of Funeral Ceremonies | | | |
| | Planning and Design of | | | |
| | Funeral Halls | | | |
| Required-Health | Hospice and Grief Counseling | | | |
| Science | 2100\$1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1- | | | |
| Required-Health Science | Funeral Policies and | | | |
| | Regulations | | | |
| Optional | Mortuary Science | | | |
| Optional | Body Treatment and Beauty | | | |
| Optional | Funeral Hygiene | | | |
| Optional | Mortuary Services and Management | | | |
| Optional | Funeral Economics | | | |
| Optional | Funeral Facilities | | | |
| Optional | Funeral Planning and Design | | | |
| Optional | Funeral Applied Regulations | | | |
| | and Contracts | | | |
| Number of certificates pro | ficates of credits: Numbe | er of teaching certificates: | . The certificat | te of credits and teaching |

Instructions:

1. Required courses:

| Field | Number of Statutory Credits | Professional Course | Maximum Number of Credits Accepted |
|----------------|--------------------------------|---|------------------------------------|
| | 2 | Funeral Etiquette | 2 |
| | 2 (At least 1 course | View of Life and Death | 2 |
| Humanities | should be completed.) | Funeral Ethics | 2 |
| Humanites | 2 (At least 1 course should be | Funeral Instruments | 2 |
| | | Master of Funeral Ceremonies | 2 |
| | completed.) | Planning and Design of Funeral Halls | 2 |
| Health Science | 2 | Hospice and Grief Counseling | 2 |
| Social Science | 2 | Funeral Policies and Regulations | 2 |

2. Optional courses:

| Professional Course | Maximum Number of Credits Accepted Optional courses: |
|---|--|
| Mortuary Science | 2 |
| Body Treatment and Beauty | 2 |
| Funeral Hygiene | 2 |
| Mortuary Services and Management | 2 |
| Funeral Economics | 2 |
| Funeral Facilities | 2 |
| Funeral Planning and Design | 2 |
| Funeral Applied Regulations and Contracts | 2 |

**Completing 20 credits of professional courses on mortuary services specified in Subparagraph 2, Paragraph 1, Article 2 of the Regulations for Administration on Funeral Director shall refer to completing at least 20 credits of professional courses on mortuary services, including 10 credits of required courses, verified by the Ministry of the Interior, with up to 2 credits of each subject accepted.

For example, if an applicant has completed 16 credits of required courses (including 10 statutory credits), additional 4 credits of required courses or optional courses shall be completed to meet the requirements for completing 20 credits.

Certificate of Mortuary Service Industry Person in Charge Qualifications

| Name | | National ID No. | | | |
|---|---|--------------------|--------------|--|--|
| Full Title of Company/Business/In stitution | | | | | |
| Company/Business/In stitution Address | | | | | |
| Term of Service | From (mm/dd/yyyy) to (mm/dd/yyyy), totaling years and months Currently on service Having left office | | | | |
| If the certificate is fo | If the certificate is found false, the association shall be solely liable. | | | | |
| Mortuary Service ind | lustry Association | (Full Title): | | | |
| Chairman: | | | | | |
| Address: | | | | | |
| | | | | | |
| | | | | | |
| | | Date: | (mm/dd/yyyy) | | |

^{*} A photocopy of the table may be used with the chop of the association and the chairman's seal affixed.

^{*} In addition to the table, the person in charge of the mortuary service industry shall submit a copy of official letter for approval of operation licenses issued by the municipal or city/county government authority in accordance with the Mortuary Service Administration Act.

Proof of Work in the Mortuary Service Industry

| 110 | OI OI VVC | <u>nk ili ulc</u> | Wiortuary i | JCI V | 100 1 | Huus | ou y | | |
|--|-----------|-------------------|------------------------------|-----------------|-------------|------|-------|---------|------|
| Name | | | National ID No. | | | | | | |
| Danasta | | | :41 - | Term of Service | | | | | |
| Departme | ent | 1 1 | itle | Year | Month | Date | Year | Month | Date |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Years of Se | rvice | | otaling ye rently on serv | ears vice | and □Hav | | onths | | |
| The company/business/institution is a mortuary service industry in accordance with Article 42 of the Mortuary Service Administration Act. This is to certify that the employee provides mortuary services, including hospice consultation, body transport, funeral hall setup, funeral arrangements, obituary notification, preparation of funeral halls, casketing, funeral rite, and body treatment, in the company/business/institution. If the proof is found false, the company/business/institution shall be solely liable. | | | | | | | | | |
| Company/Business/Institution (Full Title): Person in Charge: | | | | | | | | | |
| Address: | | | | | | | | | |
| Unified Business No.: | | | | | | | | | |
| | | | | Date: | | | (mm | /dd/yyy | y) |

^{*} A photocopy of the table may be used with the chop of the company/business/institution and the person in charges' seal affixed.

In addition to the table, a labor insurance data sheet issued by the Bureau of Labor Insurance, Ministry of Labor or city/county bureau of labor insurance in accordance with the law (including the years of service insured by the employer or mortuary service industry association) shall be attached.

Funeral Director Job Change Form

| | | | <u> </u> | | |
|---|---|---|--|--|--|
| Chinese Name | | National ID No. | | | |
| Telephone No. | | Address | | | |
| Iı | er Mortuary Service ndustry | · | | None | |
| | Termination uary Service Industry | (mm/dd/yyyy) | | | |
| | ent Mortuary Service ndustry | None | | | |
| | rent Mortuary Service ndustry | | | | |
| in Current Mort | tion or Employment uary Service Industry | (mm/dd/yyyy) | | | |
| | rent Mortuary Service ndustry | | | | |
| operating or not eservices. (Paragrapheceding paragraphere and infeddays. (Paragraphare submitted to the submitted | at the Ministry of the Inte n form and the proof of w urpose of "information di | service industry are relation or end report the name, regloyment to the central county government and the proof of worker for future reference, whitted for review. I should be a funeral director, and the documents submitted or in Article 5 of the Reglation and the documents of | mployment referred distration number, and government author authority of the operation in the mortuary server. I hereby declare the all be solely response, or failure to serve involving criminal liaustations for Administrated agree that the authors submitted and that tor and cancel my cellular and retain day. | to in the ad address of the ad address of the ation within 30 vice industry a following: sible for the important ability. The proof on Funeral and the Ministry of certificate if I ata specified in | |
| Applicant: | (Signature) | Date of App | lication: | (mm/dd/yyyy) | |

^{*}If the former or current mortuary service industry is unavailable or the company/business is not a mortuary service industry, tick in the checkbox "None"; fields relating to the mortuary service industry may be left blank and the proof of operation or employment in the mortuary service industry may be exempted.

Proof of Operation or Employment in the Mortuary Service Industry

| Name | | National ID No. | | | | |
|-----------------------|--|-----------------|--------------|--|--|--|
| Department | | Job Title | | | | |
| Term of Service | Since | (mm) | (dd/yyyy) | | | |
| Company/Business/Ir | Company/Business/Institution (Full Title): | | | | | |
| Person in Charge: | Person in Charge: | | | | | |
| Address: | Address: | | | | | |
| Unified Business No.: | | | | | | |
| | | Date: | (mm/dd/yyyy) | | | |

*The table shall be affixed with the chop of the company/business/institution and the person in charger's seal.

Envelope Cover

(by Registered Mail)

| Sender: | |
|----------------|------------|
| | Attach |
| Address: | : Stamp |
| Telephone No.: | With |
| rerephone 140 | Sufficient |
| | Postage |

Ministry of the Interior

No. 5, Xuzhou Rd., Zhongzheng Dist., Taipei City, 100-17

□For initial or second issuance of a funeral director's certificate, the following shall be attached:

- □1. Application form (with 2 2-inch photos (1 for certificate) attached).
- □2. Copy of Class B technician certificate for mortuary services.
- □3. Certificate of 20 credits of professional courses on mortuary services or teaching certificate: Totaling pages.
 - (1) List of credits of professional courses on mortuary services specified in Subparagraph 2, Paragraph 1, Article 2 of the Regulations for Administration on Funeral Director studied or taught.
 - (2) Original certificate of credits or teaching certificate.
- □4. Certificate of work in the mortuary service industry: Totaling certificates.
 - (1) For an applicant having operated mortuary services, the following documents shall also be attached:
 - Certificate of company or business registration.
 - 2Proof of person in charge qualifications issued by the mortuary service industry association.
 - (2) For an applicant having been employed to provide mortuary services, the following documents shall also be attached:
 - ΦCertificate of labor insurance insured by the employer or Mortuary Service Industry Association.
 - 2Proof of work in the mortuary service industry issued by the employer.
- □5. Postal money order for the application fee or payment via e-Bill.
- □6. For renewal of a funeral director's certificate, a certificate of 30 hours of funeral director professional

training shall be attached.

□For renewal of a funeral director's certificate, the following shall be

attached:

- □1. Application form (with 2 2-inch photos (1 for certificate) attached).
- □2. Certificate of 30 hours of funeral director professional training.
- □3. Postal money order for the application fee or payment via e-Bill.

□For re-issuance of a funeral director's certificate due to defacement, damage,

loss or destruction, the following shall be attached:

- □1. Application form (with 2 2-inch photos. (1 for certificate) attached).
- □2. Postal money order for the application fee or payment via e-Bill.

□For future reference of funeral director job changes, the following shall be

attached:

- □1. Funeral Director Job Change Form.
- □2. Proof of work in the mortuary service industry.

Funeral Director Certificate Application Process

