

Certified Preplanning Consultant Program™

NFDA | 13625 Bishop's Drive | Brookfield, WI 53005 | 800-228-6332 | nfda@nfda.org

Approved by:	Date:
Manual Shipped to: WK HM	Date Shipped:



Related Training

Certified Preplanning Consultant Seminar April 26-27, 2018 - Pittsburgh, PA Host: Pittsburgh Institute of Mortuary Science,

5808 Baum Blvd, Pittsburgh, PA 15206-3706

Application Deadline April 12, 2018

\$495 NFDA Member or

Eligible Non-Funeral Director

\$445 PIMS Student or Alumnus

\$655 Nonmember

Licensed Funeral Director U.S. Dollars on U.S. Bank

Name (OFOR (Compl) 111)	gibility review.					
Name (+ CFSP if applicable) As name should appear on certificate						
Position Title						
Firm Name						
Firm Address						
City, State/Province, Zip/Postal Code					Country	
FD License Number/s and State/s					Firm Phone	
Insurance License Number and State/s					Fax	
Applicant Personal Email				CFSP Number		
Credit Card Number:		Check Numbe	r:			
☐ AM EX ☐ MasterCard ☐ VISA ☐ Disc	cover	Total Fee Sub	mitted: \$			
Credit Card Expiration Date:		Name on Cred	it Card:			
Signature:						
Send CPC Manual & correspondence to:		☐ Work Addre	ss or 🗆	Home Address (see	page 2)	
Certification renewable every 4 years: 6 ho	ours per year o	f approved CE	and professional	activities.		
The Applicant warrants to NFDA as follows and	d acknowledges	that NFDA is rel	ying upon the trut	h and accuracy of eac	ch such warranty.	
1. Eligibility Requirements. Minimum	ŭ		, , ,	•	•	
□ CPC. Actively involved in direct advance selling of funeral god services to the public for complete funerals as permitted by state provincial law. No employment minimum in field for funeral direct Non-funeral directors: verifiable 12-month minimum employ field prior to date of application.		tate or rectors.	☐ Associate CPC. Does not sell funerals to the public. Actively involved in the funeral preplanning field as supervisor, manager, instructor or other type of preplanning-related position. Verifiable 12-month minimum employment in the preplanning field prior to date of application.			
2. Eligibility Verification. By immedia						
As immediate supervisor of the applicant named above, I verify for purposes of the CPC certification program that applicant is a current employee of this firm and attest to the truth and accuracy of items a-f below . Note If you as the applicant named above are the firm owner, complete a-f below , sign, and then go directly to Section 3 below.						
Applicant start date with firm:	tare min owner,	, complete u 1 s e	Jon, oign, and the	on go anostry to coom	011 0 0010111	
b. Applicant current title:						
 c. Applicant meets statutory criteria to sell preneed funeral goods and services to public. ☐ Yes ☐ No d. Applicant is a minimum of 18 years of age. ☐ Yes 						
e. Supervisor name and title:						
f. Name of firm:						
. Italio or illii.					Date:	
Supervisor Signature:						
Supervisor Signature: OR Applicant/Owner Signature:					Date:	
OR Applicant/Owner Signature:	& dates of co	mnletion				
<u> </u>	& dates of co	ompletion.				

NFDA Certified Preplanning Consultant Application: CPC Seminar	PIMS, Pittsburgh, PA Page 2 of 2
4. Type of Business. Check <u>all</u> boxes that describe the firm ☐ Independent funeral home ☐ Owns/operates or	
☐ Independent cooperative funeral home ☐ Owns/operates of	rematory Supplier of trust product
☐ Publicly-traded corporate funeral home ☐ Other (specify):	
5. Personal Data. Provide non-business address information	1.
Home Address	
City State/Province Zip/Postal Code	Country
Cell Phone	Home Phone
 Professional Background. Provide overview including dat responsibilities. Use additional page if necessary for 6 and 7 	
7. Reasons for Applying. Provide brief explanation for apply	ing to the CPC certification program.
8. CPC Code of Ethics. Intent to comply with CPC Code of E	thics required. Read and sign below to signify intent.
Service to Families I will treat the information shared with me during the preplanning interview with confidentiality and integrity. I will offer my services to all without regard to religion, race, color, national origin, sex, sexual orientation or disability. I will at all times maintain the standards and obligations of the funeral home that I represent. I will provide my client with detailed price lists of services and merchandise before he or she selects services or merchandise, and at the conclusion of the funeral arrangement conference will provide a written statement listing all of the services and merchandise that have	Obligations to the Public I will make no representation, written or oral, that may be false or misleading or that is likely to defraud or deceive the public. I will abide by the provisions of the NFDA CPC Statement of Use regarding the appropriate and responsible use of the CPC designation. I will continue my professional education in this field. I further pledge to conduct myself at all times in a manner that deserves the public trust. Obligations to the Government I will continue to hold all necessary licenses to engage in providing
been purchased. I will properly account for and remit any monies, documents or	preneed services and products in the state or states in which I practice.

- I will maintain my accountability to the client by complying with all applicable state and federal regulations and standards governing funeral preplanning, trust and insurance funding for funerals, and

a	reneed agreement, including any guarantees and representations, nd will attempt to resolve any problems efficiently and fairly and with ue consideration given to the views and concerns of the client.	funeral preplanning, trust and in consumer protection.	nsurance funding for funerals, and
9.	Submission Instructions		
	I understand that the CPC designation is renewable every 4 years, the I have read and pledge to comply with the CPC Code of Ethics above upon the truth and accuracy of all information submitted on or attach	e and the CPC Statement of Us	·
App	olicant Signature		Date
Mai	I, scan/email or FAX completed application + fee (US \$ on US bank or cre	edit card information if emailing o	r faxing) to:
NF	DA CPC Program, 13625 Bishop's Drive, Brookfield, WI 53005-6607, U.S.	Fax 1-262-789-6977	Email nfda@nfda.org
Plea	ase retain a copy of your application.		
If yo	ou require special services, call an NFDA Member Services Representativ	e at 800-228-6332.	
cand cand fee a By re	ncellation. Must be in writing and is subject to a \$50 cancellation fee OR application fee didates only. NFDA reserves the right to cancel a program due to circumstances beyond it didates will have the option to either receive a full refund or transfer to another CPC option and shall not extend to any other claims including, but not limited to, travel expenses, cancegistering for this event, you consent that photos and videos of you at the event may be pot as YouTube; on social media sites such as Facebook, Twitter and Google +; and in othe	is control. Should circumstances arise the normal strain of the normal s	at result in the cancellation of a seminar, limited to a refund of the CPC application and other related costs. e photo albums; on photo/video-sharing sites

personal property belonging to others that come into my possession.

I will answer any questions the client may have pertaining to the