



## STUDENT TYPES

New Student

Returning Student

Transfer Student

When do you plan to enroll?

Month \_\_\_\_\_

Year \_\_\_\_\_

Program: Online Bachelor of Science in Funeral Service Management

## ELIGIBILITY REQUIREMENTS FOR THE ONLINE BACHELOR OF SCIENCE IN FUNERAL SERVICE MANAGEMENT

\_\_\_\_\_  
ABFSE College Graduated with Associates Degree

\_\_\_\_\_  
Credits earned from college

\_\_\_\_ / \_\_\_\_  
mm / yyyy

Pass the Science National Board Examination

Yes

No

\_\_\_\_\_  
Score (in percentage)

Pass the Art National Board Examination

Yes

No

\_\_\_\_\_  
Score (in percentage)

Are you a licensed Funeral Director or an Embalmer?

Yes

No

\_\_\_\_\_  
State of License

\_\_\_\_\_  
Other College Attended

\_\_\_\_\_  
Credits submitted for electives

\_\_\_\_ / \_\_\_\_  
mm / yyyy

## FUNERAL SERVICE EMPLOYMENT

\_\_\_\_\_  
Employed By

\_\_\_\_\_  
Business

\_\_\_\_\_  
Months and Years of employment

\_\_\_\_\_  
Position

\_\_\_\_\_  
Number & Street

\_\_\_\_\_  
P.O Box or Apartment

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

## STUDENT'S SIGNATURE

I certify that all information on this form is complete and accurate. I understand that falsifying any part of this application may result in cancellation of admission. If admitted to Mid-America College of Funeral Service, I will become knowledgeable of all College policies and regulations and will abide by them.

\_\_\_\_\_  
Student's Signature

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Date

**When complete, sign and date the form, then e-mail the form to [admissions@mid-america.edu](mailto:admissions@mid-america.edu)**