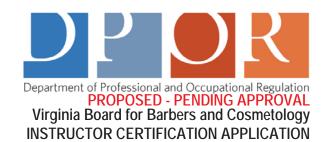
Commonwealth of Virginia Department of Professional and Occupational Regulation 9960 Mayland Drive, Suite 400 Richmond, Virginia 23233-1485 (804) 367-8509 www.dpor.virginia.gov



(Only for applicants who are <u>not</u> required to take the Instructor Examination.)

Fee \$100.00

A check or money order payable to the TREASURER OF VIRGINIA, or a completed <u>credit card insert</u> must be mailed with your application package. APPLICATION FEES ARE NOT REFUNDABLE.

Select the certification you are requesting and means of applying for the Instructor Certificate:

	CERTIFICATE		BY COURSE		BY EXPERIENCE		BY ENDORSEMENT		
			Х	Trans	Х	Trans	Х	Trans	
	1302 - Barber/Master Barber	Instructor *		1022				1021	
	1204 - Cosmetology Instructo	r		1022				1021	
	1207 - Nail Technician Instruc	tor **		1022				1021	
	1215 - Wax Technician Instru	ctor **		1022				1021	
	1262 - Esthetician Instructor	k		1022					
	1265 - Master Esthetician Ins	ructor*		1022					
	1239 - Tattooing Instructor					1022			
	1250 - Perm. Cosmetic Tattoo	oing Instr.				1022			
An individual	holding a Master Barber Instruct	or certificate	can teach	a Barber ar	nd/or a Ma	aster Barber.			
	I holding a Cosmetology Instruct						ining a sepa	arate Nail Te	chnician Instructor
or Wax Tech	nician Instructor Certificate.								
	l holding an Esthetician Instructo nstructor Certificate.	r or Master	Estheticia	n Instructo	r certifica	ate can teach	waxing wit	hout obtainin	ig a separate Wax
			ء ما مصر بامد ہ	ساده استاده	luntinu .	data			
•	your <u>current</u> Virginia practiti	oner licens	e numbe	r and exp					
Virginia	a License Number					Expiration	n Date		
	you do <u>not</u> hold a <u>current</u> Virginia		-		•	-			
	you are applying for a Permanent cense or master permanent cosme			uctor certific	cate, you	may hold a c	urrent Virgir	nia permaner	it cosmetic tattooer
Full Lega	al Name (As it appears on yo	ur governme	ent issued	ID or other	er legal o	documentati	on.)		
3	, 11 3	3			3		,		
Last (requ	uired)	First (requir	red)			Middle			Generation
Provide	at least <u>one</u> of the following	identificatio	n numbe	ers*:					
	ocial Security Number and/or				- [-			
□ Vii	rginia DMV Control Number								
➤ Ente	er the same identification number as us	ed on examina	ı tion, previou	s application	s or licens	es on file with t	the departme	nt.	
	e law requires every applicant for a lice ne Commonwealth to provide a social s								or occupation issued

PROPOSED - PENDING APPROVAL

	DATE	FEE	TRANS CODE	ENTITY#	FILE #/LICENSE #	ISSUE DATE
OFFICE						
USE ONLY						

Date of Birth

Maiden or Former Name(s)

MM/DD/YYYY

PROPOSED - PENDING APPROVAL

6.	The mailing address will be printed on the license.	City		State	Zip Code			
7.	Street Address (PO Box <u>not</u> accepted PHYSICAL ADDRESS REQUIRED		Check here if Street Address is the <u>same</u> as the Mailing Address listed above.					
		City		State	Zip Code			
8.	Contact Numbers		- All T. I.					
9.	Primary Te	elephone	Alternate Telephone		Fax			
9.		ress is consid	dered a public record and will be discl	osed upon request from a	third party.			
10.	Have you been <i>previously</i> licensed Technician, Esthetician, Master Estheti	cian, Tatto	oer, or Permanent Cosmetic T	0,5	Technician, Wax			
	Yes If yes, provide your licen	se number	and expiration date below					
	VA License Number			Expiration Date				
11.	Are you applying for Barber , Maste Certification? No	er Barber,	, Cosmetology, Nail Techni	ician, or Wax Tech	nnician Instructor			
		vou usina	to apply for your Instructor Ce	rtification? Select one	<u>.</u>			
	A. Application by							
	Which of the	e following	Barber, Master Barber, Co	smetology, Nail Teo	chnician, or Wax			
	Technician In	structor co	urses have you successfully co	ompleted?				
	<u>—</u>		ching techniques at post-secon mentation: Transcripts and/or diplor.	•				
	An Cosi	instructor t metology netology, n	training course approved by under the supervision of ail technician or wax technician mentation: Transcripts and/or diplon	the Virginia Board a certified barber, n instructor (respectiv	master barber, ely)			
	B. Application by	/ Endorsem	nent:					
	 Prepinstr Maile over 	pared by the uct barbering ed in an unliaying the f	ification of Licensure (dated e state board or licensing body ng, cosmetology, nail care or wunopened envelope with the flap on the back of the enveloped Cosmetology.	in which you are <u>cur</u> vaxing; and seal or signature of	rrently licensed to f the state board			
lio <i>re</i>	Certifications of Licensure/Letter of Good Star censure; 3) the expiration date of the licens requirement that were met to qualify for licens. Certification must be mailed directly to:	se 4) <i>the n</i>	means of obtaining licensure (i.e.	exam, reciprocity, etc.) and the minimum			
	Board for Barbers and Cost	metology, 99	960 Mayland Drive, Suite 400, Ric	chmond, VA 23233-1483	5			
12.	Are you applying for Esthetician or Ma	ister Esthe	etician Instructor Certification?					
	=	ition of com	npleting a course in teaching te	echniques at a post-se	econdary level			
			ots and/or diploma showing succe		,			

13.	Are you applying for Tattooer or Permanent Cosmetic Tattooing Instructor Certification?
	No
A	Yes If yes, 1) complete the <i>Training & Experience Verification Form</i> documenting <i>three years</i> of tattooing work experience within the previous five years and attach to this application (more than one form may be submitted to document three years of experience.), and 2) attach documentation of completing a course in teaching techniques at a post-secondary level. DO NOT SUBMIT <i>Training & Experience Verification</i> form to the exam vendor. Mail directly to DPOR at the address.
ĺ	provided at the top of this application.
14.	Have you ever been subject to a <u>disciplinary action</u> taken by <u>any</u> (including Virginia) local, state or national regulator body? This includes but is not limited to any monetary penalties, fines, suspensions, revocations, surrender of a license in connection with a disciplinary action or voluntary termination of a license. No
	Yes If yes, complete the <u>Disciplinary Action Reporting Form.</u>
15.	Have you ever had an application for licensure, certification or registration as a practitioner or instructor in the fields of barbering, cosmetology, waxing, nail care, esthetics, body-piercing, or tattooing denied by any (including Virginia local, state or national regulatory body? No
	Yes If yes, complete the <u>Denial of Licensure Reporting Form</u> .
16.	A. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any <u>felony</u> within the last 20 years? <i>Any plea of nolo contendere shall be considered conviction</i> . No Yes If yes, complete the <u>Criminal Conviction Reporting Form.</u>
	B. Have you been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any misdemeanor involving moral turpitude, sexual offense, drug distribution or physical injury within the last two (2) years? Any plea of nolo contendere shall be considered a conviction. No Yes If yes, complete the Criminal Conviction Reporting Form.
17.	By signing this application, I certify the following statements:
	• I am aware that submitting false information or omitting pertinent or material information in connection with thi application will delay processing and may lead to license revocation or denial of license.
	 I will notify the Board of any changes to the information provided in this application prior to receiving the requested license, certification, or registration including, but not limited to any disciplinary action or conviction of a felony or misdemeanor (in any jurisdiction).
	 I authorize the Department to verify information concerning me or any statement in this application from any person, or any source the department may contact. I also agree to present any credentials or document required or requested by the Department.
	 I authorize any federal, state or local government agency, current or former employer, or other individual of business to release information which may be required for a background investigation.
	• I have read, understand and complied with all the laws of Virginia related to this profession under the provision of Title 54.1, Chapter 7, of the <i>Code of Virginia</i> and the <i>Virginia Board for Barbers and Cosmetolog Regulations</i> , <i>Tattooing Regulations</i> , or <i>Esthetics Regulations</i> .
	Signature Date