



**Virginia Board for Barbers and Cosmetology  
 BODY PIERCER EAR ONLY LICENSE APPLICATION  
 Fee \$105.00**

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

1. Name \_\_\_\_\_  
 Last First Middle Generation

2. Provide one of the following identification numbers.  
 Social Security Number or  Virginia DMV Control Number \*     -   -      
 \* State law requires every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.

3. Date of Birth \_\_\_\_\_  
 MM/DD/YYYY

4. Maiden Name or Former Surname(s) \_\_\_\_\_

5. Mailing Address (PO Box accepted) \_\_\_\_\_  
 \_\_\_\_\_  
 If a mailing address is submitted, the mailing address will be printed on the license.  
 \_\_\_\_\_  
 City State Zip Code

6. Street Address (PO Box not accepted)  Check here if Street Address is the same as the Mailing Address listed above.  
**PHYSICAL ADDRESS REQUIRED**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 City State Zip Code

7. Email Address \_\_\_\_\_

8. Contact Numbers \_\_\_\_\_  
 Primary Telephone Alternate Telephone Fax

9. Do you hold a current or expired license issued by the Virginia Board for Barbers and Cosmetology?  
 No   
 Yes  If yes, provide your license number and expiration date below.  
 VA License Number               
 Expiration Date \_\_\_\_\_

10. Have you completed a minimum of three hours of health education including, but not limited to blood borne disease and first aid and training on a mechanized, pre-sterilized ear-piercing system that penetrates the outer perimeter and/or lobe of the ear including the aftercare of piercing?  
 No  **IF NO, YOU ARE NOT ELIGIBLE FOR LICENSURE**  
 Yes  If yes, attach documentation of successful completion of the required health education and training.

Office Use Only	DATE	FEE	TRANS CODE	ENTITY #	FILE #/LICENSE #	ISSUE DATE
			1020		1245	

11. Are you currently licensed to practice body-piercing or body piercing ear only in any other state or jurisdiction of the United States?  
 No   
 Yes  If yes, attach an original *Certification of Licensure* (dated within the last 60 days) prepared by the state board or licensing body in which you are currently licensed.

12. Do you hold an expired body-piercing license, certification or registration in any state or jurisdiction within the United States or its territories (excluding Virginia)?  
 No   
 Yes  If yes, complete the following table.

State/Jurisdiction	License, Certification or Registration Number	Expiration Date

13. Have you ever been subject to a disciplinary action taken by any (including Virginia) local, state or national regulatory body?  
 No   
 Yes  If yes, provide a certified copy of the final order, decree or case decision by a court or regulatory agency with lawful authority to issue such order, decree or case decision.

14. 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, provide a certified copy of the final order, decree or case decision by a court or regulatory agency with lawful authority to issue such order, decree or case decision.

15. Have you ever been convicted in any jurisdiction of a *misdemeanor and/or felony*? Any guilty plea or plea of nolo contendere must be disclosed on this application. Do not disclose violations that were adjudicated as a minor in the juvenile court system.  
 No   
 Yes  If yes, applicants are required to attach an *original criminal history record*\* issued by the Virginia State police. Applicants with convictions from other jurisdictions, other than Virginia; must provide an original official criminal history record from each state in which they have convictions. Virginia residents may request complete criminal records from the Virginia State Police at [www.vsp.virginia.gov](http://www.vsp.virginia.gov) or by phone at 804-674-6718.

\* For each conviction, please provide a certified copy of the final order, decree, or case decision by a court or regulatory agency with lawful authority to issue such order, decree, or case decision; and any other information you wish to have considered with this application (e.g., information on the status of incarceration, parole or probation; reference letters; documentation of rehabilitation etc.).

16. I, the undersigned, certify that the foregoing statements and answers are true, and I have not suppressed any information that might affect the decision to approve this application. I certify that I will notify the Department if I am subject to any disciplinary action or convicted of a felony or misdemeanor (in any jurisdiction) prior to receiving the requested license. I certify that I have read, understood and complied with all the laws of Virginia under the provisions of Title 54.1, Chapter 7 of the *Code of Virginia* and the *Virginia Board for Barbers and Cosmetology Body-Piercing Regulations*.

Signature \_\_\_\_\_ Date \_\_\_\_\_