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

1303 - Barber School

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Virginia Board for Barbers and Cosmetology SCHOOL LICENSE APPLICATION

Fee

\$220

\$100

Trans

1020

9007

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

Select the license(s) you are requesting:

License Type

1303 - Licensed Barber School adding a Barber Instructor Program

1205 - Cosmetology School	1020	\$220	
1205 - Licensed Cosmetology School adding a Nail Technician Program	9007	\$100	
1205 - Licensed Cosmetology School adding a Wax Technician Program	9007	\$100	
1205 - Licensed Cosmetology School adding an Instructor Program	9007	\$100	
1209 - Nail Technician School	1020	\$220	
1209 - Licensed Nail Technician School adding an Instructor Program	9007	\$100	
1219 - Waxing School	1020	\$220	
1219 - Licensed Waxing School adding an Instructor Program	9007	\$100	
1251 - Tattooing School	1020	\$220	
1252 - Permanent Cosmetic Tattooing School	1020	\$220	
1267 - Esthetics School	1020	\$220	
1267 - Licensed Esthetics School adding an Instructor Program	9007	No Fee	
Name of School			
Trade, "Doing Business As" (DBA), or Fictitious Name of School			
All business entities with DBA and Fictitious names <u>must attach a copy of the certificate filed with the C</u>	Clerk of the Cour	t in the locality w	here business will
be conducted (if required by the locality).			
Type of business entity (select only one)			
☐ Sole Proprietorship ☐ Limited Partnership ☐ Limited Liability Com	pany ◆ 🔲	Other, pleas	e specify:
☐ Association ☐ General Partnership ☐ Corporation ◆			
State Corporation Commission Number:			
♦ If your business is a corporation , limited liability company, or limited partnership , your be the Virginia State Corporation Commission. For additional information, contact the SCC a 371-9733.			
Select <u>one</u> of the following and provide the information below.			
☐ Business Federal Employer Identification Number (FEIN)*]
	er Identification	Number (12-3456	_l 5789)
State law requires every applicant, who is not a sole proprietor, to provide a federal employer identificates security number or a control number issued by the Virginia Department of Motor Vehicles.	tion number. <i>Sa</i>	ole proprietors mu	ust provide a social
Sole Proprietor's/Individual's Social Security Number or	-	-	
	or Virginia DMV	Number (123-45	l 5-6789)
 State law requires every applicant for a license, certificate, registration or other authorization to engage i by the Commonwealth to provide a social security number or a control number issued by the Virginia De 	n a business, tra	de, profession or	•

Office Use Only DATE

FEE

TRANS CODE

ENTITY #

1.

2.

3.

FILE #/LICENSE #

ISSUE DATE

5.	If a mailing address is submitted, address will be printed on the	the mailing	City					State	Zip Code
6.	Street Address (PO Box <u>not</u> accepted) PHYSICAL ADDRESS REQUIRED			Check here	if Street	Address is th	ne <u>same</u> as the Ma	iling Address listed abov	'
			City					State	Zip Code
7.	Email Address								
8.	Contact Numbers	Primary Teleph	ono			Alternate Te	olonhono		ax
9.	Does the school receive com No Yes If yes, provide VA License No	pensation for the Virginia s	service		ed for i	ts clinic?	e number and	expiration date.	un.
10.	Instructor's Name Last			First			Middle		Generation
11.	Instructor's Virginia License I * Applicable Barber, Cosmetolo				attooer, P	ermanent Co	Ехр	iration Date	
12.	Enter the following information	n for each ow	ner (so	le propr	ietor, g	eneral pa	irtners, assoc	iation members) (of the school:
	Full Name	l	Address			Ві	rth Date	Social Secu VA DMV Cont	
13.	Profession Department Has the school or any owner national regulatory body? No Yes If yes, provide	n or occupation issuent of Motor Vehicle r ever been su a certified co	ued by the es. ubject to	e Common o a disc e final o	wealth to iplinary rder, d	provide a so action ta ecree or	cial security numb aken by <u>any</u> (case decision	norization to engage in er or a control number is including Virginia by a court or reg	ssued by the Virginia) local, state or
14.	police. Applic official crimina request compl 804-674-6718	e owners ever contendere m juvenile cour ants are <u>requir</u> ants with conv al history reco ete criminal re	been out to be the system of the december of t	convicte disclose n. attach ar from oth n each s from the	d in an ed on t n <u>origin</u> ner juri: state in Virgini	y jurisdic his applic al crimina sdictions, which the a State F	etion of a <i>mis</i> cation. Do n al history reco other than V ney have con Police at <u>www</u>	ot disclose violate of disclose violate violate of disclose violate vi	e Virginia State vide an original residents may or by phone at
*	For each conviction, please p agency with lawful authority to considered with this application	o issue such	order, c	lecree, d	or case	decision	ı; <u>and</u> any oth	er information yo	ou wish to have

documentation of rehabilitation etc.).

15.	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 n	otify the Department if the
	school or any owner is subject to any disciplinary action or convicted of a felony or misder	, , , ,
	prior to receiving the requested license. I certify that the school and its owners have read	•
	with all the laws of Virginia under the provisions of Title 54.1, Chapter 7 of the Code of Virginia	
	for Barbers and Cosmetology, Wax Technician, Tattooing and Esthetics Regulations as app	licable.
	Signature	Date

Important Curriculum Package Instructions

In addition the the School License Application, you are required to submit a curriculum including, but not limited to, the information listed below. Applications lacking the required information will be rejected and returned. Should you have any questions or require additional clarification, please contact the board staff at (804) 367-8509.

PHOTOCOPIES OF OUTLINES, GLOSSARIES AND OTHER INFORMATION FROM TEXTS AND BOARD REGULATIONS WILL NOT BE ACCEPTED!

1. Course syllabus

The course syllabus should contain an outline and brief statement of the main points of the text, lecture and course of study.

2. Detailed course outline

The outline shall include, but not be limited to those items set out in the applicable regulations (e.g., Board for Barbers and Cosmetology Regulations, Wax Technician Regulations, Tattooing Regulations, Esthetics Regulations).

Sample of five lesson plans

The lesson plans must be *actual* lesson plans that will be used in the instruction of students at the school applying for licensure. Previously approved lesson plans for other schools will not be accepted. Should your lesson plan indicate that it was developed for any purpose other than this application, it will be rejected.

4. Sample of evaluation methods to be used

Explain and provide examples of how students will be evaluated for grading and progress report purposes. Please include both the written and practical portions of the program.

5. Breakdown of hours and/or performances for all courses to be taught that will lead to licensure This material may be included in the detailed course outline (#2).

6. Example of the method by which performance will be recorded

7. Sketch of the school floor plan

This sketch must include the classroom and clinic areas within the school.

- 8. Days and hours of operation
- 9. An example of a test you will administer to students
- 10. Esthetics schools that award credit in accordance with Section 18VAC41-70-190.D. of the Esthetics Regulations, must submit copies of the assessment policy, method of evaluation of transcripts, and the examination to be used in making the assessment.