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

Virginia Board for Barbers and Cosmetology SCHOOL LICENSE APPLICATION

- > School must hold a separate license for each and every location.
- Answer all questions completely and accurately. Failure to answer all questions, or provide any additional documentation required, will result in a delay of processing this application. School application can take up to 60 days to process.
- Detailed Instructions are available on the board's website located at www.dpor.virginia.gov/Board/BarberCosmo/.

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.

X	Select the license(s) type you are requesting:	Trans	Fee
	1303 - Barber School (1100 hrs)	1020	\$190
	1303 - Licensed Barber School adding a Barber Instructor Program	9007	\$100
	1303 - Licensed Barber School adding a Master Barber Program (400 hrs)	9007	\$100
	1205 - Cosmetology School	1020	\$190
	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	\$190
	1209 - Licensed Nail Technician School adding an Instructor Program	9007	\$100
	1219 - Waxing School	1020	\$190
	1219 - Licensed Waxing School adding an Instructor Program	9007	\$100
	1251 - Tattooing School	1020	\$190
	1251 - Licensed Tattooing School adding a Perm.Cosm. tattooing program	9007	No Fee
	1252 - Permanent Cosmetic Tattooing School	1020	\$190
	1267 - Esthetics School	1020	\$190
	1267 - Esthetics School adding a Master Esthetician Program	9007	No Fee
	1267 - Licensed Esthetics School adding an Instructor Program	9007	No Fee

] 1267 - Licens	ed Esthetics Sch	nool adding an In	structor F	Program		9007	No Fee	
1.		currently licens		roved for "classi ginia Board for		•	•			
	Yes	If yes, provide	your license in	formation:						
		Virginia Licens	se Number					Expiration	Date	
2.	A sole pro		er his/her full legal	name and the con					e Trade/DBA	A name. All names
3.	. Trade, "Doing Business As" (DBA) or Fictitious Name of school									
				copy of the certifica hed to this applicat		th the Virg	ginia State	Corporation C	Commission	(SCC) pursuant to
	DATE	FEE	TRANS CODE	ENTITY#			FILE #/LI	CENSE#		ISSUE DATE

OFFICE USE ONLY

4.	A.	Type of business entit	y (select only <u>one</u>)					
		☐ Sole Proprietorship☐ Limited Partnership	General Par Limited Liab	rtnership Solely Owned LLC Corporation Other, please specify:				
		Other: Association, Busine Professional Limited Liability	Agency, Joint Venture, Limited Liability Partnership, Non Profit, Professional Corporation, or					
	В.	State Corporation Cor	mmission Number:	(If applicable)				
	•	Virginia State Corporation under the laws of the Com	Commission (including monwealth of Virginia or	ty company, or limited partnership, your business name must be registered with the g all out-of-state businesses). Firm/Businesses shall be organized as business entities r otherwise authorized to transact business in Virginia. Firm/Businesses must register any n Commission. For additional information, contact the SCC at www.scc.virginia.gov or by				
5.	Pro۱	Provide one of the following identification numbers*:						
		Business Federal Employer Identification Number (FEIN) Federal Employer Identification Number (12-3456789) Sole Proprietor's/Individual's Social Security Number or						
		<i>Virginia</i> Department of		Coolar Coolarity of Virginia 2 mv Hamber (120 10 07 00)				
	*	State law requires every appli	cant, who is not a sole pro	us applications or licenses on file with the department. Apprietor or solely owned LLC, to provide a federal employer identification number. Sole proprietor or a social security number or a control number issued by the Virginia Department of Motor Vehicles.				
6.	Mail	ling Address (PO Box a The mailing address will I printed on the license.	pe	State Zip Code				
7.	7. Street Address (PO Box not accepted) PHYSICAL ADDRESS REQUIRED City Check here			Check here if Street Address is the <u>same</u> as the Mailing Address listed above.				
			City	State Zip Code				
8.	Con	tact Numbers						
	_		Primary Telephone	Alternate Telephone Fax				
9.	Ema	ail Address	Email address is as	specialized a public record and will be displaced upon request from a third party.				
10.	a lin		sible Management ers/directors of an a	onsidered a public record and will be disclosed upon request from a third party. t (sole proprietor, partners of a general partnership, managing partner of association, managers/members of a limited liability company, or officers				
Ir	ndividu	vidual's Full Legal Name Title		Address Social Security No. or VA DMV Control No.* Date of Birth				
		* State law	requires every applicant f	for a license, certificate, registration or other authorization to engage in a business, trade, profession				

^{*} 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.

11.	For the license type selected on page 1, would the school like to ask for approval* to teach certain section of the course <u>online</u> along with the classroom request? No							
	Yes If yes, see "Important Curriculum Package Instructions - Online Instructions" located at the end of this application for further guidelines.							
	*Online approval is NOT permitted for the following: Master Barber (400 hrs.) program, Tattooing school adding a Permanent Cosmetic Tattooing program, a Permanent Cosmetic Tattooing School and all Instructor Programs.							
12.	Barber/Master Barber Schools Only -							
For the schools that are applying for a <u>Master Barber program</u> (400 hrs.), would the school also like to <u>Barber/Master Barber program</u> (1500 hrs.)? A school must be approved for the Master Barber (400 before an approval is given to for the dual (1500 hrs.) program. N/A No No								
	Yes If yes, attach a course syllabus, a detailed course outline, and a breakdown of hours and/or performance measure for the course. (See "Important Curriculum Package Instructions" for further guidelines; specifically #1, #2, and #5.)							
13.	Does the school receive compensation for services provided for its clinic?							
	No							
	Yes If yes, provide the Virginia salon, shop, spa or parlor license number and expiration date.							
	VA License Number Expiration Date							
14.	List each Instructor who will be employed by the school, their professional type and Virginia license number:							
	Full Name Professional Type Virginia License Number							
15.	Has this Business/Organization or any member of Responsible Management ever been subject to a <u>disciplinary action</u> taken by <u>any</u> (including Virginia) local, state or national regulatory 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> .							
16.	Has this Business/Organization or any member of Responsible Management ever been refused or <u>denied</u> a business, professional or occupational license, certification, or registration as a practitioner or instructor in the fields of barbering, cosmetology, waxing, nail care, esthetics, body-piercing, or tattooing by any (including Virginia) local, state or national regulatory body? No Yes If yes, complete the <u>Denial of Licensure Reporting Form</u> .							
17.	 A. Has this Business/Organization or any member of Responsible Management 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? Any plea of nolo contendere shall be considered a conviction. No							

	Has this Business/Organization or any member of Responsible Management ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any <u>misdemeanor</u> nvolving moral turpitude, sexual offense, non-marijuana drug distribution or physical injury within the last wo (2) years? Any plea of nolo contendere shall be considered a conviction. No Yes If yes, complete the <u>Criminal Conviction Reporting Form</u> .						
•	gning this application, I certify the following		ation in connection with this				
•	I am aware that submitting false information or omitting pertinent or material information in connection with this 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 or 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 documents required or requested by the Department.						
•	•	vernment agency, current or former emply be required for a background investigation	•				
•	• I have read, understand and complied with all the laws of Virginia related to this profession under the provisions of Title 54.1, Chapter 7, of the Code of Virginia and the Virginia Board for Barbers and Cosmetology, Tattooing, and Esthetics Regulations.						
	Signatures for all Responsible Manager (sole proprietor, partners of a general partners association, managers/members of a limited lim	nership, managing partner of a limited partner	ership, officers/directors of an				
1.	Print Name	Title					
	Signature		Date				
2.	Print Name	Title					
	Signature		Date				
3.	Print Name	Title					
	0' '		Б. (
4.	Print Name						
	Cianatura		Data				
5.	Print Name						
	Signature		Date				
	(Photocopy this sheet	t if additional signatures are needed.)					

(Important **Curriculum Package Instructions** to follow.)

18.

Important Curriculum Package Instructions

In addition to 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. Detailed Instructions are available on the board's website located at www.dpor.virginia.gov/Boards/BarberCosmo/. 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 Board for Barbers and Cosmetology Regulations, Wax Technician Regulations, Tattooing Regulations and Esthetics Regulations.

3. 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. You may submit lesson plans developed for your curriculum.

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 which 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

This must include a list of holidays and other special date that will be closed.

9. An example of a test you will administer to students

- 10. Esthetics schools must submit a list of the equipment used in training, as required by 18 VAC 41-70-210A-D
- 11. 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.

Online Instruction:

For schools requesting online instruction approval:

- ➤ Items 1 10 listed above in the Curriculum Package must be submitted for Online Instruction approval. Specifically, items 1, 2 & 5 should include the specific sections of the program that will be considered for online instructions and specifically how this will be managed and performed.
 - a. Only certain sections of the curriculum may be offered for online instruction. These sections of the curriculum should be considered **common** to all professional types regulated by the Board. The sections of the curriculum that may be considered, but are not limited to, the following:

Orientation, School Policies, State laws and regulations, Health and safety, Personal hygiene, Sanitation and sterilization, Ethics, Salon/shop/parlor management, Analyzing skin or scalp conditions, Anatomy, Client consultation, and Care of equipment.

- b. If a part of the online instruction is **not common** across all professional types and the school would like to offer online instruction, contact the Board to determine eligibility.
 - For example, tattooing sterilization requirements are specific and unique to that the Tattooing profession, and would <u>not</u> be eligible for online instruction.
- c. All examination for Online Instruction must be completed on-site, in a "traditional brick and mortar" classroom. Schools must provide documentation that it utilizes technologies and practices that are effective in verifying the identity of distance learning students, both initially in person (via photo ID) and subsequently during the online coursework (via secure login and pass code).
- d. Instructor programs are **not eligible** for Online Instruction.