



West Virginia State Board of Barbers and Cosmetologists

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www.wvbbc.com

WAXING SPECIALIST CERTIFICATION APPLICATION

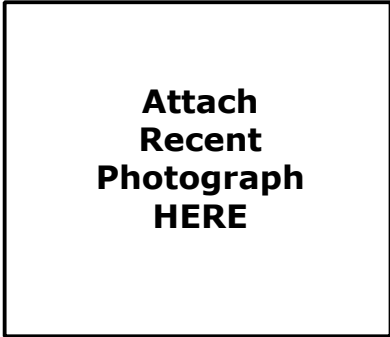
Documentation Needed with Application

- | | |
|--|---|
| <input type="checkbox"/> \$35.00 Fee | <input type="checkbox"/> Copy of Government-Issued Photo ID |
| <input type="checkbox"/> Official Cosmetology School Transcripts | <input type="checkbox"/> Exam Results from Third-Party Examiner |
| <input type="checkbox"/> Certificate of Health | <input type="checkbox"/> Recent Photograph |
| <input type="checkbox"/> Copy of Social Security Card | <input type="checkbox"/> Copy of High School diploma/GED/ATB Test Results |

APPLICANT INFORMATION

Name	<input type="text"/>	Date of Birth	<input type="text"/>
Address	<input type="text"/>	SSN	<input type="text"/>
City	<input type="text"/>	State	<input type="text"/>
		Zip Code	<input type="text"/>
		Phone	<input type="text"/>
Email	<input type="text"/>	Date of Exam	<input type="text"/>

By submitting this application, I affirm that I have passed the examination and have met all other requirements. I also affirm the required documentation submitted with this application is true and that without the documents above, the application will be denied.



Signature Field

Date