



# Nevada State Board of Cosmetology

Las Vegas Office: 8945 West Russell Road, Suite 100, Las Vegas, NV 89148

Reno Office: 740 Del Monte Lane, Suite 12, Reno, NV 89511

[info@nvcosmo.com](mailto:info@nvcosmo.com)

## INDIVIDUAL APPLICATION

If you haven't done so, please review the Individual Application Information Guide to ensure there are no delays in getting you licensed.

<p><b>1. Application Type</b></p> <p><input type="checkbox"/> Reciprocity Application - \$325.00*</p> <p><input type="checkbox"/> Out of Country Application - \$325.00*</p> <p><input type="checkbox"/> Nevada Student Testing Application - \$125.00*</p> <p><input type="checkbox"/> Out of State Testing Application - \$125.00*</p> <p><input type="checkbox"/> Hair Braiding Application - \$125.00*</p> <p><input type="checkbox"/> Shampoo Technologist Application - \$115.00 (including 2yr license fee)</p> <p style="text-align: center;"><b>*All Fees are NON REFUNDABLE</b></p>	<p>1-Passport Photo          2- Valid Government Issued ID          3- Work Authorization or ITIN documentation          4- License Certification (If required)          5- Current License (If out of State)          6-Transcripts (If required)          7-Passport Book (If required)          8- Completion Form (If required)          9- Online Course Completion (If required)          10- 50 Hours in Approved Program (If required)</p>
<p><b>3. Contact and Basic Information</b></p> <p>Social Security # or Individual Tax ID <input type="text"/></p> <p>Date of Birth <input type="text"/></p> <p>First Name <input type="text"/></p> <p>Middle Name <input type="text"/></p> <p>Last Name <input type="text"/></p> <p>Street Address <input type="text"/></p> <p>Zip Code <input type="text"/> City <input type="text"/> State <input type="text"/></p> <p>Cell Phone # <input type="text"/> Alt Phone # <input type="text"/></p> <p>Email <input type="text"/></p> <p>High School <input type="text"/></p> <p>Highest Grade Completed <input type="text"/></p>	<p><b>4. Questionnaire</b></p> <p><b>A-</b> Are you subject to a court order in regards to child support? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If Yes, answer A.1, if No, skip to B</i></p> <p><b>A.1-</b> Are you financially current with the Court Order? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If Yes, skip to B. If no, please contact us at <a href="mailto:info@nvcosmo.com">info@nvcosmo.com</a>.</i></p> <p><b>B-</b> Are you a United States Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If Yes, then skip to C. If No, answer B.1 and B.2</i></p> <p><b>B.1-</b> Country of Citizenship <input type="text"/></p> <p><b>B.2-</b> Work Authorization Expiration Date (If applicable) <input type="text"/></p> <p><b>C-</b> Have you/spouse served in the United State military?  <input type="checkbox"/> No <input type="checkbox"/> Applicant <input type="checkbox"/> Spouse <input type="checkbox"/> Both</p> <p><i>If answered No, skip to D. If Yes, complete C.1-C.3</i></p> <p><b>C.1-</b> Which Branch? <input type="text"/></p> <p><b>C.2-</b> Occupation <input type="text"/></p> <p><b>C.3-</b> Service Dates <input type="text"/></p>
<p><b>5. Reciprocity and Out of Country Application Information</b></p> <p>Licensing State <input type="text"/></p> <p>License Type?</p> <p><input type="checkbox"/> Cosmetologist <input type="checkbox"/> Hair Designer <input type="checkbox"/> Hair Braider</p> <p><input type="checkbox"/> Esthetician <input type="checkbox"/> Electrologist</p> <p><input type="checkbox"/> Nail Technologist <input type="checkbox"/> Instructor (Also select Primary License Type)</p> <p>Current License Number <input type="text"/></p> <p>License Expiration Date <input type="text"/></p> <p>Beauty School Attended <input type="text"/></p>	<p><b>D-</b> Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If Yes, answer all questions below. If No, then skip to Section 5</i></p> <p><b>D.1-</b> Date of Act <input type="text"/></p> <p><b>D.2-</b> Conviction Date <input type="text"/></p> <p><b>D.3-</b> Sentence End Date <input type="text"/></p> <p><b>D.4-</b> Are you on parole/probation? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If Yes, answer D.5</i></p> <p><b>D.5-</b> Parole/Probation End Date <input type="text"/></p> <p><i>If you have been convicted of a felony, you must submit the Court Order and Final Judgement. If you are on parole, a status letter must be provided.</i></p>

**6- School/Education Information**

Cosmetology School

Program(s) Completed?

Cosmetologist       Hair Designer       Hair Braider  
 Esthetician       Electrologist       Student Instructor  
 Nail Technologist       PIL Instructor

Enrollment Date

Graduation Date

**7. Work Location(s)**

Salon License #	Salon Name

**8. Test Information** If you are a Reciprocity Applicant or Shampoo Technologist Applicant, you do not need to schedule for the test.Las Vegas Testing

Select day preference:

 Tuesday       Wednesday
Reno Testing

Select day preference:

 Tuesday       Wednesday       Thursday
**9. Statement**

I affirm that I have (check below) 1- Completed the Education Requirements of 10th Grade, or its equal, and/or 2- Practiced Hair Braiding for at least one year, at no charge, on a family member.

 1- I have completed the 10th grade (12th for Electrologist/Instructor Applicant)       2- I have practiced Hair Braiding for at least one year on family members.

The above selected Statement was affirmed as true and accurate.

Applicant Signature

Date

**10. Payment Information**

Electronic      Money Order      If Electronic:      Visa      MasterCard      Discover      AmEx

Name on Card, if not you: Full Billing Address of Cardholder 

CC#       Exp. Date       CVW Code (on back)

**11. Authorization and Confirmation**

I affirm the information completed on this application is true and accurate. I authorize the Nevada State Board of Cosmetology, if electronic payment was selected, to charge the selected NON REFUNDABLE amount to the card provided.

Signature Date