

APPLICATION FOR CONSOLIDATED COSMETOLOGIST AND/OR LIMITED LICENSES

APPLICANT INSTRUCTIONS

Use this application to:

1. **Request a consolidated Cosmetologist license.** Licensees who hold all three ACTIVE, limited licenses (Esthetician, Hairstylist, and Manicurist), may use this application to request a single Cosmetologist license. Upon approval of this application by the Office of Barber and Cosmetology Licensure, the applicant will be issued a Cosmetologist license in addition to their limited licenses;

OR

2. **Request authorization to test for one or more limited licenses (Esthetician, Hairstylist, and/or Manicurist).** Licensees who hold an ACTIVE Cosmetologist license may use this application to request authorization to take the written and practical test(s) for one, two, or all three of the limited licenses (Esthetician, Hairstylist, and Manicurist). Upon evidence of passing the examination(s), the applicant will be issued the appropriate limited licenses in addition to their Cosmetologist license.

Licensees may renew each limited license and the Cosmetologist license and pay the renewal fee in effect for each license type during the normal renewal period in order to maintain their licenses in ACTIVE status. Any license that is not renewed during the normal course of the renewal process will be expired based on the established expiration date.

Mandatory Practice Act. Colorado has a mandatory practice act, which means that you may not practice as a Barber, Cosmetologist, Esthetician, Hairstylist, or Manicurist in this state without a Colorado license. Submission of this application does not guarantee licensure. Therefore, do not make life or career decisions based on the probability that you may receive a license. Plan ahead for the time it will take for us to receive all required documents and complete our evaluation.

Basic Requirements. Requirements for licensure are outlined in the Barber and Cosmetologist Act, specifically 12-8-114; and the Rules and Regulations of the Colorado Office of Barber and Cosmetology Licensure. Both documents can be found online at www.dora.state.co.us/barbers_cosmetologists.

Requirements for a consolidated cosmetologist license and/or multiple licenses are outlined in Policy 13, available online at www.dora.state.co.us/barbers_cosmetologists.

License Type Descriptions. For a complete description of services offered by each profession, view the Barber and Cosmetology Practice Act, available online at www.dora.state.co.us/barbers_cosmetologists.

- Barbers work with the scalp and hair of the head, perform face shaving and beard trimming, and basic barber facials.
- Cosmetologists work with the hair of the head (cutting, styling, coloring, etc.); trim beards but do not perform face shaving; perform manicures and pedicures; and provide skin care/esthetic services (facials, makeup, waxing, etc.).
- Estheticians perform skin care services, advanced esthetic treatments (microdermabrasion and chemical peels), apply makeup, and remove superfluous hair.
- Hairstylists work with the hair of the head and trim beards but do not perform face shaving.
- Manicurists provide basic manicures and pedicures, apply artificial nail enhancements, and perform waxing on the hands and feet.

APPLICANT INSTRUCTIONS (Continued)

About the Application. This application is to be completed by you and returned to the Office of Licensing. All questions on the application are mandatory, and all supporting documents must be submitted with the application. You may copy as many forms as needed; however, each form submitted must be completed in original ink or typed. Keep a copy of the completed application and supporting documents for your records.

Application Expiration. Your application will be kept on file for one (1) year from date of receipt in the Division. Your file will be purged if you do not submit required documents and complete your application process in one year. You will need to resubmit a new application packet after that time.

Social Security Number is Required. Effective January 1, 2009, a Social Security Number is required for all licensees. The Division will consider an application to be incomplete when the applicant fails to submit his/her Social Security Number. Exceptions are made for foreign nationals not physically present in the United States and for non-immigrants in the United States on student visas who do not have a Social Security Number. These applicants must submit a signed Social Security Number Affidavit in lieu of a Social Security Number. You may call (303) 894-7800 to request that an affidavit be mailed to you.

Disclosure of Addresses. Consistent with Colorado law, all addresses and phone numbers on record with the Division are public record and must be provided to the public when requested. It is your responsibility to keep your address and contact information up-to-date in our database. All letters, renewal notices, and licenses are mailed to the last known address of record. **If your address is not current, it is possible you will not receive important documents.** You can change your address online by using Registrations Online Services at www.doradls.state.co.us.

Checking Your Application Status. Visit Registrations Online Services at: www.doradls.state.co.us to track your application from the date we log it in our database to the date your license is printed. Please allow us enough time to receive the application through the mail and enter your application into our database before you check the website. We recommend waiting at least 10 business days from date of mailing before checking the status of your application.

License Expiration Grace Period for New Applicants.

- Barber, Esthetician, Hairstylist, and Manicurist licenses expire on March 31 of even-numbered years and must be renewed to continue practicing.

All new applicants who are issued a license within 120 days of the upcoming renewal expiration date will be issued a license with the subsequent expiration date. For example, licenses issued between December 1, 2009 and March 31, 2010 will expire March 31, 2012. Licenses issued prior to December 1, 2009 will expire March 31, 2010 and must renew in the upcoming renewal period.

- Cosmetologist licenses expire on April 30 of either odd-numbered years or even-numbered years, are dependent upon the issuance date, and must be renewed to continue practicing.

All new applicants who are issued a license within 120 days of the upcoming renewal expiration date will be issued a license with the subsequent expiration date. For example, licenses issued between January 1, 2011 and April 30, 2011 will expire April 30, 2013. Licenses issued prior to January 1, 2011 will expire April 30, 2011 and must renew in the upcoming renewal period.

APPLICANT CHECKLIST

To apply for a consolidated Cosmetologist or authorization to test for a limited license:

- Submit this completed application and supporting documentation if required.** Return the completed application and all supporting documentation to the Office of Licensing.
- Provide documentation of any name change.** If your name has changed since you obtained a previously-issued license, or if your name is different on any of your supporting documentation, you must provide a copy of the legal document verifying the name change (i.e., marriage license, divorce decree, or court order).

If you are approved to test for one or more limited licenses, the Office of Barber and Cosmetology Licensure will issue you an Authorization to Test Letter for each approval:

- Contact the examination vendor** to apply for and pay the applicable examination fees. Exam applicants must apply and schedule their examinations with Pearson VUE. You may access the Candidate Handbook and reservation information online with Pearson Vue at www.asisvcs.com/indhome.asp?CPCAT=2006STATEREG or call 1-800-274-4132 for further information.

Return your completed application packet and all supporting documentation to:

Division of Registrations
Office of Licensing—Barber/Cosmetology
1560 Broadway, Suite 1350
Denver, CO 80202

The content of this application must not be changed. If the content is changed, the applicant may be referred to the Colorado State Attorney General's Office for violation of Colorado law.

PART 1—APPLICANT INFORMATION

Name: Last:	First:	Middle:	Suffix:
Previous Name(s):			
Social Security Number: *	Date of Birth (mm/dd/yyyy):	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Place of Birth (city and state, or foreign country):			
Mailing Address:	PO Box, Street:		
This is a <input type="checkbox"/> Home <input type="checkbox"/> Business	City, State, Zip:		
Daytime Telephone Number: ()	E-mail Address:		
	Preferred method for communication: <input type="checkbox"/> Mail <input type="checkbox"/> E-mail		

PART 2—COLORADO LICENSE INFORMATION

List all Colorado licenses you hold. If not applicable, enter N/A.				
License Type	License Number	Expiration Date	Disciplinary action against license?	Is this license current/active?
Cosmetologist			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Esthetician			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Hairstylist			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Manicurist			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Barber			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO

***Social Security Number Disclosure:** Section 24-34-107(1) of the Colorado Revised Statutes requires that every application by an individual for a license issued pursuant to the authority set forth in title 12, C.R.S., by the Department of Regulatory Agencies, shall require the applicant's social security number. Disclosure of your social security number is mandatory for purposes of establishing, modifying, or enforcing child support under § 14-14-113 and § 26-13-126, C.R.S.; and locating an individual who is under an obligation to pay child support as required by § 26-13-107(3)(a)(I)(A), C.R.S. Failure to provide your social security number for these mandatory purposes will result in the denial of your licensure application. Disclosure of your social security number is voluntary for disclosure to other state regulatory agencies, testing and examination vendors, law enforcement agencies, and other private federations and associations involved in professional regulation for identification purposes only. Your social security number will not be released for any other purpose not provided for by law.

OFFICE USE ONLY **LICENSE NUMBER:** _____ **DATE ISSUED:** _____

PART 3—LICENSES REQUESTED

I have all active licenses and I would like to request a Cosmetologist license. I understand that upon approval of this application, I will be issued a Cosmetologist license in addition to my limited licenses.

OR

I would like to request authorization to test for the following limited license(s). I understand that upon approval of this application, I will receive authorization to take the appropriate practical and written examinations and that I must contact the examination vendor to apply for the examination(s) and pay any fees assessed by the examination vendor. Upon evidence of passing the examination(s), I will be issued the appropriate limited license.

- Esthetician Manicurist Hairstylist

I understand that once I hold multiple licenses, I may renew each limited license and the Cosmetologist license and pay the renewal fee in effect for each license type during the normal renewal period in order to maintain my licenses in ACTIVE status. Any license that is not renewed during the normal course of the renewal process will be expired based on its established expiration date.

ATTESTATION

I state under penalty of perjury in the second degree, as defined in C.R.S. 18-8-503, that the information contained in this application is true and correct to the best of my knowledge. In accordance with C.R.S. 18-8-501(2)(a)(I), false statements made herein are punishable by law and may constitute violation of the practice act.

Applicant Signature

Date