



BOARD OF COSMETOLOGY

2515 Warren Ave., Suite 302
Cheyenne, WY 82002
307-777-3534

STUDENT ENROLLMENT APPLICATION

Name of Student _____ Social Security # _____

Mailing Address _____ City _____ State _____ Zip _____

Date of Birth _____ Phone No. _____

Enrollment Date _____ Email _____

Name of School _____ City _____

INFORMATION TO BE INCLUDED (Copies to be sent with this application to the Board office)

Copy of Certificate of Education

Copy of current state issued driver's license or ID card **and** social security card **or** birth certificate

Or

Copy of current U.S. passport **or** current permanent resident card

Work History (Instructor Only)

Copy of Hairstylist/Nail Tech License (Hair Removal Course only)

Course Information:

Course of Study:

Previous cosmetology or instructor training? Yes No If yes, name and address of the school you attended

➤ If school was in another state, please attach State Board Record or Original Final Course Record from School

Name during attendance, if different from your present name: _____

Felony Information for Board Consideration of Licensure:

Student has no previous felony convictions.

Student has prior felony charge and documents including copy of original charges and status are being provided with this application.

Felony status information already submitted to the Board office.

Release of information:

Student has been informed that examination results can be made available to the school.