Reset Form Print Form

Commonwealth of Virginia
Department of Professional and Occupational Regulation

Prov Inc.
150 W Civic Center Blvd, Suite 601
Sandy, UT 84070
Telephone: (877) 228-3926
Email: support@provexam.com
Website: www.provexam.com

Department of Professional and Occupational Regulation

Virginia Board for Barbers and Cosmetology
ESTHETICIAN – ESTHETICS INSTRUCTOR EXAMINATION & LICENSE APPLICATION

Instructions: Applicants are encouraged to apply online at https://provexam.com/

- If you are unable to apply online, complete this form and mail this application with a cashier's check, money order, or credit card payment for the full amount of the examination fee, payable to **Prov Inc** and mail to: Prov Inc, 200 West Civic Center Drive, Suite 160, Sandy, UT 84070
- Any applicant who does not pass a reexamination within one year of the initial examination date shall be required to submit a **new application** and **new examination fee.**

Select one examination type you are requesting:

✖	License Type	Fee
☐	1261 - Practical & Theory Exam	$194.00
☐	1261 - Practical Exam	$95.00
☐	1261 - Theory Exam	$99.00
☐	1262 - Instructor Exam	$99.00

1. Full Legal Name (As it appears on your government issued ID or other legal documentation.)

Last (required) _____ First (required) _____ Middle _____ Suffix _____

2. Provide at least **one** of the following identification numbers✳:

☐ ***Social Security Number*** *and/or* ☐☐☐ - ☐☐ - ☐☐☐☐

☐ ***Virginia*** DMV Control Number ☐☐☐☐☐☐☐☐☐

- Enter the same identification number as used on examination, previous applications or licenses on file with the department.

✳ 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.

3. Date of Birth _____ MM/DD/YYYY

4. Maiden or Former Name(s) _____

5. Mailing Address (PO Box accepted)
The mailing address will be printed on the license.

_____
City _____ State _____ Zip Code _____

6. Street Address (PO Box not accepted)
PHYSICAL ADDRESS REQUIRED

☐ Check here if Street Address is the same as the Mailing Address listed above.

_____
City _____ State _____ Zip Code _____

7. Contact Numbers

Primary Telephone _____ Alternate Telephone _____ Fax _____

8. Email Address _____

Email address is considered a public record and will be disclosed upon request from a third party.

OFFICE USE ONLY	DATE	FEE	TRANS CODE	ENTITY #	FILE #/LICENSE #	ISSUE DATE
			1020			

9. Have you ever taken the **Esthetician** or **Esthetician Instructor** examination in Virginia?

No ☐

Yes ☐ If yes, provide the following examination information

☐ Esthetician Exam Month/Year taken: _____

☐ Esthetician Instructor Exam Month/Year taken: _____

10. Have you been ***previously*** licensed in Virginia as a **esthetician** or **master esthetician**?

No ☐

Yes ☐ If yes, provide your license number and expiration date below

VA License Number ☐☐☐☐☐☐☐☐☐☐ Expiration Date _____

11. Which method are you using to qualify for an esthetician license?

☐ Completion of an Apprenticeship program by the Division of Apprenticeship Training of the Virginia Department of Workforce Development and Advancement.

Required Documentation: *Attach a completed Department of Workforce Development and Advancement form available from your Apprenticeship Representative.*

☐ Completion of an approved esthetics training program in a Virginia licensed esthetics school

Required Documentation: *Attach a completed Training Verification Form*

☐ Completion of 600 hours of esthetician training which is substantially equivalent to the Virginia program that is obtained outside the Commonwealth of Virginia

Required Documentation: *Attach an official school transcript indicating successful completion of 600 hours of instruction or written verification from the Licensing Board in the state where the 600 hours of training were received.*

☐ Completion of an esthetician course (consisting of less than 80% of training hours required in Virginia) and three years of esthetician work experience

Required Documentation: *Attach a certificate, an official school transcript, or other documentation verifying successful completion of the esthetician course and a completed Esthetician/Master Esthetician - Experience Verification Form documenting at least three years of esthetician work experience*

☐ Completion of a degree from an institution outside of the United States

Required Documentation: *Degree must be translated, authenticated, and evaluated by an education evaluation service.*

☐ Applying to take the Esthetician *Instructor* examination◆

VA License Number ☐☐☐☐☐☐☐☐☐☐ Expiration Date _____

◆ In addition to holding the appropriate Virginia practitioner license, instructor applicants are required to complete an instructor-training course approved by the Virginia Board for Barbers and Cosmetology under the supervision of a licensed esthetics or master esthetics instructor in an esthetics school.

Required Documentation: *Attach a completed Training Verification Form and transcripts and/or diploma*

☐ Previously licensed in Virginia by examination and past the reinstatement period

Required Documentation: *Verification from the Virginia Board for Barbers and* Cosmetology.

☐ Previously licensed in Virginia for a minimum of three years

Required Documentation: *Attach a completed ESTHETICIAN/MASTER ESTHETICIAN - EXPERIENCE VERIFICATION FORM.*

☐ Endorsement applicant required to complete Virginia examination.

Required Documentation: *Verification from the Virginia Board for Barbers and* Cosmetology.

12. Do you hold a current or have you ever held a **esthetician** license, certification or registration issued by any state or territory of the United States (excluding Virginia)?

No ☐

Yes ☐ If yes, complete the following questions.

A. List the following state/jurisdiction where a license, certification or registration has been issued:

State/Jurisdiction	License, Certification or Registration Number	Expiration Date

B. Are you in good standing as a licensed, certified, or registered professional for the states/ jurisdictions listed above?

Yes ☐

No ☐ If ***no***, provide an original Certification of Licensure◆ (dated within the last 60 days) from each state/jurisdiction where you are ***not*** in good standing.

◆ Certifications of Licensure; prepared by the state board or regulatory body must include: 1) the license/certification/registration number; 2) the initial date of licensure; 3) the expiration date of the license 4) *the means of obtaining licensure (i.e. exam, reciprocity, etc.) and the minimum requirement that were met to qualify for licensure;* and *5) all closed disciplinary actions resulting in a violation or undetermined finding.*

*Certification can be **emailed** from the regulatory body to the Board section at bchoplicensing@dpor.virginia.gov or **mailed** from the regulatory body to: Board for Barbers & Cosmetology, 9960 Mayland Drive, Suite 400, Richmond, VA 23233-1485.*

13. Have you ever been subject to a **disciplinary action** taken by any (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 Disciplinary Action Reporting Form.

14. Have you ever had an application for licensure, certification or registration as a practitioner or instructor **denied** by any (including Virginia) local, state or national regulatory body?

No ☐

Yes ☐ If yes, complete the Denial of Licensure Reporting Form.

15. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any **felony** within the last 10 years?

No ☐

Yes ☐ If yes, complete the Criminal Conviction Reporting Form.

16. Are you applying for a temporary permit?

No ☐

Yes ☐ If yes, your sponsor must complete and sign the following sponsorship statement:

I, the undersigned, agree to supervise all activities related to the practice of esthetics for the named applicant, and shall be responsible for his/her esthetics activities during the time the temporary permit is in force.

Printed Name of Sponsor _____ Signature of Sponsor _____

Sponsor's Virginia Esthetician/Master Esthetician License No. ☐☐☐☐☐☐☐☐☐☐

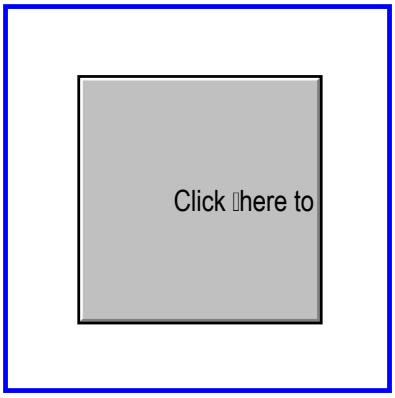
17. By signing this application, I certify the following statements:

- 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 of 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.
- I authorize any federal, state or local government agency, current or former employer, or other individual or business to release information which may 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; Esthetics Regulations.*

Signature _____ Date _____

18. Attach a professional passport compliant 2" x 2" color photo taken within the last 6 months to reflect your current appearance. It must meet the following requirements:

⇨ sized so that your head is approximately 1 inch from the bottom of the chin to the top of the head

⇨ taken in front of a plain white background

⇨ be a full-face view, directly facing the camera with a neutral facial expression