Commonwealth of Virginia
Department of Professional and Occupational Regulation

PSI Services LLC - Virginia Barber Cosmetology Program

P.O. Box 887

Wheat Ridge, CO 80034

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Virginia Board for Barbers and Cosmetology BODY PIERCER EXAMINATION & LICENSE APPLICATION Fee \$86.00

Instructions: Applicants are encouraged to apply online at https://vacos.useclarus.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 **PSI Services LLC** at the address listed above.
- 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.**

	Last (required)	First	t (required)			Mic	ldle						Generati
F	Provide at least <u>one</u> of the f	ollowing ident	ification num	bers [*] :									
	Social Security Number	r and/or						- [
	<u>Virginia</u> DMV Control N	umber			$\overline{\Box}$	T	$\overline{\top}$	Ī					
	➤ Enter the same identification nu	ımber as used on e	examination, previ	ous applicatio	ns or lice	nses on	file wi	th the	depa	rtment			
	* State law requires every application by the Commonwealth to provide												ccupation is
[Date of Birth												
	MM/DD/	YYYY											
ľ	Maiden Name or Former Su	rname(s)											
I	Mailing Address (PO Box accepted)												
	The mailing address will be	. ,											
	printed on the license.		City								State		Zip Code
3	Street Address (PO Box <u>not</u> accepted) PHYSICAL ADDRESS REQUIRED		•	here if Street	Address i	s the <u>sa</u>	me as	the M	ailing	Addre		d above.	
			City								State		Zip Code
(Contact Numbers												
		Primary Telepl	hone		Alternate	Teleph	one					Fax	
E	Email Address												
			s is considered		rd and v	vill be d	lisclos	sed u	on r	eques	t from	a third p	arty.
ŀ	Have you ever taken the Bo	dy Piercer Ex	amination in	Virginia?									
	No 🗌		— .										
	Yes If yes, enter M	fonth(s)/Year	(s) Taken										

OFFICE	DATE	FEE	TRANS CODE	ENTITY#	FILE #/LICENSE #	ISSUE DATE
USE ONLY			1020		1241	

10.	Have you been <i>previously</i> licensed in Virginia as a Body Piercer?									
	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 the examination? Select only ONE .									
	☐ Training Completed within the Commonwealth of Virginia:									
	Completion of an approved body-piercing apprenticeship program in a Virginia licensed body-piercing salon									
	Required Documentation: A completed Body-Piercing Apprenticeship Completion Form									
	☐ Training Completed outside the Commonwealth of Virginia, but within the United States and its territories:									
	 Completion of a body-piercing training or apprenticeship program which is substantially equivalent to the Virginia program. 									
	Required Documentation: Attach a diploma or official school transcript indicating successful completion of the training or apprenticeship program or written verification from the Licensing Board in the state where the training was received.									
	Completion of substantially equivalent body-piercing training or apprenticeship program (consisting of less									
	than 1500 hours of training) and five hours of health education (including, but not limited to bloodborne									
	disease, sterilization and aseptic techniques related to body-piercing and first aid and CPR).*									
	Required Documentation: Attach a certificate, diploma or other documentation verifying successful completion of the training or apprenticeship and documentation verifying successful completion of the required health education									
	O Three years of body-piercing work experience within the previous five years and completion of at least five									
	hours of health education (including, but not limited to bloodborne disease, sterilization and aseptic									
	techniques related to body-piercing and first aid and CPR).*									
	Required Documentation: Attach a completed <u>Body Piercer/Tattooer - Experience Verification Form</u> and documentation verifying successful completion of the required health education									
	All health education courses must be completed from a Board approved Education provider listed on the Board's website (www.dpor.virginia.gov/Boards/BarberCosmo/) under the tab section for "Education and Exams".									
	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 under grandfathering exemption and past the reinstatement period. Must provide									
	work experience and have completed a Board approved examination.									
	Required Documentation: Attach a completed <u>Body-Piercer/Tattooer - Experience Verification Form.</u>									
	☐ 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 body piercer license, certification or registration issued by any state or									
	territory of the United States (excluding Virginia)?									
	No Vac									
	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/Letter of Good Standing, 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 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 <u>disciplinary action</u> taken by <u>any</u> (including Virginia) local, state or national regulatory body? No
	Yes If yes, complete the <u>Disciplinary Action Reporting Form.</u>
14.	Have you ever had an application for licensure, certification or registration as a practitioner or instructor in the fields of barbering, cosmetology, waxing, nail care, esthetics, body-piercing, or tattooing denied by any (including Virginia) local, state or national regulatory body? No
	Yes If yes, complete the <u>Denial of Licensure Reporting Form.</u>
15.	A. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any <u>felony</u> within the last 20 years? <i>Any plea of nolo contendere shall be considered a conviction.</i> No No No No No No No No No
	Yes If yes, complete the <u>Criminal Conviction Reporting Form.</u>
	B. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any <u>misdemeanor</u> involving moral turpitude, sexual offense, non-marijuana drug distribution or physical injury within the last two (2) years? No
	Yes If yes, complete the <u>Criminal Conviction Reporting Form.</u>
16.	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 desire. 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; Body- Piercing Regulations.
	Signature Date

- 17. 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

Attach Photo Here.
Photocopy pictures are
not permitted.