Commonwealth of Virginia
Department of Professional and Occupational Regulation
9960 Mayland Drive, Suite 400
Richmond, Virginia 23233-1485
(804) 367-8509
www.dpor.virginia.gov

Department of Professional and Occupational Regulation

FINAL - PENDING APPROVAL

Virginia Board for Barbers and Cosmetology
INSTRUCTOR CERTIFICATION APPLICATION

(Only for applicants who are not required to take the Instructor Examination.)

Fee $100.00

A check or money order payable to the TREASURER OF VIRGINIA,
or a completed credit card insert must be mailed with your application package.
APPLICATION FEES ARE NOT REFUNDABLE.

Select the certification you are requesting and means of applying for the Instructor Certificate:

CERTIFICATE	BY COURSE		BY EXPERIENCE		BY ENDORSEMENT	
	X	Trans	X	Trans	X	Trans
1302 - Barber Instructor	☐	1022			☐	1021
1204 - Cosmetology Instructor	☐	1022			☐	1021
1207 - Nail Technician Instructor*	☐	1022			☐	1021
1215 - Wax Technician Instructor*	☐	1022			☐	1021
1262 - Esthetician Instructor	☐	1022				
1265 - Master Esthetician Instructor	☐	1022				
1239 - Tattooing Instructor			☐	1022		
1250 - Perm. Cosmetic Tattooing Instr.			☐	1022		

* An individual holding a Cosmetology Instructor Certificate can teach nail care and waxing without obtaining a separate Nail Technician Instructor or Wax Technician Instructor Certificate.

1. Provide your ***current*** Virginia practitioner license number and expiration date:

   Virginia License Number ☐☐☐☐☐☐☐☐☐☐ Expiration Date _____

   - If you do not hold a current Virginia practitioner license in your respective profession, you do not qualify for a Instructor certificate.
   - If you are applying for a Permanent Cosmetic Tattooer Instructor certificate, you may hold a current Virginia permanent cosmetic tattooer license or master permanent cosmetic tattooer license.

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

   _____ Last (required) _____ First (required) _____ Middle _____ Generation

3. 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.

4. Date of Birth _____ MM/DD/YYYY

5. Maiden or Former Name(s) _____

6. Mailing Address (PO Box accepted) _____

   The mailing address will be printed on the license.

   _____ City _____ State _____ Zip Code

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

7. Street Address (PO Box not accepted) ☐ Check here if Street Address is the same as the Mailing Address listed above.
PHYSICAL ADDRESS REQUIRED

_____

_____ _____ _____
City State Zip Code

8. Contact Numbers

_____ _____ _____
Primary Telephone Alternate Telephone Fax

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

10. Have you been ***previously*** licensed in Virginia as a Barber, Cosmetology, Nail Technician, Wax Technician, Esthetician, Master Esthetician, Tattooer, or Permanent Cosmetic Tattooer?
No ☐
Yes ☐ If yes, provide your license number and expiration date below
VA License Number | | | | | | | | | | | Expiration Date _____

11. Are you applying for **Barber, Cosmetology, Nail Technician, or Wax Technician** Instructor Certification?
No ☐
Yes ☐ If yes, which method are you using to apply for your Instructor Certification? Select **one.**
A. ☐ Application by Course:
Which of the following Barber, Cosmetology, Nail Technician, or Wax Technician Instructor courses have you successfully completed?
☐ A course in teaching techniques at post-secondary level
Required Documentation: Transcripts and/or diploma
☐ An instructor training course approved by the Virginia Board for Barbers and Cosmetology under the supervision of a certified barber, cosmetology, nail technician or wax technician instructor (respectively)
Required Documentation: Transcripts and/or diploma and a written evaluation by the instructor
B. ☐ Application by Endorsement:
Provide an original **Certification of Licensure**◆ (dated within the last 60 days) that must be:
1. Prepared by the state board or licensing body in which you are currently licensed to instruct barbering, cosmetology, nail care or waxing; and
2. Mailed in an unopened envelope with the seal or signature of the state board overlaying the flap on the back of the envelope and addressed to the Virginia Board for Barbers and Cosmetology.

◆ Certifications of Licensure/Letter of Good Standing, 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 must be mailed directly to:*

Board for Barbers and Cosmetology, 9960 Mayland Drive, Suite 400, Richmond, VA 23233-1485

12. Are you applying for **Esthetician** or **Master Esthetician** Instructor Certification?
No ☐
Yes ☐ If yes, attach documentation of completing a course in teaching techniques at a post-secondary level.
Required Attachment(s): Transcripts and/or diploma showing successful completion.

13. Are you applying for **Tattooer** or **Permanent Cosmetic Tattooing** Instructor Certification?

No ☐

Yes ☐ If yes, complete the ***Training & Experience Verification Form*** documenting *three years* of tattooing work experience within the previous five years and attach to this application. (More than one form may be submitted to document three years of experience.)

- DO NOT SUBMIT *Training & Experience Verification* form to the exam vendor. Mail directly to DPOR at the address provided at the top of this application.

14. 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.

15. 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 Denial of Licensure Reporting Form.

16. A. 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 20 years? *Any plea of nolo contendere shall be considered a conviction.*

No ☐

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

B. Have you been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any **misdemeanor involving moral turpitude, sexual offense, drug distribution or physical injury** within the last two (2) years? *Any plea of nolo contendere shall be considered a conviction.*

No ☐

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

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 Regulations*, *Tattooing Regulations,* or *Esthetics Regulations.*

Signature _____ Date _____