



SOUTH CAROLINA BOARD OF COSMETOLOGY
AFFIDAVIT OF COMPLETION

Student Information

Print Student Name:
Student Signature:
Student Social Security Number:

Training Information

The above student has completed the one of the following (please check which applies):

Cosmetology: 1,500 hours Nail Tech: 300 hours Esthetician: 450 hours

Date of Completion: mm.dd.yyyy

Affirmation Statement

This section should be completed by school instructor or school official.

I, Name of Instructor/School Official swear or affirm that I am authorized to report the
aforementioned student's information to the State Board of Cosmetology on behalf of
School Name which is licensed to do business in South Carolina. I also swear
that the information provided is true and correct to the best of my knowledge.

Instructor or School Official Signature:

Notary Section

Sworn to and subscribed before me this day of, 20.

Notary Public Name:

Notary Public Signature:

Notary Public Expiration: Notary Seal