

PROFESSIONAL CREDENTIAL SERVICES, INC.

Virginia Cosmetology Coordinator

Via USPS Post Office Box 198768 (USPS)

Nashville, TN 37219-8768

Via Courier 150 Fourth Avenue North, Suite 800

Nashville, TN 37219

Toll Free: (888) 822-3272

Fax: (615) 846-0153

E-Mail: [vacos@pcshq.com](mailto:vacos@pcshq.com)

Website: [www.pcshq.com](http://www.pcshq.com)



Department of Professional and Occupational Regulation

Virginia Board for Barbers and Cosmetology  
BODY PIERCER EXAMINATION & LICENSE APPLICATION

Fee \$75.00

Instructions: Complete this form and mail it with a cashier's check, money order, or credit card payment for the full amount of the fee, payable to Professional Credential Services, Inc. at the Professional Credential Services address above. Upon passing the exam, Professional Credential Services, Inc. will send you a FEE NOTICE. Submit the **signed** FEE NOTICE and license fee to:

Virginia Board for Barbers and Cosmetology  
Department of Professional and Occupational Regulation  
9960 Mayland Drive, Suite 400  
Richmond, VA 23233

1. Name \_\_\_\_\_  
Last First Middle Generation

2. Provide **one** of the following identification numbers.

☐ Social Security Number or ☐ Virginia DMV Control Number\*    -   -

\* 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 Name or Former Surname(s) \_\_\_\_\_

5. Mailing Address (PO Box accepted) \_\_\_\_\_

If a mailing address is submitted, the mailing address will be printed on the license.

City State Zip Code

6. 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

7. Email Address \_\_\_\_\_

8. Contact Numbers \_\_\_\_\_

Primary Telephone

Alternate Telephone

Fax

9. Have you ever taken the Body Piercer Examination in Virginia?

No ☐

Yes ☐ If yes, enter Month(s)/Year(s) Taken \_\_\_\_\_

| Office Use Only | DATE | FEE | TRANS CODE | ENTITY # | FILE #/LICENSE # | ISSUE DATE |
|-----------------|------|-----|------------|----------|------------------|------------|
|                 |      |     | 1020       |          | 1241             |            |

10. Do you hold a current or expired Virginia Body Piercer License?

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 blood borne 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*

☐ 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 blood borne disease, sterilization and aseptic techniques related to body-piercing and first aid and CPR)

*Required Documentation: Attach a completed Body-Piercing Training & Experience Verification Form and documentation verifying successful completion of the required health education*

12. Do you hold a current or expired body-piercing license, certification, or registration in any state or jurisdiction within the United States or its territories (excluding Virginia)?

No ☐

Yes ☐ If yes, complete the following table.

| State/Jurisdiction | License, Certification or Registration Number | Expiration Date |
|--------------------|---|-----------------|
|                    |   |                 |
|                    |   |                 |
|                    |   |                 |

13. Have you ever been subject to a disciplinary action taken by any (including Virginia) local, state or national regulatory body?

No ☐

Yes ☐ If yes, provide a certified copy of the final order, decree or case decision by a court or regulatory agency with lawful authority to issue such order, decree or case decision.

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, provide a certified copy of the final order, decree or case decision by a court or regulatory agency with lawful authority to issue such order, decree or case decision.

15. Have you ever been convicted in any jurisdiction of a *misdemeanor and/or felony*? Any guilty plea or plea of nolo contendere must be disclosed on this application. Do not disclose violations that were adjudicated as a minor in the juvenile court system.

No ☐

Yes ☐ If yes, applicants are required to attach an original criminal history record<sup>★</sup> issued by the Virginia State police. Applicants with convictions from other jurisdictions, other than Virginia; must provide an original official criminal history record from each state in which they have convictions. Virginia residents may request complete criminal records from the Virginia State Police at [www.vsp.state.va.us](http://www.vsp.state.va.us) or by phone at 804-674-6718.

★ For each conviction, please provide a certified copy of the final order, decree, or case decision by a court or regulatory agency with lawful authority to issue such order, decree, or case decision; and any other information you wish to have considered with this application (e.g., information on the status of incarceration, parole or probation; reference letters; documentation of rehabilitation etc.).

16. I, the undersigned, certify that the foregoing statements and answers are true, and I have not suppressed any information that might affect the decision to approve this application. I certify that I will notify the Department if I am subject to any disciplinary action or convicted of a felony or misdemeanor (in any jurisdiction) prior to receiving the requested license. I certify that I have read, understood and complied with all the laws of Virginia 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.*