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Virginia Board for Barbers and Cosmetology
NAIL TECHNICIAN – NAIL TECHNICIAN INSTRUCTOR
EXAMINATION & LICENSE APPLICATION

Instructions: 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 Professional Credential Services, Inc. at the address listed above.

APPLICATION FEES ARE NOT REFUNDABLE

Select one examination type you are requesting:

x	License Type	Fee
<input type="checkbox"/>	1206 - Practical & Theory Exam	\$155.00
<input type="checkbox"/>	1206 - Practical Exam	\$80.00
<input type="checkbox"/>	1206 - Theory Exam	\$75.00
<input type="checkbox"/>	1207 - Instructor Exam	\$75.00

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

OFFICE USE ONLY	DATE	FEE	TRANS CODE	ENTITY #	FILE #/LICENSE #	ISSUE DATE
			1020		12	

9. Have you ever taken the Nail Technician or Nail Technician Instructor Examination in Virginia?

No

Yes If yes, provide the following examination information

Nail Technician Exam Month taken: _____

Year taken: _____

Nail Technician Instructor Exam Month taken: _____

Year taken: _____

10. Do you currently hold or have you been previously licensed in Virginia as a Barber, Cosmetology, or Nail Technician?

No

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

VA License Number

Expiration Date _____

11. Are you applying to take the Instructor Examination?

No

Yes If yes, provide the following information and skip to question #13.

VA License Number

Expiration Date _____

12. Which method are you using to qualify for the examination? Select only **ONE**.

Completion of an approved nail technician training program in a Virginia licensed nail technician school or a Virginia public school nail technician program approved by the Virginia Department of Education

Required Documentation: Attach a completed Training & Experience Verification Form

Completion of 150 hours of nail technician training which is substantially equivalent to the Virginia program that is obtained outside the Commonwealth of Virginia, but within the United States and its territories

Required Documentation: Attach a diploma or official school transcript indicating successful completion of 150 hours of instruction or written verification from the Licensing Board in the state where the 150 hours of training were received

Completion of substantially equivalent nail technician course (consisting of less than 150 hours of training) and six months of nail technician work experience. Both training and experience must be obtained outside the Commonwealth of Virginia, but within the United States and its territories

Required Documentation: Attach a certificate, diploma or other documentation verifying successful completion of the nail technician course and a completed Training & Experience Verification Form documenting at least six months of nail technician work experience

Completion of the Virginia apprenticeship program in nail care

Required Documentation: A completed Department of Labor and Industry form available from your apprenticeship representative

Nail technician training obtained in any Virginia state institution

Required Documentation: Attach a completed Training & Experience Verification Form

13. Do you hold a current or expired Barber, Cosmetology, or Nail Technician 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

14. 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.
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, 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.
16. 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**** 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.virginia.gov 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.).

17. Are you applying for a temporary permit? **DOES NOT APPLY TO STUDENT INSTRUCTOR TEMPORARY PERMITS.**
 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 nail care for the named applicant, and shall be responsible for his/her nail technician activities during the time the temporary permit is in force.

_____ Printed Name of Sponsor _____ Signature of Sponsor
 Sponsor's VA Nail Technician or Cosmetology License No.

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18. 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 Regulations.

Signature _____ Date _____

19. 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

