Commonwealth of Virginia

Department of Professional and Occupational Regulation

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

 Website:
 www.pcshq.com



Virginia Board for Barbers and Cosmetology TATTOOER EXAMINATION & LICENSE APPLICATION Fee \$75.00

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

			APPLICA	HON FEES ARE NO	JI REFUNDABLE					
1.	Name									
	Last		Fi	rst	Middle		Generation			
2.	Provide <u>one</u> of the following identification numbers.									
	Social Se	ecurity Number	or 🔲 V	/irginia DMV Contro	Number* -	-				
					er authorization to engage in a business, er issued by the Virginia Department of Me		or occupation issued			
3.	Date of Birth									
		MM/DD/	YYYY							
4.	Maiden Name	or Former Sur	rname(s)							
5.	Mailing Addres	ss (PO Box ac	cepted)							
		ess is submitted, be printed on the								
			Ci	ity		State	Zip Code			
6.	Street Address PHYSICAL	s (PO Box <u>not</u> _ address rec		Check here if Street	Address is the <u>same</u> as the Mailing Addres	is listed above.				
			Ci	ity		State	Zip Code			
7.	Email Address									
8.	Contact Numb	ers								
			Primary Telepho	ne	Alternate Telephone	F	ах			
9.	Have you ever taken the Tattooer Examination in Virginia? No Yes If yes, provide the following examination information									
			_							
OFFICE	DATE	FEE	TRANS CODE	ENTITY #	FILE #/LICENSE #		ISSUE DATE			
HICE				1	1001					

OFFICE	DATE	FEE	TRANS CODE	ENTITY#	FILE #/LICENSE #	ISSUE DATE
OFFICE USE ONLY			1020		1231	

10. Do you <u>currently</u> hold or have you been <u>previously</u> licensed in Virginia as a Tattooer, Limited Te Permanent Cosmetic Tattooer or Master Permanent Cosmetic Tattooer? No						mited Term Tattooer,				
	Yes If yes, provide your license number and expiration date below									
	V	A License Number							Expiration Dat	e
11.	Which method ar	Which method are you using to qualify for the examination? Select only ONE .								
	Training Compl	Training Completed within the Commonwealth of Virginia:								
	Completion of a tattooing apprenticeship program in a Virginia licensed tattoo parlor Required Documentation: Attach a completed Apprenticeship Completion Form									
	Completion of a tattooing training program in a Virginia licensed school of tattooing Required Documentation: Attach a diploma or official school transcript indicating successful completion of the training program									
	Training Completed outside the Commonwealth of Virginia, but within the United States and its territories:									
	of 15 disea <i>Requ</i> appre docu	Completion of substantially equivalent tattoo training or apprenticeship program (consisting of a minimum of 1500 hours) and five hours of board approved health education (including, but not limited to, blood borne disease, sterilization and aseptic techniques related to tattooing, and first aid and CPR). Required Documentation: Attach a diploma or official school transcript indicating successful completion of the 1500 hours of training or apprenticeship program or written verification from the Licensing Board in the state where the 1500 hours of training were received and documentation verifying successful completion of the required health education.								
	Completion of substantially equivalent tattoo training or apprenticeship program (consisting of <u>less</u> than 1500 hours of training) <u>and</u> five hours of board approved health education (including, but not limited to blood borne disease, sterilization and aseptic techniques related to tattooing 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 tattooing work experience within the previous five years <u>and</u> five hours of board approved health education (including, but not limited to blood borne disease, sterilization and aseptic techniques related to tattooing and first aid and CPR). *Required Documentation: Attach a completed <u>Training & Experience Verification Form</u> and documentation verifying successful completion of the required health education									
12.	,	Do you hold a <u>current</u> or <u>expired</u> tattooer license, certification or registration in any state or jurisdiction within the United States or its territories (excluding Virginia)?								
	No ☐ Yes ☐ If	yes, complete the follo	owing table.							
		State/Juris	diction	Licen	se, Ce	ertificat	tior	n or Regi	stration Number	Expiration Date
13. Have you ever been subject to a disciplinary action taken by <u>any</u> (including Virginia) local, st body?No □					nia) local, state	or national regulatory				
	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.	barbering, cosmo		care, esthetic							structor in the fields of ny (including Virginia)
	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 <i>misdemeanor</i> and/or <i>felony</i> ? Any guilty ple contendere must be disclosed on this application. Do not disclose violations that were adjudicated a juvenile court system. No								
	Yes	If yes, applicants are <u>required</u> to attach an <u>original criminal I</u> police. Applicants with convictions from other jurisdictions, ot official criminal history record from each state in which they request complete criminal records from the Virginia State Pol at 804-674-6718.	her than Virginia; must provide an original have convictions. Virginia residents may					
*	agency v consider	n conviction, please provide a certified copy of the final order, decree with lawful authority to issue such order, decree, or case decision; a red with this application (e.g., information on the status of incarceral ntation of rehabilitation etc.).	nd any other information you wish to have					
16.	6. I, the undersigned, certify that the foregoing statements and answers are true, and I have not suppressed a information that might affect the decision to approve this application. I certify that I will notify the Department if I a subject to any disciplinary action or convicted of a felony or misdemeanor (in any jurisdiction) prior to receiving t requested license. I certify that I have read, understood and complied with all the laws of Virginia under the provisio of Title 54.1, Chapter 7 of the Code of Virginia and the Virginia Board for Barbers and Cosmetology Tattook Regulations.							
	Signatur	re	Date					
17.		a professional passport compliant 2" x 2" color photo taken within ance. It must meet the following requirements:	the last 6 months to reflect your current					
	\Rightarrow	he 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.					