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: <u>vacos@pcshq.com</u>
Website: <u>www.pcshq.com</u>

Instructions:



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

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

## Select one examination type you are requesting:

×	License Type	Fee	
	1214 - Practical & Theory Exam	\$155.00	
	1214 - Practical Exam	\$80.00	
	1214 - Theory Exam	\$75.00	
	1215 - Instructor Exam	\$75.00	

1.	Last		<u>F</u>	irst	Middle		Generation
2.	Provide one o	f the following	identification i	numbers.			
	* State law re		nt for a license, ce		ontrol Number * or other authorization to engage in a business number issued by the Virginia Department of		or occupation issued
3.	Date of Birth	MM/DD/\	YYYY				
4.	Maiden Name	or Former Sur	name(s)				
5.	5. Mailing Address (PO Box accepted)  If a mailing address is submitted, the mailing address will be printed on the license.						
6.	Street Address	s (PO Box <u>not</u> _ ADDRESS REC	accepted) [	City  Check here if S	treet Address is the <u>same</u> as the Mailing Addr	State ress listed above.	Zip Code
			-				
7.	Email Address		(	City		State	Zip Code
Office	DATE	FEE	TRANS CODE	ENTITY #	FILE #/LICENSE #		ISSUE DATE
Use Only			1020		12		

8.				
0	Primary Telephone	Alternate Telephone	Fax	
9.	<ol> <li>Have you ever taken the Wax Technician or Wax Technician I</li> <li>No </li> </ol>	istructor examination in Virginia?		
	Yes  If yes, provide the following examination information	ation		
		talean.		
	Year t			
		taken:		
	Year t	aken:		
10.	Do you hold a <u>current</u> or <u>expired</u> Virginia Barber, Cosmetology	, or Nail Technician License?		
	No  If you provide your license number and expiration d	ata halaw		
	Yes If yes, provide your license number and expiration d			
	VA License Number	Expiration Date		
11.	· 11 5 5			
	No Yes If yes, provide the following information and skip to c	juestion #13.		
	VA License Number	Expiration Date		
12.				
Completion of an approved wax technician training program in a Virginia licensed waxir				
	Virginia public school wax technician program appr	0.0	•	
	that is substantially equivalent to the Virginia Progra Required Documentation: Attach a completed <u>Training &amp; Experient</u>			
			the Virginia program	
	Completion of 115 hours of wax technician training that is obtained outside the Commonwealth of Virgi			
	Required Documentation: Attach a diploma or official school tra verification from the Licensing Board in the state where the 115 hou	nscript indicating successful completion of 115	hours of instruction <b>or</b> written	
	Completion of substantially equivalent wax technic		115 hours of training)	
	and six months of wax technician work experience	. Both training and experience mus	0.	
	the Commonwealth of Virginia, but within the United Required Documentation: Attach a certificate, diploma or other do		ho way tachnician course and	
	a completed <u>Training &amp; Experience Verification Form</u> documenting a			
	Virginia licensed cosmetologist			
	Required Documentation: ENTER VIRGINIA COSMETOLOG	GY LICENSE NO:		
	Wax Technician training obtained in any Virginia sta Required Documentation: Attach a completed <u>Training &amp; Experie</u>			
	Two years of waxing experience in the United State Required Documentation: Attach a completed <u>Training &amp; Experience</u>			
13.			e or iurisdiction within	
	the United States or its territories (excluding Virginia) ?	, 3	,	
No  Yes If yes complete the following table				
	,			
	State/Jurisdiction License	e, Certification or Registration Number	Expiration Date	

14.	Have you ev body?	ver been subject to a disciplinary action taken by <u>any</u> (i	ncluding Virginia) local, state or national regulatory	
	Yes	If yes, provide a certified copy of the final order, decrewith lawful authority to issue such order, decree or ca	, , , , ,	
15.	•			
	Yes	If yes, provide a certified copy of the final order, decree lawful authority to issue such order, decree or case decision		
16.	,	ver been convicted in any jurisdiction of a <i>misdemean</i> must be disclosed on this application. Do not disclose rt system.	3 3 3 3 1 1	
	Yes	If yes, applicants are required to attach an original of police. Applicants with convictions from other jurisdict official criminal history record from each state in white request complete criminal records from the Virginia at 804-374-6718.	tions, other than Virginia; must provide an original nich they have convictions. Virginia residents may	
*	agency with I considered w	nviction, please provide a certified copy of the final orde lawful authority to issue such order, decree, or case de with this application (e.g., information on the status of ir on of rehabilitation etc.).	cision; and any other information you wish to have	
17.	Are you apply	lying for a temporary permit?		
	Yes	If yes, your sponsor must complete and sign the follow	ving sponsorship statement:	
		I, the undersigned, agree to supervise all activ named applicant, and shall be responsible for temporary permit is in force.	,	
		Printed Name of Sponsor	Signature of Sponsor	
		Sponsor's Virginia Wax Technician or Cosmetology L	cense No	
18.	information the subject to ar requested lic	rsigned, certify that the foregoing statements and an that might affect the decision to approve this application on disciplinary action or convicted of a felony or misdicense. I certify that I have read, understood and compliments of the Code of Virginia and the Virginia Book of the Code of Virginia and the Virginia Book of Virginia and the Virginia and the Virginia and the Virginia and the Virginia and Virginia	swers are true, and I have not suppressed any n. I certify that I will notify the Department if I am emeanor (in any jurisdiction) prior to receiving the ed with all the laws of Virginia under the provisions	
	Signature		Date	

State/Jurisdiction

License, Certification or Registration Number

**Expiration 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

  - be a full-face view, directly facing the camera with a neutral facial expression

Attach Photo Here.
Photocopy pictures are
not permitted.