

- Will you be applying for financial aid? Yes No

If Yes; Date filled out FAFSA? _____

- Have you ever been convicted of a felony? Yes No

If yes, please explain: _____

- In Case of Emergency, Contact:

○ Name: _____

○ Phone: _____

- Name of Primary health care provider:

Address: _____

City: _____

State: _____ Zip: _____

- Do you have a health history? Yes No

If yes, please explain: _____

- Have you previously enrolled in another Cosmetology school? Yes No

If Yes, Name of other school: _____

City, State: _____

Dates Attended: _____ to _____

Hours Received: _____

- Have you ever been suspended or dismissed for academic reasons from another Cosmetology school or university? Yes No

If yes, please explain: _____

- How did you learn about the Academy of Cosmetology, Inc.?

- Please provide three Professional references that we may contact:

1) Name: _____ Phone: _____

How do you know this person? _____

2) Name: _____ Phone: _____

How do you know this person? _____

3) Name: _____ Phone: _____

How do you know this person? _____

▪ **Please include with your application a typed essay explaining:**

- √ *The steps you have taken into investigating the Cosmetology industry*
- √ *Your expectations of the Cosmetology industry regarding its salary ranges, job opportunities, benefits, work schedules, etc.*
- √ *Why the Academy of Cosmetology, Inc. should accept you as a student*
- √ *Your short- and long-term goals as far as what you expect to get from your education*

I hereby apply for admission to the Academy of Cosmetology, Inc. I have enclosed the following items with my application:

- ____ (initial) *Registration and application fees of \$165.00 (\$100 non-refundable application fee)*
- ____ (initial) *A typed essay addressing all topics requested*
- ____ (initial) *A copy of my high school diploma or General Education Diploma (GED)*
- ____ (initial) *A sealed copy of my high school or GED transcripts*
- ____ (initial) *Two letters of professional recommendation*
- ____ (initial) *A copy of my driver's license, passport or birth certificate*
- ____ (initial) *I understand that this application holds me a spot at this time; it does not guarantee me acceptance into the school. I will be notified of placement.*
- ____ (initial) *I also agree to participate in any required interviews / orientations that the Academy of Cosmetology, Inc. will conduct after receiving my application.*

❖ **Prior to enrolling I have received and read the Course Catalog, Satisfactory Academic Progress Policy & the most recent NACCAS Annual Rate Outcomes.** _____ **Initial**

❖ **Prior to enrolling I have received and read the Gainful Employment Disclosure found on the website (www.academycosmetology.com) under the Course of Study tab.** _____ **Initial**

❖ **Prior to enrolling I am aware that during the Covid-19 Pandemic a portion of my education will be received via Distance Education and will need to access a desktop, or laptop computer with an internet connection.** _____ **Initial**

I declare that I have examined all the information on this form, and it is true and correct to the best of my knowledge.

Student signature: _____ Date: _____

Parent signature: _____ Date: _____
(Required if student is a minor)

Office Use Only:			
Rcvd by: _____	Date: _____	Processed By: _____	Date: _____