



West Virginia Board of Barbers and Cosmetologists

PO BOX 6768

CHARLESTON, WV 25362

Tel. 304.558.2924 Fax 304.558.3450

www.wvbbc.org

Adam L. Higginbotham
Director

APPLICATION FOR INSTRUCTOR EXAMINATION/REGISTRATION

NOTE:

\$50.00 Exam Fee must be attached with this application.

\$50.00 Registration Fee must be submitted after successfully passing examination.

APPLICATION DATE: _____

PERSONAL INFORMATION

NAME: _____ SS#: _____

ADDRESS: _____
STREET ADDRESS CITY STATE ZIP

DATE OF BIRTH: _____ AGE: _____ LICENSE #: _____

PHONE NUMBER: _____ EMAIL: _____

NOTARIZED CERTIFICATION OF INSTRUCTOR EMPLOYMENT

This is to certify that the above named individual was employed as an instructor in the school listed below:

SCHOOL: _____

DATES OF EMPLOYMENT: _____

SCHOOL MANAGER SIGNATURE: _____

The school manager, whose signature appears above, first being duly sworn, this _____ day of _____, 20____, states that the above statements regarding instructor training are true in every respect.

My commission expires _____

Stamp Here

Notary Public Signature: _____

CHECKLIST

- Letter of recommendation from school
- Two (2) recent photographs with one being attached to this document on the next page
- Certification of employment as an instructor
- \$50.00 examination fee
- Original college transcript

PLEASE SEE BACK

SIGNED STATEMENT OF APPLICANT

In submitting this application for examination and registration as instructor in the profession indicated on this application, I certify that I am familiar with the law governing the practice of barbering and cosmetology in West Virginia, and am willing to comply with the rules and regulations and the law governing the teaching and practice of barbering and cosmetology in West Virginia. I do recognize the obligation inherent upon anyone employed in any capacity as an instructing in barbering and cosmetology.

I further understand that my license will expire December 31st of each year and that I must renew my license on or before the first day of January, each year, in the amount of \$50.00. I also understand that an expired license may be reinstated only upon the payment of all lapsed renewal fees, unless I have notified the Board to place such license on inactive status in writing. At the time of renewal, I shall submit copies of any acquired college credits and/or advanced hairstyling certificates.

Signature of Applicant: _____

Date: _____

Attach
Photo
Here

CHECKLIST

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- Two (2) recent photographs**
- Certification of employment**
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