



West Virginia State Board of Barbers and Cosmetologists

1201 Dunbar Avenue

Dunbar, West Virginia 25064

Tel: 304.558.2924 Fax: 304.558.3450

www.wvbbc.com

APPLICATION FOR REGISTRATION

Initial License Application

The following must be included with this application:

- \$35.00 Licensure Fee
- Official Barber or Cosmetology School Transcripts
- Exam Results from Third-Party Examiner
- Copy of High School Diploma/GED Diploma/ATB Results
- Copy of Photo ID
- Copy of Social Security Card
- Passport-Sized Photo
- Certificate of Health

Office Use Only

License #

License Type

Registered

Date Passed

APPLICANT NOTICE

- *If your first, middle, or last name differ on any documentation, you must submit proof of name change (copy of marriage certificate/license or an official court document).
- *If you attained your high school diploma or if your training from barber/cosmetology school outside of the U.S., or if you completed a domestic online high school program, you MUST have your education evaluated by AEQUO International prior to submitting this application. For an application, please contact AEQUO International at 844.882.3786.
- *You must submit your passing scores from the Practical, Written, and State Law Exams. Your application will be returned if your scores are marked with asterisks instead of the exact passing score.
- *Certificate of Health must be a physical examination certification that is completed by a licensed physician (within the last 12 months), clearing the applicant to perform professional services on the general public.

APPLICANT INFORMATION

License Type: Cosmetologist Barber - All Types Aesthetician Nail Technician Hair Stylist

Name SSN

Address Phone

City State Zip Code County

E-mail Date of Exam

By submitting this application, I affirm that I have passed the examination and the required documentation submitted with this application is true in every respect and that without the documents above I will be rejected licensure. I understand that by submitting fraudulent documentation that I may risk revocation of my professional license and may face other penalties. *Having passed an examination and being otherwise qualified, according to the provisions of Chapter 30, Article 27, Code of West Virginia, I hereby make application for registration for licensure.*

Signed By _____

Current Date

Attach Photograph

HERE

Photograph must be clear and recent

This application contains Personally Identifiable Information (PII). The SSN number collected within this application is to manage your license account by effectively identifying your information and **will not** be shared with a third-party. The information collected on this application will be securely protected through the Board's server database. By submitting this application, I agree to the policy.