

# North Carolina Board of Barber and Electrolysis Examiners

7001 Mail Service Center Raleigh, North Carolina 27699-7000 Office: (919) 814-0640 | Email: electrolysis@nc.gov | bbee.nc.gov

# <u>Application for Certification</u> <u>Electrology Instructor</u>

Dear Applicant,

Thank you for your request for an application for certification as an Electrology Instructor. This packet contains relevant information about how to obtain a certification in North Carolina.

The requirements for application are pursuant to the statutes, rules, and regulations set forth by the NC General Assembly and the board. Please read the rules and instructions prior to applying.

It is the applicant's responsibility to inform the board of name and/or address changes. Please submit such changes in writing to the address listed above or via email.

Every effort will be taken to process your application in a timely manner. If you have any questions please contact the board at the information listed above. We look forward to certifying you in North Carolina.

## **Requirements for Application for Certification**

*This is not a comprehensive listing of the statutes* & *rules related to application. Please refer as noted above.* 

- All applicants must be 21 years of age.
- All documents/fees requested in the Application Check List must accompany this application unless otherwise noted as 'if applicable'. A completed and notarized application form approved by the Board is required for certification.
- All applicants must pass a written examination administered by the NCBEE.
- An incomplete or partial application packet will be rejected by the NCBEE.

## Application Check List

- $\sqrt{}$  Certified copy of **birth certificate** or other legal proof of age
- $\sqrt{}$  Copy of all **out-of-state licenses**, if applicable
- √ Copy of **Education Background**: diploma (or similar) evidencing attainment of equivalent education.
- $\sqrt{}$  Copy of **Electrology License**
- $\sqrt{}$  Copy of your approved **current renewal** of continuing education for electrolysis
- √ Additional page(s) of **Background of Applicant** affidavit's questions, if applicable
- $\sqrt{1}$  Two (2) letters of **personal** reference
- $\sqrt{1}$  Two (2) letters of **professional** reference
- $\sqrt{}$  Documentation of **teaching experience**
- $\sqrt{}$  Documentation of **teaching preparation courses**
- $\sqrt{1}$  Proof of having been **actively practicing** Electrology for at least five (5) years immediately before making application
- $\sqrt{}$  Passport acceptable **photograph** taken within the last two (2) years
- √ Check or money order for application fee in the amount of \$150.00 made payable to:
  North Carolina Board of Barber and Electrolysis Examiners

#### Fees

Application for certification as Instructor

\$150.00 (non-refundable)

#### Instructions for Completing PDF form

- The application is an interactive PDF. This means you can click directly onto a field and enter the required information. If you hover over the field with your cursor, a detail of the required information will be displayed.
- Please enter all information and SAVE the PDF file to your computer. There are two options for submitting the form:
  - print the saved document, notarize, and send a scanned copy to the board email at electrolysis@nc.gov.
  - or, print the saved document, notarize, and mail to the board at: 7001 Mail Service Center Raleigh, North Carolina 27699-7000



# North Carolina Board of Barber and Electrolysis Examiners

7001 Mail Service Center Raleigh, North Carolina 27603 Office: (919) 814-0640 | Email: electrolysis@nc.gov | bbee.nc.gov

<b>Application</b>	for Certification
Electrolo	gy Instructor

	89 111011110101			
SECTION 1 – Applicant Information				
Date:				
Full Name:		Maiden:		
Mailing Address:				
City	State	Zip		
Date of Birth:	Place of Birth:			
Social Security #: Home	Phone #:	Cell Pl	hone #:	
Female Male Email	:			
SECTION 2 – Current Practice Inform	ation			,
Date Electrology License Issued:	License	e #:		
Business Name:				
Business Address:				
City	State	Zip		
Business Phone #:	<i>Fax#:</i>		Cell #:	
Email:	Website:			
Check what best describes your business location:	Office	Home	Salon	Other

# SECTION 3 – Location History

# Please specify the dates you have been actively engaged in the practice of <u>Electrology</u> and the locations of Electrology practice in the five (5) years prior to Electrology Instructor application:

	Start Date	Stop Date	Location of Electrology Practice
1			
2			
3			
4			
5			

## SECTION 4 – Educational Background

				Gradu	ated?	Diploma	Degree	GED
					Credit			
Name of School	Street, City, State, Zip	Year	Major	Yes/No	Hrs	Yes/No	Yes/No	Yes/No
High School								
Technical School								
College/University								
conege/ oniversity								
Electrology School								
Other								

Application for Electrology Instructor Certification

# Most Recent Continuing Education for Electrolysis Instruction

\*\*Attach copies of earned CEU certification\*\*

				IACET Approved	Seminar	Convention	Home Study & Subject
Sponsoring				Appioveu	Semma	convention	Subject
Entity	Street, City, State, Zip	Year	CEUs	Yes/No	Yes/No	Yes/No	Yes/No

	SECTION 5 – Background Information		
	re space is needed to complete your explanation, please label each on being referenced and add "See Attached" to the question below	- 0	oppropriate
1.	Has your application for examination or licensure ever been rejected by any Board of Examiners? <i>If YES, by what Board and for what reason?</i>	Yes	No
2.	Are you now or have you ever practiced Electrology in any other state? If YES, specify each state, number of years practiced, and license # for each state.	Yes	No
3.	Have you ever practiced Electrology in a state not requiring a license? <i>If YES, give state and years practiced?</i>	Yes	No
4.	Has any State Licensing Board or State Agency revoked, suspended, or otherwise disciplined a license issued to you? <i>If YES, give the name of the board, state, action taken, reason, and outc</i>	Yes come.	No
5.	To your knowledge, are you now or have you ever been the subject of a criminal investigation? If YES, please attach a statement of facts explaining the investigation a agency name and final disposition.	Yes nd list the in	No vestigating
6.	Have you ever had a judgment rendered against you, or action settled relating to the performance of your professional service? <i>If YES, provide details</i> .	Yes	No
7.	I have actively practiced Electrology for at least five (5) years prior to applying for status as an Electrology Instructor.	Yes	No
plica	tion for Electrology Instructor Certification		6

#### SECTION 6 - Additional Questions

#### **QUESTIONS LISTED BELOW ARE FOR THE BOARD'S INFORMATION ONLY**

- 1. What are your reasons for becoming an Electrology instructor in North Carolina?
- 2. What goals would you, as an Electrology Instructor in North Carolina, hope to accomplish in educating students as electrologists?
- 3. List <u>any</u> past and current teaching experience.
- 4. List all teacher preparation courses you have taken.
- 5. Please specify the dates you have been actively engaged in the instruction and training of electrology.

#### NAMES OF TRAINING FACILITIES FOR INSTRUCTION:

Start Date	Stop Date	Training School Name	Street, City, State, Zip	CEUs	Practice Setting

## SECTION 7 - References

#### LETTERS OF REFERENCE:

List the names, addresses, and phone numbers of two (2) personal **and** two (2) professional references. Attach letters of recommendation with application.

## **Personal References**

Name	Address	Phone

## **Professional References**

Name	Address	Phone

#### SECTION 8 - Photo

ll applicants for licensure as an electrologist shall submit an application on the form provided by the Board, accompanied by proof of being 21 years of age, a passport acceptable photograph taken within the past two years.

#### **SECTION 9 - Declaration**

#### **DECLARATION OF LEGITIMACY**

I, hereby, make application to the North Carolina Board of Barber and Electrolysis Examiners to obtain certification as an Electrology Instructor. Upon acceptance of this application, it will enable me to teach the Practice of Electrolysis in the state of North Carolina. I do solemnly swear and affirm that the statements made on this signed application and all attached pertinent background documents are true and correct. To further affirm, I have read and understand the Annotated Code of North Carolina, G.S. 86B (the Barber and Electrolysis Practice Act) and 21 NCAC 06. I fully understand in receiving an Electrology Instructor certification from the board, I will comply with all statutes and rules set forth and adopted by the board to allow instruction and teaching in the science of Electrology in the state of North Carolina. I pledge to maintain the highest standards of the profession in fulfilling this position.

(Signature of Applicant in presence of Notary Public)

Appeared before me this

Day of

<u>20</u>, and has sworn that the above statements are true.

(Notary Public)

My Commission Expires:

(Notary Seal)

To obtain a copy of G.S § 86B (the Barber and Electrolysis Practice Act) and the rules in 21 NCAC 06, please refer to the board website at bbee.nc.gov.

ATTACH ALL DOCUMENTS AS PROOF TO THIS APPLICATION

(For Board Use Only)	
Instructor License #	
License Date:	
Examination Date:	
Examiner Name:	
Approved (Y/N):	
Comments:	
File #	