Academy of Cosmetology Arts, LLC

Providing Exceptional Beauty Education Since 2001

APPRENTICE REGISTRATION TO APPLY FOR ENROLLMENT FORM

This application will be complete when accompanied by the following:

1. $150.00 Application Fee. You may pay via PayPal, Square, Venmo or Zelle. (A receipt will be provided).
2. Proof of a HS diploma or GED or official college transcripts (and parental/school permission-if necessary)
3. A copy of your Social Security Card and your current Driver's License or State ID.

PLEASE PRINT OR TYPE

NAME:

(First) (Middle) (Last) (Right or Left-Handed)

ADDRESS:

(Street) (City) (State) (Zip Code)

(Telephone - Area Code First) (Cell Phone - Area Code First) (Email Address)

(Social Security Number) (Birth Date) (Driver's License Number)

CHOOSE APPRENTICE RELATED INSTRUCTION COURSE

BARBER _____ **COSMETOLOGY** _____ **HAIRSTYLIST** _____

CHOOSE PREFERRED ENROLLMENT

YEAR _____ **JAN** _____ **FEB** _____ **APR** _____ **MAY** _____ **JUN** _____ **JUL** _____ **OCT** _____ **NOV** _____

HAVE YOU EVER BEEN CONVICTED OR ENTERED A PLEA OF *NOLO CONTENDERE* (NO CONTEST) FOR A CRIMINAL OFFENSE, FELONY OR MISDEMEANOR OTHER THAN FOR A MINOR TRAFFIC VIOLATION? _____ YES _____ NO

If the answer is "Yes", please provide specific information including the nature of the crime, date of conviction, city, county and state in which convicted and the sentence for each such conviction:

_____

_____

_____

_____

DISCLOSURE STATEMENT

No incomplete application will be accepted.

In connection to my application with ACA, I understand that a request may be made regarding my account with the Academy which may contain information that may be used to report to agencies such as the Colorado Department of Labor and Employment.

I AUTHORIZE WITHOUT RESERVATION, ANY PARTY OR AGENCY CONTACTED TO FURNISH THE ABOVE MENTIONED INFORMATION.

_____ _____

Applicant Signature Date

PLEASE EMAIL COMPLETED APPLICATION AND ANY ACCOMPANYING ITEMS TO BEAUTYED4U@GMAIL.COM

4201 EAST YALE AVENUE, SUITE B1`35, DENVER, COLORADO 80222 303-378-9204 VOICE/TEXT