

## Exam Application

### APPLICANT INFORMATION – PLEASE PRINT CLEARLY.

Complete all \*mandatory fields and sections which apply to you and ensure you sign the exam application before submitting.

BeautyCouncil Membership Number:		*Last Name:	
*First Name and Middle Name:		*Primary Email:	
*Home Address:			
*City:		Province:	Postal Code:
*Home Phone:	Cell Phone:		Home Fax:
Date of Birth: <i>mm/dd/yyyy</i>	Gender: <input type="checkbox"/> M <input type="checkbox"/> F	Date of Exam (requested): <i>mm/dd/yyyy</i>	

### EXAMINATION CATEGORIES AND FEES

ALL CERTIFICATES/CREDENTIALS MUST BE REVIEWED BEFORE EXAM CAN BE BOOKED

HAIRDRESSING	ESTHETICS	NAIL TECHNOLOGY
<input type="checkbox"/> Fully Qualified Hairdressing Program  <input type="checkbox"/> Fully Qualified Barbering Program  Member price: \$150 + GST = \$157.50 Non-member price: \$250 + GST = \$262.50	<input type="checkbox"/> Fully Qualified Esthetics Program  Member price: \$150 + GST = \$157.50 Non-member price: \$250 + GST = \$262.50  <input type="checkbox"/> Fast Track Make-Up Artist <input type="checkbox"/> Fast Track Waxing  Member price \$100 + GST = \$105.00 Non-member price: \$150 + GST = \$157.50	<input type="checkbox"/> Fully Qualified Nail Technology Program  Member price: \$150 + GST = \$157.50 Non-member price: \$250 + GST = \$262.50

### CONFIRMATION OF HOURS

PLEASE ATTACH DOCUMENTATION WITH NUMBER OF SCHOOL HOURS TO THIS APPLICATION

School or Salon Name:	
School or Salon Location (city):	Number of Hours Completed to Date (copy of school diploma/certificate required):
Program/Apprenticeship Start Date: <i>mm/dd/yyyy</i>	Program/Apprenticeship End Date: <i>mm/dd/yyyy</i>
School Director, School Owner or School Administrator's Name:	Instructor or Trainer's Name and Signature:

### FOR OFFICE USE ONLY

Exam Application approval: \_\_\_\_\_

			CASH	M. ORDER	OTHER \$	CHEQ	DEB	VISA	M/C
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