

MISSISSIPPI STATE BOARD OF COSMETOLOGY

INITIAL LICENSURE APPLICATION, PART 2

(To be completed after passage of the written and practical examination)

This form must be completed and accompanied by the following items:

1. Score Sheet with passing grade (written and practical) NOTE: If you request MSBC to provide your written score report, the research fee will be an additional \$35.00. Both you and the school were previously provided these scores so these records should be easily available.
2. Cosmetology, Esthetician, Manicurist License Fee: \$50.00 (money order or check only)
3. Instructor License Fee: \$80.00 (money order or check only)
4. Two (2) passport photos (if photos were submitted by you or your school we do not require additional photos to be sent)

If this form is incomplete, it cannot be processed and will be returned to you.

Mailing Address:

Post Office Box 55689
 Jackson, MS 39296-5689
 Phone: 601-359-1820

Physical Address:

239 North Lamar Street, Suite 301
 Jackson, MS 39201
 Fax: 601-354-6639

Name				
Address (City, State, Zip)				
Social Security Number				
Phone Number				
Email Address				
License Type (check box)	Cosmetologist []	Esthetician []	Manicurist []	Instructor []

I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Signature: _____ Date: _____

For MSBC Use Only

Date Received:	Amount:
Registration #:	Approved By: