



MISSISSIPPI STATE BOARD OF COSMETOLOGY

OUT OF COUNTRY APPLICATION PROTOCOL

A. Eligibility Requirements Out-of-Country Practitioner

1. Any person who holds a current and valid license in good standing in another country's jurisdiction other than the United States in an occupation with a similar scope of practice, as determined by the occupational licensing board in Mississippi and has held this license from the occupational licensing board in the other foreign jurisdiction for at least one (1) year may submit an application for consideration. This consideration will be based on a case by case evaluation of the submitted documents. Validation must be provided for the following:
 - a. There were minimum education requirements and, if applicable, work experience, examination and clinical supervision requirements in effect, and the other foreign jurisdiction verifies that the applicant met those requirements in order to be licensed in that foreign jurisdiction; and
 - b. The applicant has not committed any act in the other foreign country that would have constituted grounds for refusal suspension, or revocation of a license to practice that occupation in Mississippi at the time the act was committed, and the applicant does not have a disqualifying criminal record as determined by the occupational licensing board in Mississippi under Mississippi law; and
 - c. The applicant did not surrender a license because of negligence or intentional misconduct related to the applicant's work in that occupation in the foreign jurisdiction; and
 - d. The applicant does not have a complaint, allegation or investigation pending before an occupational licensing board or other board in the foreign jurisdiction that relates to unprofessional conduct or an alleged crime. If the applicant has a complaint, allegation or investigation pending, the occupational licensing board in Mississippi shall not issue or deny a license to the applicant until the complaint, allegation or investigation is resolved, or the applicant otherwise satisfies the criteria for licensure in Mississippi to the satisfaction of the occupational licensing board in Mississippi; and
 - e. The applicant pays all applicable fees in Mississippi.

2. Any person who has successfully completed a course of training in a country other than the United States and have been licensed or registered to practice less than one (1) year OR have not been licensed will be required to meet all the requirements of the application including, but not limited to the in-state graduating theory and practical student examinations. These applications can be found on the website under the "Testing" tab.

The state's minimum requirements are:

Cosmetologist 1500 hours Manicurist 350 hours Esthetician 600 hours

- 3. The required documentation includes notification of intent, affidavit/certification of training, and affidavit/certification of current licensure.**
 - a. The affidavit/certificate of training. An affidavit or certification of the applicant's course of training must be submitted to the Board office by the board in the country or province in which the training was acquired. The affidavit/certification of training should, at a minimum contain:**
 - (1) Applicant's name and address**
 - (2) Applicant's Registration Number or license identification number (if applicable)**
 - (3) The course in which applicant was enrolled**
 - (4) Total clock hours earned**
 - (5) Date of completion or last attendance (Non licensed individuals only)**
 - (6) Information regarding current license (if applicable), including expiration date and whether the licensee is in good standing.**
 - b. The applicant must cause an certification of licensure to be issued by the board in which the license is held.**
 - c. The certifications must be mailed directly to the Board by the licensing authority, bear the seal of the licensing authority, or source verifiable, and bear at least one signature of an official of the licensing authority.**
 - d. In the event the information cannot be provided by the licensing authority, it may be obtained from the attendant school. In this case, the attendant school must submit the information directly to the Board. The information must: (1) be submitted in an envelope bearing the attendant school's letterhead, (2) bear the seal of the school or source verifiable, and (3) be certified by an agent of the attendant school. The Board reserves the right to deny Certification of Training submitted by a school if it is determined that the information can be provided by the appropriate licensing authority.**
- 4. The applicant shall complete the Out-of-Country Professional Licensing Application, the Out-of- Country Professional Licensing Affidavit, and the Theory and Practical Examination Applications if the applicant meets the requirements of A.2. above [not licensed or licensed less than one (1) year], and present the following documents:**
 - (a) Photographic identification.**
 - (b) Applicant must present two (2) current passport photographs to be attached to his or her application for approval. The person who is making application for must be recognizable in the photograph.**
 - (c) Applicant must present a government-issued photographic identification card which contains the applicant's signature and date of birth. In the event of a name change, legal proof of the change must be presented.**
 - (d) Two additional forms of identification must be presented by the applicant. In the event of a name change, legal proof of the name change must be presented.**
- 5. Any applicant who uses or proposes to use a specific device in any practice area of discipline, must present the required certification of proficiency attesting to proper training in the use of the instrument.**

B. Eligibility Requirements for Instructor









- 1. Any person who holds a current and valid instructor license in good standing in another country's jurisdiction other than the United States in an occupation with a similar scope of practice, as determined by the occupational licensing board in Mississippi and has held this license from the occupational licensing board in the other foreign jurisdiction for at least one (1) year may submit an application for consideration. This consideration will be based on a case by case evaluation of the submitted documents.**
 - a. There were minimum education requirements and, if applicable, work experience, examination and clinical supervision requirements in effect, and the other foreign jurisdiction verifies that the applicant met those requirements in order to be licensed in that foreign jurisdiction; and**
 - b. The applicant has not committed any act in the other foreign country that would have constituted grounds for refusal suspension, or revocation of a license to practice that occupation in Mississippi at the time the act was committed, and the applicant does not have a disqualifying criminal record as determined by the occupational licensing board in Mississippi under Mississippi law; and**
 - c. The applicant did not surrender a license because of negligence or intentional misconduct related to the applicant's work in that occupation in the foreign jurisdiction; and**
 - d. The applicant does not have a complaint, allegation or investigation pending before an occupational licensing board or other board in the foreign jurisdiction that relates to unprofessional conduct or an alleged crime. If the applicant has a complaint, allegation or investigation pending, the occupational licensing board in Mississippi shall not issue or deny a license to the applicant until the complaint, allegation or investigation is resolved, or the applicant otherwise satisfies the criteria for licensure in Mississippi to the satisfaction of the occupational licensing board in Mississippi; and**
 - e. The applicant pays all applicable fees in Mississippi.**

- 2. Any person who has successfully completed a course of training in a country other than the United States and have been licensed or registered as an instructor for less than one (1) year OR have not been licensed will be required to meet all the requirements of the application including, but not limited to the following:**
 - a. Must have completed twelve (12) semester hours in college courses approved by the Board.**
 - b. Must have the following hours of instructor training:**
 - (1) Cosmetologist – 1,000 hours of instructor training in a licensed school of cosmetology.**
 - (2) Esthetician – 1,000 hours of instructor training in a licensed school in which the practice of esthetics is taught.**
 - (3) Manicurist – 1,000 hours of instructor training in a licensed school in which the practice of manicuring is taught.**
 - c. Must have attended at least one mandatory Board approved "Methods of Teaching" seminar earning a minimum of five (5) continuing education hours.**

- 3. Eligibility requirements that must be met in order to apply for licensure: The required documentation includes notification of intent, affidavit/certification of training, and affidavit/certification of current licensure.**

- a. **The affidavit/certificate of training. An affidavit or certification of the applicant's course of training must be submitted to the Board office by the board in the country or province in which the training was acquired. The affidavit/certification of training should, at a minimum contain:**
 - (1) **Applicant's name and address**
 - (2) **Applicant's Registration Number or license identification number (if applicable)**
 - (3) **The course in which applicant was enrolled**
 - (4) **Total clock hours earned**
 - (5) **Date of completion or last attendance (Non licensed individuals only)**
 - (6) **Information regarding current license (if applicable), including expiration date and whether the licensee is in good standing.**
 - b. **The applicant must cause an certification of licensure to be issued by the board in which the license is held.**
 - c. **The certifications must be mailed directly to the Board by the licensing authority, bear the seal of the licensing authority, or source verifiable, and bear at least one signature of an official of the licensing authority.**
 - d. **In the event the information cannot be provided by the licensing authority, it may be obtained from the attendant school. In this case, the attendant school must submit the information directly to the Board. The information must: (1) be submitted in an envelope bearing the attendant school's letterhead, (2) bear the seal-of the school or source verifiable, and (3) be certified by an agent of the attendant school. The Board reserves the right to deny Certification of Training submitted by a school if it is determined that the information can be provided by the appropriate licensing authority.**
- 4. The application packet must be accompanied by:**
- a. **Two (2) recent passport photographs, taken within 90 days prior to application.**
 - b. **Proof of eligibility requirements.**
 - c. **An letter completed and signed by the board official in the country or province from which the current license is held, attesting to licensure status and any disciplinary action within the past five (5) years.**
 - d. **Certified transcript of completion of the course of training for which application for licensure is being made or an certification(s) attesting to education.**
 - e. **Certified original transcript evidencing successful completion of six (6) semester hours in college courses approved by the Board.**
 - f. **In the event of a name change, legal proof of the name change.**
 - g. **Copy of current practitioner's license.**
 - h. **Any applicant who uses or proposes to teach a specific device in any practice area of discipline must present the required certification of teaching proficiency from Mississippi or another country or province attesting to proper training in the use and/or teaching of the device.**
 - i. **Proof of completion of high school education or GED by way of certified high school transcript, certified GED transcript or other means as the Board may deem acceptable.**

OUT OF COUNTRY PROFESSIONAL LICENSING APPLICATION

TYPE OF LICENSE FOR WHICH YOU ARE APPLYING (check block)	 Cosmetology Check if you were licensed in a foreign jurisdiction for MORE THAN one (1) year (Law/Sanitation Exam Required)	 Esthetician Check if you were licensed in a foreign jurisdiction for MORE THAN one (1) year (Law/Sanitation Exam Required)	 Manicurist Check if you were licensed in a foreign jurisdiction for MORE THAN one (1) year (Law/Sanitation Exam Required)	 Instructor Check if you were licensed in a foreign jurisdiction for MORE THAN one (1) year (Law/Sanitation Exam Required)
	 Cosmetology - Check if you were NOT previously licensed or licensed LESS THAN one (1) year (Written and Practical Exams Required)	 Esthetician – Check if you were NOT previously licensed or licensed LESS THAN one (1) year (Written and Practical Exams Required)	 Manicurist – Check if you were NOT previously licensed or licensed LESS THAN one (1) year (Written and Practical Exams Required)	 Instructor – Check if you were NOT previously licensed or licensed LESS THAN one (1) year (Written and Practical Exams Required)
NAME (Last, First, Middle, Maiden)				
MAILING ADDRESS (Street / Post Office Box)				
CITY / PROVINCE				
STATE / COUNTRY				
ZIP				
EMAIL ADDRESS				
TELEPHONE NUMBER				
ALTERNATE TELEPHONE NUMBER				
DATE OF BIRTH				
HIGH SCHOOL GRADUATE		<input type="radio"/> YES, DATE: _____ <input type="radio"/> NO		
SOCIAL SECURITY NUMBER				

ARE YOU OR YOUR SPOUSE ACTIVE MILITARY	_____ YES _____ NO		
SCHOOL NAME IN WHICH TRAINING WAS REQUIRED			
SCHOOL CITY AND STATE/PROVIDENCE AND COUNTRY			
DATE OF COMPLETION OF THE PROGRAM			
PRACTITIONER LICENSE NUMBER FROM THAT STATE /PROVINCE		DATE ISSUED →	
INSTRUCTOR LICENSE NUMBER FROM THAT STATE / PROVINCE / FOREIGN COUNTRY, IF APPLICABLE	<input type="radio"/> NOT APPLICABLE	LICENSE NUMBER ↓	DATE ISSUED ↓
WERE ANY HOURS COMPLETED BY APPRENTICESHIP	<input type="radio"/> YES, Identify Total Amount _____ <input type="radio"/> NO		
ALL CANADIAN PROVINCES,US STATES OR FOREIGN COUNTRIES IN WHICH YOU HAVE EVER HELD A LICENSE (List All)			
HAVE YOU PREVIOUSLY FILED AN APPLICATION FOR LICENSURE WITH MISSISSIPPI	_____ YES _____ NO		
ARE YOU A CURRENT RESIDENT OF MISSISSIPPI	_____ YES _____ NO		
IF YES, STATE THE TYPE OF APPLICATION AND YOUR SUBMITTAL DATE	_____ Cosmetologist	_____ Esthetician	
	_____ Manicurist	_____ Instructor	
NAME IN WHICH THE APPLICATION WAS FILED			
HAVE YOU EVER BEEN CONVICTED OF A FELONY; IF YES, PLEASE DETAIL AND ATTACH	_____ YES _____ NO		
I WILL BE USING A SPECIFIC DEVICE IN ONE OF THE PRACTICE AREAS OF COSMETOLOGY	_____ YES _____ NO		

By signing this application for licensure, I certify that the information provided above is true and accurate under penalty of perjury.

Name

Date

**OUT OF COUNTRY PROFESSIONAL LICENSING AFFIDAVIT
FOR A PREVIOUSLY LICENSED APPLICANT**

STATE OF _____

COUNTY OF _____

I, the undersigned, _____ being duly sworn, hereby deposes and say:

1. I am over the age of 18 and have personal knowledge of the facts herein, and if called as a witness, could testify completely thereto.

2. I suffer no legal disabilities and have personal knowledge of the facts set forth below.

- a. I hold a current and valid license in good standing in the _____ which currently has a similar scope of practice and have held this license from the for a period of _____ years.
- b. I attest that I have completed minimum educational requirements, work experience, examination requirements and clinical supervision requirements in effect; or have been awarded a military occupational specialty in this profession;
- c. In support of this application, residence has been established by the following (check appropriate circle):
 - demonstrating proof of a state-issued identification card;
 - current Mississippi residential utility bill with applicant's name and address;
 - documentation of the applicant's current ownership or current lease of a residence in Mississippi;
 - documentation of current in-state employment or notarized letter of promise of employment of the applicant or his or her spouse; or
 - any verifiable documentation demonstrating Mississippi residency.

AND

- d. I have not committed any act in the other state that would have constituted grounds for refusal, suspension, or revocation of a license to practice that occupation in Mississippi at the time the act was committed and I do not have a disqualifying criminal record as determined by this Board under Mississippi law; and
 - e. I have not surrendered a license because of negligence or intentional misconduct related to my work in this, or any other, occupation in another state; and
 - f. I do not have a complaint, allegation or investigation pending before any licensing Board in Mississippi or any other state that relates to unprofessional conduct or an alleged crime; and
 - g. I have submitted a Professional Licensing Application submitted all required documents required y the out-of-country applicants; and
 - i. I have paid all applicable fees in Mississippi.
3. I understand that I will be required to pass the Mississippi State Board of Cosmetology Sanitation and Law Examination. Upon passage of the Sanitation and Law Examination within two (2) years from the issue date of the permit, a license shall be granted under the existing Out-of-Country Application for Licensure originally filed with the Board. Upon passage of the Sanitation and Law Examination after two (2) years from the issue date of the

permit, a new Out-of-Country Professional Licensing Application must be filed with the Board and new photographs submitted. However, the Temporary Practice Permit will expire 365 days after its original issue date and is non-renewable.

I further understand that I may practice under a Temporary Practice Permit for a maximum of 365 days after its issuance or until a license is granted or until a notice to deny the license is issued, in accordance with this protocol as adopted by the Mississippi State Board of Cosmetology.

Signed by the applicant, _____

This the _____ day of _____, 20_____.

NOTARY ACKNOWLEDGMENT

STATE OF _____

COUNTY OF _____

Notary Public

SEAL

My Commission Expires



MISSISSIPPI STATE BOARD OF COSMETOLOGY

OUT-OF-COUNTRY LICENSE VERIFICATION FORM – Sign & Send to Foreign Jurisdiction

Applicant: Complete Section I of this form if you have ever held a cosmetology, esthetician, or manicurist license in any state other than Mississippi OR any other country other than the United States. Forward one copy to each licensing agency where you have held OR currently hold a cosmetology, esthetician, or manicurist license. This form should be mailed to the Mississippi State Board of Cosmetology by the licensing agency completing the form. A fee may be required for processing. The fee is the applicant's responsibility.

Licensing Board / Agency: The Mississippi State Board of Cosmetology requires information regarding my license. This is my request for you to respond to the questions in Section II and also gives you authority to release any information, favorable or otherwise, to the Mississippi State Board of Cosmetology.

Section I: (for applicant only)

Name	Signature		
Address	City	State/Province	Zip
Date of Birth	Social Security No.		
License Number	State/Province and Country of Licensure		

Section II: (For Licensing Board/Agency only)

The Mississippi State Board of Cosmetology requires verification of this person's credential to practice be provided by all states in which the person listed above holds or has held a license, registration or certification. Please complete and return this form DIRECTLY to the Mississippi State Board of Cosmetology, P.O. Box 55689, Jackson, MS 39296.			
Where was the credential was issued		Agency Name	
Full Name of Credential Holder			
Credential Number		Type of Credential <input type="radio"/> License <input type="radio"/> Registration <input type="radio"/> Certification <input type="radio"/> Permit	
Issue Date	Expiration Date	Educational Hour Requirements	
Where did the applicant graduate from cosmetology school?	Is this school in your State/Province/Country? <input type="radio"/> Yes <input type="radio"/> No If so, is it currently approved in your State/Province/Country? <input type="radio"/> Yes <input type="radio"/> No		

Respond to the following questions: If YES is answered to any question 3 – 8, please attach explanation.

#	QUESTION	YES	NO	#	QUESTION	YES	NO
1	Is the license current?			5	Do your files indicate any derogatory information (fines, violations, etc.)?		
2	Is the license in good standing?			6	Have you received any complaints against this professional?		
3	Have any charges ever been filed against this professional?			7	Has this professional been investigated by your Board?		
4	Do you know of any information that may discredit this professional?			8	Type of License: <input type="radio"/> Cosmetologist <input type="radio"/> Esthetician <input type="radio"/> Manicurist <input type="radio"/> Instructor		

Authorized Signature: _____

Date of Signature: _____

BOARD SEAL