



MISSISSIPPI STATE BOARD OF COSMETOLOGY  
OUT OF STATE/OUT OF COUNTRY  
LICENSE VERIFICATION FORM  
Post Office Box 55689  
Jackson, MS 39296-5689

**Please complete, sign, and 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 gives you authority to release any information.

Section I - Applicant	
Name	
Address	
Social Security Number	
Date of Birth	
License Number	
State/Province and Country of Licensure	
Signature	

<b>Section II - Licensing Board/ Agency</b>	
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 at the address notated above.	
Agency Name	
Where was the license issued?	
Full <b>Name</b> of Licensee	
Licensee's address	
License Number	
Type of License	License                      Registration                      Certification                        Permit
Issue Date	
Expiration Date	
Total Clock Hours earned by Licensee	
Where did the licensee graduate/attend from school?	
Is this school in your State/ Providence/ Country?	
Is yes, is it currently approved in your State/ Providence/ Country?	
When did the licensee complete/last attend school?	
Is the license current?	
Is the license in good standing?	
Type of License	Cosmetologist                      Esthetician                      Manicurist                      Instructor

<b>If YES is answered to an=y question below - please attach explanation.</b>	
Have any charges ever been filed against this professional?	
Do you know of any information that may discredit this professional from obtaining a Mississippi license?	
Has this professional ever been fined, assessed a violation, or otherwise disciplined?	
Have you received any complaint(s) against this professional?	
Has this professional been investigated by your Board?	

\_\_\_\_\_  
Signature of Licensing Board / Agency

\_\_\_\_\_  
Date

