



The Palm Beauty Academy

2020 Student Enrollment Packet

314 Goff Mountain Rd. Suite 2 Cross Lanes, WV 25313

Welcome

Dear Prospective Student,

We are so excited that you are interested in attending our school and furthering your education to begin a new and exciting career. Orientation is MANDATORY, you will be given further information once enrolled.

Below you will find a list of items you will need to submit to enroll in classes. All paperwork should be turned into the office as soon as possible so you can be registered with the West Virginia State Board of Barbers & Cosmetologists:

- Student Registration Application
- Certificate of Health Form completed by a physician, physician's assistant, or a nurse practitioner (within last 12 months) clearing the applicant to perform services on the general public
- \$25.00 check or money order made out to the WV State Board of Barbers and Cosmetologists (non-refundable)
- (2) copies of your Driver's License or Picture ID (in color)
- (2) copies of your Social Security Card (in color)
- (2) recent photos of yourself (2"x2") (from neck up/ full face)
- (2) copies of your High School Diploma, Transcript, or GED*
- Documentation showing any name change

PRE-ENROLLMENT PLANNING

We can't wait to have you as a student. Prior to enrolling, we hope you understand that attending school will be a major step for you and will require dedication on your part. You will be required to attend school a certain number of hours every week, be punctual, studious and attentive. Prior to enrollment, we want you to be sure that you have the desire and dedication to attend and complete school. You must make certain that you have transportation, housing and, if necessary, daycare for your children, as these are crucial factors affecting attendance.

We would recommend that you visit the school in order for you to familiarize yourself with our programs.

Please ask us any questions you may have.

Prospective Student Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

When are you available to start school: _____

High School Graduate? ____ (Y) ____ (N) GED? ____ (Y) ____ (N)

Currently a Student? ____ (Y) ____ (N)

School Name: _____ Grade: _____

Have you previously attended another school? ____ Yes ____ No

If you answered yes, please furnish the name and address of the school, whether or not you completed or graduated and if you did not complete, please state the reason why: _____

Why did you choose to attend our school? _____

What are your goals for your future? _____

By signing this document, the student acknowledged that this application is not a guarantee of acceptance into The Palm Beauty Academy.

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

PRE-ENROLLMENT INTERVIEW

Prior to enrollment, we are required to provide our prospective students with certain information, which will enable them to clearly understand the opportunities, limitations and obligations in order for them to make an informed decision about attending our school. Your signature below certifies that you have read and understand all of the information that follows, and that all of your questions have been answered.

- 1. Compensation a Successful Graduate May Reasonably Expect:** Upon successful completion of your program and obtaining licensure, you will then be eligible to seek employment in the salon. There are many factors to consider when making your determination regarding employment; the location of the salon, the salon size, price for services, hours you are willing to devote, insurance, vacations etc. Some of you may be from rural areas and will decide to return there to seek employment and some may remain in town. Booth rental is very popular in the salon today. It has its benefits and drawbacks; however, we do not recommend that a new operator booth rent or open a salon, but that they seek employment in a salon that will be willing to assist them with building their clientele, expand their knowledge and training and offer a guaranteed salary in the beginning. In our area, a new operator with the determination to succeed and working a full weekly schedule (40 hours) can normally depend upon \$200 to \$250 per week in the beginning. Depending on the client flow in the salon, and returning clientele, your income will steadily increase. The beginning of your new career will possibly be difficult, and you should allow yourself a minimum of two years to build your business. With passion, hard work and dedication, you can overcome any obstacles and can achieve great success, no matter the timeframe.
- 2. Physical Demands of the Profession:** We advise our students that they are entering a service oriented industry, and they must be dedicated and willing to work hard and possibly long hours to build their clientele. A Cosmetologist or Hair Stylist will be standing on their feet, whereas, a nail technician or aesthetician will be sitting down, both of which can put a strain on your back and feet. You must wear good shoes at all times and practice good posture. Many operators book their clients at regular intervals, and many work through what most would consider a "lunch break." We stress to them the importance of good nutrition, attention to diet and regular exercise. The beauty industry can be a demanding profession. However, the rewards can also be fantastic.
- 3. (OSHA) Safety Requirements for the Profession:** In the beauty/nail tech/skin care industry, you will come in contact with various products and chemicals. During your attendance, you will become familiar with these products and chemicals. It will be to your benefit and advantage to always familiarize yourself with all the chemicals and products you will be using. You should always have available your Material Safety Data Sheets (MSDS), which are required by the Occupational Safety Hazard Administration (OSHA) for all your products and chemicals. Also, you will be using electrical equipment (hair dryers, blow dryers, curling irons, nail drills, skin care machines). Always make sure that all equipment is in good working order. Being knowledgeable about your products, chemicals and the correct use of electrical equipment will enable you to remain safe and protect your client from harm.
- 4. Licensing Requirements:** Our school is regulated by the West Virginia State Board of Barbers and Cosmetologists. The Cosmetology Course 1800 clock hours in length; the Hair Styling Course is 1000 clock hours in length; the Aesthetics Course is 600 clock hours in length; and the Manicuring Course is 400 clock hours in length. Upon enrollment, a completed State Board Application will be forwarded to the board for issuance of a Student Permit. During your attendance, hours will be reported to the board on a monthly basis. Upon completion of your required hours, a State Board Application with final grades and total hours, will be forwarded to the State Board along with the appropriate fee for examination. The board will then notify you for scheduling for examination. Upon successfully passing your State Board exam you will then be eligible for your license. License fees are \$35.00 per year and are due for renewal by January 1st of each year.

Initial _____

ENROLLMENT APPLICATION

Personal & Confidential Information

Name: _____ Date of Birth: _____ Soc. Sec. No.: ____/____/____

Physical Address: _____

City: _____ State: _____ Zip: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Driver's License #: _____ State: _____

Number of Children: _____ Ages: _____

How far do you live from school? _____

Are you: _____ Right Handed _____ Left Handed _____ Ambidextrous

How do you classify your ethnicity: (to be used for government reporting purposes only)

- ___ Hispanic or Latino
- ___ American Indian or Alaska Native Asian
- ___ African American
- ___ Native Hawaiian or Pacific Islander
- ___ Caucasian
- ___ Race and ethnicity unknown

High School Attended: _____ Year Graduated: _____

If non-grad: Grade Completed: _____ Do you have a GED? _____ (Y/N)

Have you attended another school beyond high school? _____ (Y/N)

If yes: School Name: _____ Dates Attended: _____

Have you been convicted of a felony or misdemeanor, (excluding moving violations)? _____ (Y/N)

If you answered yes, please state the nature and date of the offense(s): _____

Continued...

The Palm Beauty Academy

2020 Student Enrollment Packet

Emergency Contact Information

Name: _____ Email: _____ Cell: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Parent/Guardian: _____ Email: _____ Cell: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Father's Employment: _____ Employer's Address: _____

Mother's Employment: _____ Employer's Address: _____

Due to recent events, such as the West Virginia American Water's water emergency, AEP's power outage, and inclement weather which can force the closure of The Palm Beauty Academy unexpectedly, we would like to know the best form of communication in the event of an emergency to contact you.

How would you prefer to be contacted in the event of an emergency?

Cell ____ E-mail ____ Both ____

Student General Information

Why did you choose to attend our school? _____

How did you hear about our school? _____

When do you wish to begin school? _____

List your hobbies or special interests: _____

Student Signature: _____ **Date:** _____

Parent/Guardian Signature: _____ **Date:** _____

DRESS CODE

ALL STUDENTS:

Students are required to wear scrubs. If your uniform is of a light color, then you must wear appropriately colored under garments which do not show through your uniform.

Student uniforms must fit properly and professionally. Uniforms may not be too loose, droopy and baggy, nor may they may be too tight and revealing. Uniforms may be neither too long nor too short; pants and shirts may neither hang down nor ride up; pants must come down to the top of your shoes but be at least one inch off of the ground.

Shoes must be clinic shoes or tennis shoes of a solid uniform color (black or white). Socks must be worn at all times. You may not wear open toes shoes, sandals, or open back shoes.

- Cosmetologist: Purple Scrubs
- Hair Stylists: Light Purple Scrubs
- Manicuring: Black Scrubs
- Aesthetics: White Scrubs

Aprons/Smocks must be worn when giving a chemical service. If you do not bring a smock with you, you will be required to purchase one. Smocks may be purchased in the office.

During the Winter: long-sleeve white or black crew neck shirt under scrub top is an option. Hoodies and prints will not be allowed.

THIS DRESS CODE WILL BE STRICTLY ENFORCED WITH NO EXCEPTIONS!

Student may be sent home by any staff member for failure to follow dress code.

By signing this document, the student acknowledged that they have read and understand the requirements of The Palm Beauty Academy's dress code policy.

Student Signature: _____ **Date:** _____

Parent/Guardian Signature: _____ **Date:** _____

ATTENDANCE POLICY

ATTENDANCE

In order to help you prepare for your career in the salon/spa industry, The Palm Beauty Academy will operate in a professional salon environment. Tardiness, absences and any other interruptions in training will have a significant impact on student achievement and success. If a student has a medical condition that prevents him/her from performing services or could potentially cause harm to oneself or another, a medical clearance to return to school from a doctor will be required to actively participate in hands-on activities and perform services. The student may observe and receive course instruction during this time.

By law, The Palm Beauty Academy must keep track of the training hours for each student preparing for his/her license. All students are expected to be in attendance for the time periods specified in their signed enrollment agreement. Our training is similar to an actual salon, day spa, or any other professional employment opportunity, where absences and tardiness interfere with daily work efficiency and overall employee record.

- Any student absent during the first week of a new class start may be moved back to the next class start.
- Any cosmetology program student missing more than 24 hours during basic training may be withdrawn and may be considered for re-enrollment at the next class start date.
- Students are expected to notify the school of any absence or tardiness at least 30 minutes prior to their scheduled start time.
- Students late for clinic may clock in at the time they arrive. Students late on theory day may clock in during the first class break.
- If a student that has an absence/tardiness has clients booked during the absence, the instructors or staff may move those clients to other students.
- Any students that do not notify the school of their absence/tardiness will be counseled and proper documentation will be completed.
- Any student who has 14 consecutive calendar days of absences will be administratively withdrawn from school (see Cancellation and Refund Policy in the school catalog).
- Any student who is present for 5.5 hours or more in a day is required to take a 30-minute lunch break.
- Any student who attends class is eligible for a 15-minute break.
- Any student who is present for less than 5.5 hours in a day is eligible for one 15-minute break.

The Palm Beauty Academy

2020 Student Enrollment Packet

All students scheduled on the clinic floor are required to sign out for breaks on the appropriate Student Break Sheet and must also notify their clinic instructor. All students must be present for at least two hours before clocking out for a lunch break and must be present for at least one hour before taking a 15-minute break. Disciplinary action is at the discretion of the director.

The minimum acceptable level of attendance is, at least, eighty percent (80%) of their contracted time. The Academy and the State Board monitor monthly attendance. A student whose absences exceed twenty percent (20%) is subject to dismissal from The Palm Beauty Academy. For the purposes of determining the level of attendance, only the days contracted are counted.

Unexcused time includes, but is not limited to, extended lunch, tardiness and absences without documentation. Valid reasons for absences include:

- A court appearance
- Medical excuse for the student, or dependent
- A death in the immediate family.
- Any other excuse that has been pre-authorized or approved with the office.

When a student is aware in advance that an absence is necessary, he or she must inform office staff.

Please note: Failure to contact the school may result in non-acceptance of documentation for an otherwise excused absence. Documentation of excused absences will be filed in the student's permanent record. Such documentation is required within seven (7) days from the student's date of return to class. Unexcused absences may result in disciplinary action and may lead to expulsion.

Attendance Tracking System

A Biometric thumbprint time keeping system is the modality used for attendance recording for all students. Students will be fingerprinted on their first day at The Palm Beauty Academy. The Student will then use this fingerprint as identification to clock in and out with our biometric time clock. This biometric clock ensures that students cannot clock in or out for each other, and that all student hours reported have been completed by the student.

Students should arrive at the school allowing enough time to put away belongings, jackets, purses, etc. before class begins.

By signing this document, the student acknowledged that they have read and understand the requirements of The Palm Beauty Academy's attendance policy.

Student Signature: _____ **Date:** _____

Parent/Guardian Signature: _____ **Date:** _____

TUITION & FEE SCHEDULE

COURSE	TUITION	KIT, BOOKS & TOOLS	APPLICATION FEE	ADDITIONAL FEES	TOTAL COST	APPROX. WEEKS
Cosmetology	\$11,164	\$2,000	\$100	\$361	\$13,625	45
Hair Styling	\$6,275	\$1,000	\$100	\$361	\$7,736	28
Aesthetics	\$5,034	\$1,350	\$100	\$361	\$6,845	15
Manicuring	\$2,650	\$1,000	\$100	\$361	\$4,111	10

** Estimated charges for the period of attendance and the entire program. Schedule could have additional weeks due to vacation, holidays, snow days, etc.

Textbooks

- Cosmetology: Milady Standard Cosmetology
- Milady Standard Theory Workbook
- Milady Standard Practical Workbook
- Milady Online Prep
- Milady Course Mate
- Manicuring: Milady Standard Nail Technology
- Milady Student Workbook
- Milady Exam Review
- Esthetician: Milady Standard Comprehensive Training for Estheticians
- Milady Workbook for Estheticians
- Milady Skin Care and Cosmetic Ingredients Dictionary
- Milady Skin Care Course Mate
- Milady Esthetician Online Prep

The institution is not aware of any information with regard to renting textbooks or purchasing used textbooks. There is not an alternative delivery program to the textbooks' content at this time.

Student Signature: _____ **Date:** _____

Parent/Guardian Signature: _____ **Date:** _____

The Palm Beauty Academy

2020 Student Enrollment Packet

FINANCIAL AGREEMENT

STUDENT INFORMATION

Student Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Cell: _____ Date of Birth: _____

E-mail: _____

PROGRAM INFORMATION:

Program: _____ Start Date: _____

Program Length: _____ (Specified in clock hours)

TUITION:

COURSE	TUITION	KIT, BOOKS & TOOLS	APPLICATION FEE	ADDITIONAL FEES	TOTAL COST	APPROX. WEEKS
Cosmetology	\$11,164	\$2,000	\$100	\$361	\$13,625	45
Hair Styling	\$6,275	\$1,000	\$100	\$361	\$7,736	50
Aesthetics	\$5,034	\$1,350	\$100	\$361	\$6,845	15
Manicuring	\$2,650	\$1,000	\$100	\$361	\$4,111	10

** Estimated charges for the period of attendance and the entire program.

The non-refundable application fee must accompany the enrollment agreement to secure a space in the program. The Kit and additional fees must be paid before the start of the program.

Student Initial _____

The Palm Beauty Academy

2020 Student Enrollment Packet

TUITION PAYMENTS: (These options are available to all students)

1. A payment of \$**100.00** is due with signing of the enrollment agreement.
2. A payment of \$ _____ (**kit, books, tools**) is due before your scheduled start date.
3. Balance of tuition options:
 - a) Paid in full up front
 - b) Balance to be paid in **monthly or weekly** installments in the amount of \$ _____.
 - c) WV Workforce Recipients: We will send invoices to Workforce, anything unpaid by them is your responsibility.

Tuition must be paid in full by the end of the program.

Refund Policy-Notice of Cancellation

For applicants who cancel enrollment or students who withdraw from enrollment a fair and equitable settlement will apply. The following policy will apply to all terminations for any reason, by either party, including student decision, course or program cancellation, or school closure. The student or formal termination by the school, which shall occur no more than 45 days from the last day of physical attendance, or in the case of a leave of absence, the documented date of return, shall refund any monies due the applicant or student within 45 days of formal cancellation. Official cancellation or withdrawal shall occur on the earlier of the dates that:

1. An applicant is not accepted by the school. The applicant shall be entitled to a refund of all monies paid except a non-refundable application of \$100.00
2. A student cancels his/her enrollment prior to starting classes. He/she shall be entitled to a refund of all monies paid to the school less the application fee in the amount of \$100.00
3. A student notifies the institution of his/her withdrawal in writing.
4. A student on an approved leave of absence notifies the school that he/she will not be returning. The date of withdrawal shall be the earlier of the date of expiration of the leave of absence or the date the student notifies the institution that the student will not be returning.
5. A student is expelled by the school. (The institution will determine unofficial withdrawals by monitoring attendance at least every 30 days.)
6. In type 2, 3, 4 or 5, official cancellations or withdrawals, the postmark on the written notification will determine the cancellation date, or the date said notification is delivered to the school administrator or owner in person.

For students who enroll and begin classes but withdraw prior to course completion (after three business days of signing the contract), the following schedule of tuition earned by the school applies. All refunds are based on scheduled hours:

Student Initial _____

The Palm Beauty Academy

2020 Student Enrollment Packet

PERCENTAGE TIME TOTAL/ TIME OF COURSE	AMOUNT OF TOTAL TUITION DUE TO THE SCHOOL
0.01% TO 04.9%	20%
5% TO 9.9%	30%
10% TO 14.9%	40%
15% TO 24.9%	45%
25% TO 49.9%	70%
50% AND OVER	100%

- All refunds will be calculated based on the students last date of attendance. Any monies due a student who withdraws shall be refunded with 45 days of a determination that a student has withdrawn, whether official or unofficially.
- In the case of disabling illness or injury, death in the student's immediate family or other documented mitigating circumstances, a reasonable and fair settlement will be made.
- If permanently closed or no longer offering instruction after a student has enrolled, the school will provide a prorated refund of tuition to the student OR provide course completion through a prearranged teach out agreement with another institution.
- If the course is canceled subsequent to a student's enrollment, the school will either provide a full refund of all monies paid or completion of the course at a later time.
- If the course is cancelled after the students have enrolled and instruction has begun, the school shall provide a prorated refund for all students transferring to another school based on the hours accepted by the receiving school OR provide completion of the course OR participate in Teach-Out Agreement OR provide full refund of all monies paid.
- This refund policy applies to tuition and fees charged in the enrollment agreement. Other miscellaneous charges the student may have incurred at the institution (extra kit materials, books, products, unreturned school property, unpaid CE courses, etc.) will be calculated separately at the time of withdrawal.

Books, supplies and fees: If your kit/books/uniforms were ordered before you cancel/withdraw you will not be refunded for those expenses. You will be given your kit/books and uniforms when they come in.

Overage/Overtime

Overtime is defined as additional time for completion of the course in which students are enrolled beyond their stated contract date. Students will be responsible for paying additional tuition at the rate of \$40.00 per day or any portion of a day. This will be calculated on the number of hours the student still needs to complete at the end of their contract date based on the number of hours per week scheduled in the course in which the student is enrolled.

Student Initial _____

The Palm Beauty Academy

2020 Student Enrollment Packet

Holder in Due Course Statement:

Any holder of this consumer credit contract is subject to all claims and defenses which the debtor could assert against the seller of goods or services obtained pursuant hereto or with the proceeds, hereof Recovery hereunder by the debtor shall not exceed amounts paid by the debtor (FTC Rule effective 5-14-76).

THE STUDENT UNDERSTANDS:

1. The School does not guarantee job placement to graduates upon program/course completion or upon graduation.
2. The School reserves the right to reschedule the program start date when the number of students scheduled is too small.
3. The School will not be responsible for any statement of policy or procedure that does not appear in the Student Handbook or Enrollment Agreement.
4. The School reserves the right to discontinue the student's training for unsatisfactory progress, nonpayment of tuition or failure to abide by School rules.
5. Information concerning other Schools that may accept the School's credits toward their programs can be obtained by contacting Amanda Cunningham. It should not be assumed that any programs described in the School catalog could be transferred to another institution. The School does not guarantee the transferability of credits to a college, university or institution. Any decision on the comparability, appropriateness, and applicability of credits and whether they should be accepted is the decision of the receiving institution.
6. This document does not constitute a binding agreement until accepted in writing by all parties.

Student initial _____

STUDENT ACKNOWLEDGEMENTS:

1. I hereby acknowledge receipt of the Student Handbook, which contains information describing programs offered, and equipment/supplies provided. The Student Handbook is included as a part of this enrollment agreement, and I acknowledge that I have received a copy of this. _____
Student initials
2. In addition, I have carefully read and received an exact copy of this enrollment agreement.
_____ *Student initials*
3. I understand that the School may terminate my enrollment if I fail to comply with attendance, academic and financial requirement or if I disrupt the normal activities of the School. While enrolled in the School; I understand that I must maintain Satisfactory Academic Progress as described in the Student Handbook and that my financial obligation to the School must be paid in full before a certificate/license may be awarded.
_____ *Student initials*
4. I also understand that this institution does not guarantee job placement to graduates upon program/course completion or upon graduation.
_____ *Student's initials*
5. I understand that if I need additional time for completion of the course in which I am enrolled, beyond my stated contract date, I will be responsible for paying additional tuition at the rate of \$40.00 per day or any portion of a day.
_____ *Student's initials*

The Palm Beauty Academy

2020 Student Enrollment Packet

CONTRACT ACCEPTANCE:

I, the undersigned, have read and understand this agreement and acknowledge receipt of a copy. It is further understood and agreed that this agreement supersedes all prior or contemporaneous verbal or written agreements and may not be modified without the written agreement of the student and the School Official. I also understand that if I default upon this agreement I will be responsible for payment of any collection fees or attorney fees incurred by The Palm Beauty Academy.

My signature below signifies that I have read and understand all aspects of this agreement and do recognize my legal responsibilities concerning this contract.

Signature of Student

Date

Signature of School Official

Date

Representative's certification:

I hereby certify that the above names student has been interviewed by me and in my judgment, meets all requirements for acceptance as a student. I further certify that there have been no verbal or written agreements or promises other than those appearing on this agreement.

By: _____

Date: _____

Student initial _____



State of West Virginia
Board of Barbers and Cosmetologists
1201 Dunbar Avenue
Dunbar, WV 25064

Tel: (304) 558-2924
Fax: (304) 558-3450
www.wvbbc.com

STUDENT REGISTRATION APPLICATION

Please include the items below:

- \$25.00 Registration Fee Copy of Social Security Card Completed Certificate of Health form
 Passport-sized Photo Copy of Photo ID

REGISTRATION TYPE

- 1st Time Registration
 Re-Enrollment
 Transfer
 Course Change

COURSE REGISTRATION

- Cosmetology Nail Technology
 Barber Aesthetics
 Waxing Hair Styling

STUDENT START DATE

SCHOOL NAME

STUDENT INFORMATION

SSN #

DATE OF BIRTH

FIRST NAME

MIDDLE NAME

LAST NAME

ADDRESS

PHONE #

CITY

ZIP CODE

COUNTY OF RESIDENCE

EMAIL

APPLICANT NOTICE

***Certificate of Health form must be completed within the last 12 months.**

***If your first, middle, or last name differ on any documentation, you must submit proof of name change (copy of marriage certificate/license or an official court document).**

*** All applicants for initial licensure or certification to practice barbering, cosmetology, nail technology, aesthetics, hair styling, or waxing must meet the requirements for licensure or certification according to the provisions of Chapter 30, Article 27, Code of West Virginia.**

Please tape or glue photograph here.

The signatures below from the student and school manager/owner/administrator indicate that the student has enrolled during study referenced above and that the student has met the minimum requirements to enroll as a student in accordance to Chapter 30, Article 27 of West Virginia State Code. The signature of the school manager/owner/administrator affirms that the student will not commence studies without first obtaining a student registration as required by law.

Student Signature

Date Signed

School Authorized Signature

Date Signed

Revised: April 7, 2020



State of West Virginia
Board of Barbers and Cosmetologists
1201 Dunbar Avenue
Dunbar, WV 25064

Tel: (304) 558-2924
Fax: (304) 558-3450
www.wvbbc.com

Certificate of Health Form

To the Health Care Professional:

This form should be used for patients who need to be examined by a physician, physician's assistant or a nurse practitioner to apply for a professional license, certificate, registration or permit in the barbering, cosmetology, aesthetics, nail technology, hair styling or waxing industry. Please complete the below portion of this form and sign and date the form.

To the Applicant:

You need to have a physical examination to apply for a professional license, certificate, registration or permit in barbering, cosmetology, aesthetics, nail technology, hair styling or waxing. Your physician, physician's assistant or a nurse practitioner must complete, sign and date this Certificate of Health form. You must submit your application within one (1) year from the date of this examination.

Certificate of Health:

I am a duly licensed Physician , duly licensed Physicians Assistant , or duly licensed Nurse Practitioner , and hereby

state that in the course of a routine examination of _____, on
(Applicant's Name)

_____, I found no clinical evidence of the presence of infectious or
(Date of Physical Examination)

communicable disease which would pose a significant risk or direct threat to the health or safety of members of the public in the conduct of the applicant's occupation.

Print Name of Physician: _____ Date: _____

Address of Practice: _____

Physician's Signature: _____ Title: _____