Pre-ENROLLMENT APPLICATION FORM

The first step for becoming a student at Louisiana Barber Academy is to complete this application and submit it along with the documents listed on page two to the Owner/Instructor: Jason Walker. Please take time to visit our website @ louisianabarberacademy.com to view our Student Handbook for detailed information about the programs offered, costs, expectations, and policies.

PLEASE PRINT ALL INFORMATION NEATLY

PERSONAL INFORMATION

Full Name: _____

Date of Birth: ____ / ____ / ____ **Age:**_____ **Social Security Number:** _____

Gender: Male ____ **Female** ____ **Other**____ **Race:**_____ **Single:** ____**Married:** ___**Divorced:**____

Address: Street_____City_____ State_____ Zip Code_____

CellPhone Number: _(_____)_____ **Email Address:** _____

EMERGENCY CONTACT INFORMATION

Contact #1

Name: _____**Relationship:** _____

Phone Number: _(_____)_____

Contact #2

Name: _____**Relationship:** _____

Phone Number: _(_____)_____

EDUCATIONAL BACKGROUND

High School Name: _____ **City/State of High School**_____

Graduation Year/GED Completion: _____

Additional Education (if any): _____

If you have not graduated from high school yet, what is your expected date of graduation?_____

Have you attended a barber or cosmetology school before? Yes_____ No_____

If yes, name of school _____

PROGRAM INFORMATION

Which program are you interested in? ___Barbering ___Barber Instructor ___Cosmetology Crossover

Preferred Start Date: ____ / ____ / _____ **Desired Schedule:** _____Full Time _____Part Time

ADDITIONAL INFORMATION

Why do you want to pursue a career in barbering or become a barber instructor?

_____

_____

Do you have any prior experience in hair cutting or styling? _____ Yes _____ No
If yes, please describe: _____

_____

Were you in a barbering program before? _____ Yes _____ No
If yes, what school did you attend and how many hours do you have?

_____

_____

How did you hear about us?_____

DOCUMENTS REQUIRED TO SUBMIT THIS APPLICATION FOR THE BARBER/STYLIST PROGRAM

- Copy of Birth Certificate
- Copy of Social Security Card
- Two passport photographs of the student-Can be printed at Walgreens
- High school diploma **AND** transcript showing graduation date or a passing grade on equivalence test (GED)
- $25 NON -REFUNDABLE application fee

DOCUMENT REQUIRED TO SUBMIT THIS APPLICATION FOR THE COSMETOLOGY CROSSOVER PROGRAM:

- Copy of valid Louisiana Cosmetology License
- $25 NON -REFUNDABLE application fee

DOCUMENT REQUIRED TO SUBMIT THIS APPLICATION FOR THE BARBER INSTRUCTOR PROGRAM

- Copy of valid Louisiana Barber's License (**FOR BARBER INSTRUCTOR PROGRAM ONLY**)
- $25 NON -REFUNDABLE application fee

Payment methods accepted: cash, credit or debit card(4% processing fee for card transactions), money order, cashier's check made payable to Louisiana Barber Academy. No personal checks accepted.

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that providing false information may result in denial of admission or dismissal from the program.

The Application for Enrollment will not be accepted without the required documents and the $25 non-refundable application fee.

Applicant's Signature: _____ **Date:** ____ / ____ / _____

FOR OFFICE USE ONLY ***(Do not write below this line)***
Date Received: ____ / ____ / _____

Application Fee Paid: _____ Yes _____ No Payment Method Used:_____

Staff Signature: _____ **Date:**_____