**MOLER BARBER COLLEGE OF HAIR STYLING**

16 South 8th Street, Fargo, North Dakota 58103, 701-232-6773 [www.molerbarberfargo.com](http://www.molerbarberfargo.com)

Andrew Storkamp, President Mary Cannon, Director

Dear Interested Student,

Our complete course consists of 1550 clock hours of practical and theory instruction which is approximately ten (10) months. We offer students the opportunity to begin their course any time of year, providing there is an opening. Our maximum enrollment is 12 students and tuition costs are $9,000.00.

Tuition includes books, uniforms, permit and tool kit. The total does not include $220.00 fee for the State Exam and North Dakota Master Barber License.

School is held Monday through Friday from 8:15 to 5:30, full time only. The school does not offer any part-time program.

The course of Barbering is in-depth hair cutting. We begin students on real customers and you work on clientele continually every day until you have your 1550 hours clocked. You will learn to give face shaves, beard trims, facials, scalp massages, hair coloring, manage your own business, and most important of all how to approach and handle people to keep them as customers in your own shop. We have an hour of theory class each morning, then students perform hair services on customers all day long. It is a casual atmosphere and a fun one.

Graduation and employment rates for students enrolled during the period of July 1, 2016 – June 30, 2017, a total population base of 16 enrolled, one student withdrew/terminated and 6 graduated. Of the 6 graduates, 100% were employed in the field of barbering.

To qualify for enrollment, students must be at least 17 years of age, hold a high school diploma or GED, and be drug-free. This is a drug-free school and students may be required to take random drug tests during the duration of their enrollment. Applications for enrollment should be made through a personal interview and tour of the school. During the school tour, applicants will receive a copy of the school’s most recent Campus Security Report. Mary Cannon is the school official designated for Title IX compliance purposes. Financial Aid is available if you qualify. FAFSA applications are available on-line at [www.fafsa.ed.gov](http://www.fafsa.ed.gov) and our school code is #016929. If you have any further questions, please contact me.

Sincerely,

Mary Cannon

School Director

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**APPLICATION FOR ADMISSION**

**NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ BIRTHDATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE \_\_\_\_\_\_ ZIP \_\_\_\_\_\_\_\_\_\_\_\_\_**

**PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**E-MAIL ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NAME OF PARENT / GUARDIAN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EMERGENCY NOTIFICATION \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EDUCATION – HIGH SCHOOL NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE \_\_\_\_\_\_\_\_\_\_\_ COUNTRY \_\_\_\_\_\_\_\_\_\_\_\_\_**

**DIPLOMA \_\_\_\_\_YES \_\_\_\_\_ NO GRADUATION YEAR \_\_\_\_\_\_\_\_ GED \_\_\_\_\_\_\_\_ YEAR \_\_\_\_\_\_\_\_**

**COLLEGE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DEGREE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**MILITARY SERVICE – BRANCH \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**YEARS OF SERVICE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TYPE OF DISCHARGE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ARE YOU IN DEFAULT OR DELINQUENT ON A STUDENT LOAN? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DUE YOU OWE A REFUND ON A PELL GRANT? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HAVE YOU EVER BEEN CONVICTED OF A FELONY? \_\_\_\_\_ YES \_\_\_\_\_ NO**

**IF YES, DETAILS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DO YOU USE DRUGS? \_\_\_\_\_YES \_\_\_\_\_ NO**

**HOW DID YOU HEAR ABOUT OUR SCHOOL? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HOW DO YOU PLAN TO FINANCE YOUR EDUCATION? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\*Enclose $100 application fee, copy of high school diploma, and 2 photos of yourself**

**APPLICATION FOR**

**PERMIT AS A STUDENT IN BERBER SCHOOL**

STATE OF NORTH DAKOTA

COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ BEING SWORN SAY: THAT I AM A RESIDENT OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, STATE OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, STREET \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ OR POST OFFICE BOX \_\_\_\_\_\_\_\_\_\_\_\_\_\_ AND I AM \_\_\_\_\_\_\_\_\_\_\_\_\_ YEARS OF AGE.

THAT I WAS BORN IN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

THAT I HAVE COMPLETED AT LEAST FOUR (4) YEARS OF HIGH SCHOOL EDUCATION OR EQUIVALENT AND I HEREWITH TENDER TO THE BOARD A CERTIFICATE OR STATEMENT TO THE EFFECT, OR (I HAVE SATISFACTORILY PASSED AN EXAMINATION FOR THE PURPOSE OF DETERMINING THAT MY EDUCATIONAL QUALIFICATIONS ARE THE EQUIVALENT TO FOUR YEARS OF HIGH SCHOOL EDUCATION, AND I HEREBY TENDER TO THE BOARD PROOF OF PASSING SUCH EXAMINATION).

HIGH SCHOOL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COLLEGE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MILITARY BRANCH \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATUS\_\_\_\_\_\_\_\_\_ SINGLE \_\_\_\_\_\_ MARRIED \_\_\_\_\_\_

AFFIANT IN CONNECTION WITH THIS APPLICATION HEREBY TENDERS TO THE BOARD TWO (2) PHOTOGRAPHS 5” X 3” OF HIM / HER SELF, BEARING HIS SIGNATURE.

I HEREBY REQUEST THAT THE BOARD ISSUE TO ME A PERMIT TO ENTER **MOLER BARBER COLLEGE OF HAIRSTYLING** AS A STUDENT FOR THE PURPOSE OF QUALIFYING AS A BARBER.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

APPLICANT SIGNATURE

SUBSCRIBED AND SWORN TO BEFORE ME THIS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DAY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOTARY PUBLIC, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COUNTY, ND

(SEAL) MY COMMISSION EXPIRES \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PHYSICIAN’S CERTIFICATE**

THE UNDERSIGNED A PRACTICING PHYSICIAN AND SURGEON, LICENSED AS SUCH UNDER THE LAWS OF NORTH DAKOTA, HEREBY CERTIFIES THAT HE HAS EXAMINED \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, THE FOREGOING APPLICANT, AND FINDS HE IR SHE IN GOOD HEALTH.

DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_M.D.