



MISSISSIPPI BOARD OF BARBER EXAMINERS

Application for Enrollment in a Barber College as a Student

This application MUST be signed by both student and instructor/school agent, then sent to the Mississippi State Board of Barber Examiners, within 30 days of entrance of class along with proof of education. Rules and Regulations Rule 1.3 School Rule E.

Must submit TWO Passport size photo and copy of High School diploma or GED with application

Date of Application: _____

Name and address Of Barber College: _____

PROGRAM of Study: BARBER _____ INSTRUCTOR 1000 or 600 _____ CROSSOVER _____

Name of Student: _____
First Name Middle Name Last Name

Student's Mailing Address: _____

City County State Zip Code

Social Security Number: _____ Telephone Number: _____

Date of Birth: _____ Race: _____ Place of Birth: _____

This is my _____ application (1st, 2nd ect). Length of Residence in Mississippi: _____

Full Time Student: _____ or Part Time Student: _____ Day Student: _____ or Night Student: _____

Can you Read, Write and Speak English? Yes: _____ or No: _____

PROOF OF HIGH SCHOOL (12th Grade) / GED EDUCATION REQUIRED

Name of High School or GED Test Center: _____

Date of Graduation: _____ Name Shown on Diploma: _____

Have you ever been convicted of a Felony? _____ If so, when and please explain : _____

To be completed by school official

Entry Date _____

Date of Graduation: _____

Instructors Name: _____

Hours Need to Graduate: _____

Transfer Hours: _____

Name of Transferring School: _____

Transcript Date: _____

Hours Completed: _____

THIS FORM REQUIRES BOTH SIGNATURES

Student's Signature: _____ Date: _____

Instructor/School Agent's Signature: _____ Date: _____