



MISSISSIPPI BOARD OF BARBER EXAMINERS

APPLICATION OF INTENT – EXAMINATION AND LICENSURE

The information contained on this application form must be current and accurate since the applicant cannot proceed with the credentialing process until notified that his or her OFFICIAL TRANSCRIPT has been received by the Mississippi Board of Barber Examiners. The entire application must be completed to proceed with this process.

Name (Last, First, Middle, Maiden)			
Mailing Address			
City, State, and Zip Code			
Telephone Number			
Email Address			
Date of Birth			
Social Security Number (MUST ALSO ATTACH A COPY)			
Height			
Eye Color			
School Name in Which Training Was Acquired		School License Number	
School City and State			
Date of Entry into Barber School		Date of Completion of Barber School	
State(s) In Which You Have Been Licensed (List ALL)			
License Type (Circle)	Barber	Barber Instructor	
Have You Ever Been Convicted of a Felony?	Yes, Explain and attach all relative court documents (attach a separate page) No		
Have Your Previously Filed Any Application With MBBE?	Yes	No	
If Yes, State Kind of Application and Date Filed			
Name in Which Application Was Filed			
Will you be bringing with you female manikin(s) during the female examination portion of the examination?	Yes	No	
	NOTE: Please refer to the requirements for use of manikins found on the website → School Tab → Requirements for use of manikin(s) during examination		

YES	NO	AFFIDAVIT QUESTIONS
		Are you a citizen of the United States? If NO, attach copy of passport including work permit.
		Have you been convicted or found guilty of a crime in any state or jurisdiction, regardless of adjudication? or
		Is there any criminal charge now pending against you? (Do not include parking or speeding violations for Question 23.)

		Have you ever been a defendant in a court-martial?					
		Have you ever been declared legally incompetent?					
		Have you ever undergone treatment for the use of drugs, narcotics, or intoxicating liquors?					
		Have you ever received treatment for any emotional disturbances, mental disorder or insanity that would impair your ability to perform as a barber?					
		Has a regulatory authority in any state or jurisdiction (including Mississippi) denied you a license or other credential to practice as a barber or to practice any other licensed profession? If YES, YOU MUST provide a copy of the denial letter from the regulatory authority AND a letter of explanation.					
		Has a regulatory authority in any state or jurisdiction (including Mississippi) granted you a license or other credential to practice as a barber or to practice any other licensed profession? (If NO, skip Questions 30 through 35)					
		Have you ever held a professional barber license in Mississippi?					
		If yes, what was your license #:		When did your license expire?			
		Why did you allow your license to expire?					
		Has a regulatory authority in any state or jurisdiction (including Mississippi) disciplined you related to the practice of as a barber or to the practice of any other licensed profession? (Such disciplinary outcome includes, but is not limited to, license restrictions or conditions, probation, fine, or reprimand.)					
		Has a regulatory authority in any state or jurisdiction (including Mississippi) suspended, revoked, denied the renewal of, or required you to surrender your barber license or other credential, or your license to practice any other profession?					
		Have you ever voluntarily surrendered a license or credential in connection with or to avoid a disciplinary action by a regulatory authority?					
		Are you now or have you ever been a defendant in civil litigation in which the basis of complaint was for negligence, malpractice, or lack of professional competence?					
		Is there currently pending against you in any jurisdiction a complaint against your professional conduct or competency?					
		Have you held a barbering license in any other state? If YES, name all states and current status of license.					
		State:	Lic.#:	Status:	State:	Lic.#:	Status:
		State:	Lic.#:	Status:	State:	Lic.#:	Status:

REQUIRED ATTACHMENTS:

1. Two (2) two inch by two-inch (2 X 2) passport size photos, signed and dated
2. Official transcript bearing its official seal and signed by the designated agent of the school (owner/instructor)
3. Money Order or Cashier's Check in the amount of \$100 (barber); \$105 (instructor)

By signing this Application, I am requesting that a permit be issued to me and (shop name) _____.
I understand that this permit is valid until I take the State Board Examination for _____ or leave the above-named shop.

By signing this application, I certify that the information provided above is true and accurate under penalty of perjury.

Applicant's Signature Date