



# MISSISSIPPI BOARD OF BARBER EXAMINERS

## APPLICATION FOR INACTIVE STATUS – BARBER INSTRUCTOR

Full legal name as it appears on driver's license or passport:		
Last	First	Middle/maiden
Date of birth	Social Security #	License Number
Email		
Home Address		
City	State	Zip
Mailing address, if different		
City	State	Zip
Home Phone	Cell Phone	Other Phone

I hereby request to keep my license on **inactive status**. I have enclosed all licenses issued to me. I understand that I must keep the Board informed of my current mailing address and phone number. I further attest that I shall not perform barber services in the State of Mississippi for compensation while on inactive status and I understand that no license will be issued to me while on inactive status. The inactive fee of \$50.00 (money order or cashier's check only – no personal checks accepted) is enclosed and is valid for a maximum of less than 5 years. After 5 years of inactive status, a license is deemed expired and all applicable fees, examination and application requirements must be met.

License is attached

License is lost or not available

Signature: \_\_\_\_\_ Effective Date of Request: \_\_\_\_\_

Print Complete Name \_\_\_\_\_