



**APPLICATION FOR LICENSE AS AN ELECTROLOGIST**

Date \_\_\_\_\_

Name \_\_\_\_\_  
(Last) (First) (Middle Initial)

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_  
(Street) (City & State) (ZIP Code)

Business Telephone Number \_\_\_\_\_  
(Area Code)

Business Location \_\_\_\_\_  
(Office, Home, Salon, Other)

Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_

Social Security Number \_\_\_\_\_

**Complete the following Sections:**

**SECTION 1**

EDUCATION:	Name	City/State	Hrs/Yrs Attended	Year of Graduation	Degree/ Diploma/ Certificate
High School	_____	_____	_____	_____	_____
College/University/Technical	_____	_____	_____	_____	_____
Electrology School(s)	_____	_____	_____	_____	_____
Other	_____	_____	_____	_____	_____

**SECTION 2**

1. Have you ever practiced Electrology in North Carolina? ( ) yes ( ) no  
If yes, number of years practiced and date of last valid license.

---

(Attach copy of last valid license, if possible)

2. Have you ever practiced Electrology in another state(s)? ( ) yes ( ) no  
If yes, give state or states and number of years practiced in each state.

3. Do you now hold a valid Electrologists license in another state(s)? ( ) yes ( ) no  
If yes, give state or states and number of years practiced in each state.

---

(Attach copy of current license)

4. Have you ever been denied a license to practice Electrology in North Carolina or another state?  
( ) yes ( ) no If yes, give state, year, and reason for denial.

5. Has your license in North Carolina or any state ever been suspended or revoked?  
( ) yes ( ) no If yes, give details.

6. Have you ever been convicted of a felony or sentenced to more than 30 days in jail for a lesser  
offense? ( ) yes ( ) no If yes, give details.

**SECTION 3**

I hereby make application to the North Carolina Board of Electrolysis Examiners for examination for license to practice Electrology in the State of North Carolina. I do swear/affirm that the statements made on this application, and attached copies are true and pertaining to the practice of Electrology, and fully understand that in receiving a license from the North Carolina Board of Electrology Examiners (NCBEE) in the State of North Carolina do pledge to conduct my practice in accordance with the Rules and Regulations as per 21 NCAC Chapter 19 as adopted of the profession.

\_\_\_\_\_

(Signature of applicant in presence of Notary Public)

\_\_\_\_\_ appeared before me this day

\_\_\_\_\_ of \_\_\_\_\_ 20\_\_\_\_\_, and has sworn that the above statements are true and without deception.

\_\_\_\_\_

NOTARY PUBLIC

My Commission Expires: \_\_\_\_\_

(Notary Seal)

Application must be accompanied by:

1. Copy of birth certificate or other legal proof of age;
2. Copy of proof of completion of high school or attainment or equivalent education;
3. Copy of certification of completion from each electrology institution attended and/or verification of the number of hours completed in theory and clinical training;
4. Copies requested in Section 2, questions 1 and 3, if applicable;
5. Check or money order for application fee of \$100.00 made payable to: North Carolina Board of Electrolysis Examiners;
6. An incomplete application shall be considered unsatisfactory and shall be returned to the applicant by the Board.

**North Carolina Board of Electrolysis Examiners**

2 Centerview Drive Pinehurst Suite 60

Greensboro, NC 27407

E-mail: [ncbeexam@att.net](mailto:ncbeexam@att.net) Phone: 336-856-1010

revision 2010

<b>(For Board Use Only)</b>		
License Date _____	Examination Date _____	File _____
License # _____		
Comments:		

**North Carolina Board of Electrolysis Examiners**

2 Centerview Drive Pinehurst Suite 60  
Greensboro, NC 27407

E-mail: [ncbeexam@att.net](mailto:ncbeexam@att.net) Phone: 336-856-1010

*revision 2010*