



## ***North Carolina Board of Electrolysis Examiners***

2 Centerview Drive, Pinehurst Building, Suite 60

Greensboro, North Carolina 27407

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### **LASER HAIR CONTINUING EDUCATION COURSE OF STUDY APPLICATION**

Dear Applicant,

Thank you for your request for a Continuing Education Course of Study application. The requirements for application are pursuant to the statutes, rules, and regulations set forth by the NC General Assembly and the NC Board of Electrolysis Examiners (NCBEE). Please read the rules and instructions prior to applying.

Every effort will be taken to process your application in a timely manner. If you have any questions please contact the NCBEE at the information listed above. We look forward to working with you in North Carolina.

#### **Requirements for Application** (21 NCAC 19 .0702)

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*This is not a comprehensive listing of the rules related to application. Please refer as noted above.*

- Application must be submitted two months in advance of the course registration date.
- A change in subject matter, length, or instructor of a course requires re-approval by the NCBEE.
- **An incomplete or partial application packet will be rejected by the NCBEE.**

#### **Instructions for Completing PDF form**

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- The application is an interactive PDF. This means you can click directly onto a field and enter the required information. If you hover over the field with your cursor, a detail of the required information will be displayed.
- Please enter all information and SAVE the PDF file to your computer. There are two options for submitting:
  - print the saved document and send a scanned copy to the NCBEE email : [ncbeexam@att.net](mailto:ncbeexam@att.net)
  - or, print the saved document and mail to the NCBEE at:  
2 Centerview Drive, Pinehurst Building, Suite 60  
Greensboro, North Carolina 27407
- Please note you may need to install the latest version of Adobe Reader XI® to save your completed application in PDF format. Free download click: [Adobe Reader XI Link](#)



**LASER HAIR CONTINUING EDUCATION COURSE OF STUDY APPLICATION**

*Date:* \_\_\_\_\_

*Sponsoring Entity:* \_\_\_\_\_

*Name of Speaker:* \_\_\_\_\_

*According to 21 NCAC 19.702, this form must be used for each individual speaker/lecturer.*

*Title of Course:* \_\_\_\_\_

*Location of Course:* \_\_\_\_\_

*Date of Course:* \_\_\_\_\_

*Hours of Study:* \_\_\_\_\_

*Course Objective(s) and Content:*

*Instructor/Lecturer Background (CV can be attached to application):*

*Learning Outcome(s):*

**To obtain a copy of the N.C.G.S § 88-A Electrolysis Practice Act and 21 NCAC Chapter 19 rules refer to the North Carolina Board of Electrolysis Examiners (NCBEE) at [www.ncbee.com](http://www.ncbee.com)**