

Dominion School of Hair Design

1755 George Washington Memorial Highway, Gloucester Point, VA 23062

Phone: 804-684-9150 Fax: 804-684-9177

Application for Enrollment (Please return with \$50 application fee)

Date: _____

Name: _____

Last First Middle

Present address _____

Street City State Zip code

Social Security # _____ Date of Birth _____

Telephone number _____ Cell Number _____ E-mail: _____

Course desired _____ Enrollment desired Full time Part time

How many hours can you attend classes per week? _____

What are your goals and objectives upon completion of this licensure program? _____

Physical and Safety Demands of the Profession: By nature of the profession, students must meet the following minimum requirements:

- ◆ Good general health (no communicable conditions that could be passed on to customers)
- ◆ Strong feet , legs, and back due to long hours of standing
- ◆ Not allergic to fumes, chemicals, etc.

Are you able to meet these requirements? Yes No

Do you have transportation Yes No Date available to start _____

Education	Name of School	Address	Major or degree earned
High School			
College			
Technical school	Type	How long	

Have you ever been convicted of a misdemeanor or felony? No Yes

If yes, explain the nature of the conviction _____

Please list two personal references

Name _____

Name _____

Address _____

Address _____

Address _____

Address _____

Telephone Number _____

Telephone Number _____

Type of payment plan: Full or Monthly If monthly payments are requested, Credit Check may be required at an additional cost of \$25. Please sign here granting permission to procure credit information.