Clovis Community College™

RETURN COMPLETED APPLICATION TO ROOM 403 OR EMAIL IT TO OTApplications@clovis.edu

Cosmetology Programs APPLICATION

❑ **Fall 20 _____**

❑ **Spring 20 _____**

C	0	0						

Last Name First Name

Address

Email

City/State/Zip

Phone Number

Program of Interest:

	1st Choice	2nd Choice
Cosmetology	❑	❑
Esthetics/Nail Technician	❑	❑

Were you enrolled in the high school CTI Cosmetology Program?
Yes _____ No _____

Read and initial each statement:

____ I understand I must apply for admission to CCC, meet the Accuplacer requirements or take the required math/English/reading courses, AND have a transcript on file with the Admissions Office before I can be placed on the waiting list for the program.

____ I understand that the NM Board of Barbers and Cosmetologists requires me to have a social security number or individual tax identification number (ITIN) in order to register with the state and get credit for contact hours. CCC will not be able to register me without a social security number or ITIN. I understand that I may choose to stay enrolled in the classes knowing that I will not be able to obtain my cosmetology/esthetics/nail technician license upon completion of the courses.

____ I understand that I am required to register with State Board. I will be required to pay a $25 permit fee electronically using a Visa or MasterCard, fill out a permit application, and supply required documentation during the first week of class.

____ I understand that I will be removed from the waiting list if I am sent two letters and do not respond. If I choose to be moved to the waiting list for the next semester, it is my responsibility to call the office at 575.769.4945.

_____ I understand that if I am accepted to one program and dropped for non-payment or decide to pursue another program, I must reapply.

____ I understand that the Cosmetology program and the Esthetics/Nail Technician program are from 8 a.m. to 5 p.m., Monday-Thursday. I understand that these programs have a contact hour requirement and that I am required to adhere to the attendance policy or I will not pass and will have to repeat the semester.

____ I understand that if I enroll in the Esthetics/Nail technician program, I may be required to repeat courses if I later decide to enroll in the cosmetology program.

____ I understand that if I start the program but do not finish, I will be required to start the program over if I am out for more than 2 semesters.

____ I understand that if my address, email or phone number changes prior to being admitted into the program, it is my responsibility to contact personnel in Room 403 or call 575.769.4945 or I may lose my spot on the waiting list.

____ I understand that in order to receive my student permit with State Boards I cannot be more than 30 days late on court ordered child support payments or been convicted of certain felonies. (Please see OT Division Chair for further clarification, if needed.)

Signature

Date