

**Cosmetology Programs  
APPLICATION**

Fall 20 \_\_\_\_\_  
 Spring 20 \_\_\_\_\_

|   |   |   |  |  |  |  |  |  |
|---|---|---|--|--|--|--|--|--|
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|---|---|---|--|--|--|--|--|--|

\_\_\_\_\_  
 Last Name First Name

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 City/State/Zip

Social Security #: **\*Please provide your social security number to room 403 for final application completion.**

\_\_\_\_\_  
 Phone Number

**Program of Interest:**

|                           |                          |                          |
|---------------------------|--------------------------|--------------------------|
|                           | 1 <sup>st</sup> Choice   | 2 <sup>nd</sup> Choice   |
| Cosmetology               | <input type="checkbox"/> | <input type="checkbox"/> |
| Esthetics/Nail Technician | <input type="checkbox"/> | <input type="checkbox"/> |

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 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. 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 prior to starting the program. I will be required to pay a \$25 permit fee to the Cashier's office, fill out a permit application, and supply required documentation at the time of registration.
- \_\_\_\_\_ 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 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.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date