



APPLICATION FOR FOUR-YEAR APPRENTICE LICENSE  
GEORGIA STATE BOARD OF COSMETOLOGY AND BARBERS  
237 Coliseum Drive • Macon, Georgia 31217 • (478) 207-2440  
[www.sos.ga.gov/plb/cosmetology](http://www.sos.ga.gov/plb/cosmetology)

Please read the instructions carefully and be familiar with the laws and rules governing the practice of Cosmetology/Barbers/Hair Designer/Nail Technology/Esthetics in the State of Georgia.  
Visit our website for information: [www.sos.ga.gov/plb/cosmetology](http://www.sos.ga.gov/plb/cosmetology)

**\*\*\* IMPORTANT \*\*\***

The Board **CANNOT** process incomplete applications. If ANY item is missing, incomplete, or incorrect, your application cannot be reviewed by the Board. Please review this application before you submit it to ensure that all information and documentation is complete and correct. Incomplete applications result in delayed processing. Incomplete applications are void after one year. Furthermore, because application information is time sensitive, documents cannot be transferred from an old application to a new application.

**APPLICATION CHECKLIST**

The following checklist is an important part of your application. Please use this checklist to ensure that you submit a **COMPLETE** application. We recommend you keep a copy of your application for your records.

- NON-REFUNDABLE 4-YEAR APPRENTICE APPLICATION FEE: \$90**  
CHANGE OF SHOP / MASTER OR CURRENT 2-YR APPRENTICE RENEWAL: \$90  
You must include a \$90 check or money order payable to the Georgia State Board of Cosmetology and Barbers. **DO NOT SEND CASH OR COUNTER CHECKS.** Checks returned for insufficient funds are subject to a \$30.00 service charge pursuant to O.C.G.A. § 16-9-20.
- CITIZENSHIP/QUALIFIED ALIEN STATUS:** Submit a copy of your current Secure and Verifiable Document(s) such as driver's license, passport, or document as indicated on pages 2 and 3.
- NOTARIZED APPLICATION:** The complete application must be mailed to the Board's office at the address listed above, along with your **FEE**. Sign the application in the presence of a notary.
- Copy of current shop license and master license are enclosed**
- Letter from master releasing previous apprentice (if applicable)**  
If the master under whom you are training has *previously* trained an apprentice, our records must indicate that they are no longer training that person. If a master has not notified us that he or she is no longer training an apprentice, he or she must notify us in writing. Without this notification, your application will be delayed.
- SUBMIT APPLICATION IN A 9X12 or LARGER ENVELOPE** – – DO NOT STAPLE pages or check/money order. Do not fold pages of the application. Make check/money order payable to Georgia State Board of Cosmetology and Barbers submit to 237 Coliseum Drive, Macon, GA 31217. We recommend using US Mail or private courier (UPS, FedEx, etc.) with tracking. Keep a copy of your application for your records.

DO NOT SUBMIT THIS PAGE WITH YOUR APPLICATION

# INSTRUCTIONS FOR THE COSMETOLOGY/ BARBER APPRENTICE APPLICATION

Failing to follow these instructions will delay the processing of your application

**Section 1 & 2:** This section is to be **completed by the applicant**, signed and notarized.

**Section 3:** This section is to be **completed by the master** licensee who will supervise the apprentice. This section must be signed and notarized. **The signature of the master trainer must be legible or the application will be returned. The signature of the master trainer must be signed as it appears on the license.** Failure to do so will result in the application being returned and delay processing your application.

## **APPRENTICE REQUIREMENTS:**

1. Cosmetology Apprentice training is on-the-job training in a salon/shop and under the direct supervision of a licensed master licensee with at least 36 months' experience. Barber Apprentice training is on-the-job training in a salon/shop and under the direct supervision of a licensed master barber with at least 18 months' experience.
2. Each master barber, cosmetologist, esthetician, hair designer, or nail technician licensee in a salon/shop may train only one (1) apprentice at a time.
3. Any person at least 16 years of age may qualify to train as an apprentice.
4. Apprentice hours are accumulated according to the actual number of hours of performance and training. Apprentice hours are subtotaled 1<sup>st</sup> of January, the 1<sup>st</sup> of April, and the 1<sup>st</sup> of September. Hours reported will be kept on file by the salon/shop owner or manager for inspector review.  
**The salon/shop owner and master level trainer are responsible for submitting the apprentice hours after the apprentice has completed the hours or is no longer apprenticing under the current master level trainer.**
5. Upon completion of the required hours within the appropriate minimum months of training, it is the apprentice's responsibility to obtain and submit an application for examination and or licensure. Examinations will be administered **only** by PSI. Contact PSI about the examinations, fees, dates, locations, exam content and grade notifications using one of the following:
  - Online 24/7 at [www.psiexams.com](http://www.psiexams.com) or by phone 24/7 at (800) 733-9267.
  - PSI Registrar at (800) 733-9267 Monday-Friday 7:30 a.m.-8:00 p.m., Saturday 11:00 a.m. -5:00 p.m. EST.

**CREDIT FOR TRAINING HOURS BEGINS WHEN THE APPRENTICE LICENSE IS ISSUED.**  
**NOT WHEN THE APPLICATION IS MAILED TO THE BOARD OFFICE.**

## **APPRENTICE TRAINING:**

1. **The apprentice will receive a certificate of registration for a period of four (4) years. THERE ARE NO RENEWALS OF THE 4-YEAR APPRENTICE LICENSE; only a current 2-year Apprentice may renew for \$90.** If the apprentice is changing a master, or salon/shop location, or if the salon/shop where the apprentice is working has a change in its license status, the apprentice must submit a new application with the salon/shop change.
2. Upon the expiration of the last certificate of registration issued, such apprentice shall not be permitted to practice the occupation in any way until he or she obtains his or her license.
3. **Hours can only be obtained during the period of time that the apprentice is licensed.**

## **CHANGE OF TRAINING:**

**If any of the following occurs during the apprenticeship, a new apprentice application must be filed with the Board office and a fee of \$90.00 must be submitted with the application – NO EXCEPTIONS:**

- Change of Master supervising the apprentice; or
- Apprentice changes to a new salon; or
- If the salon where you are apprenticing changes name, location or ownership causing a new salon license number to be issued.

## **COSMETOLOGY APPRENTICESHIP HOURS REQUIRED FOR EXAMINATION:**

BARBER	3,000 HOURS AND 18 MONTHS OF TRAINING
BARBER II	2,280 HOURS AND 14 MONTHS OF TRAINING
COSMETOLOGIST	3,000 HOURS AND 18 MONTHS OF TRAINING
HAIR DESIGNER	2,650 HOURS AND 14 MONTHS OF TRAINING
ESTHETICIAN	2,000 HOURS AND 18 MONTHS OF TRAINING
NAIL TECHNICAN	1,050 HOURS AND 8 MONTHS OF TRAINING

DO NOT SUBMIT THIS PAGE WITH YOUR APPLICATION



GEORGIA STATE BOARD *of*  
**COSMETOLOGY AND BARBERS**  
 237 Coliseum Drive • Macon, GA 31217  
 Phone (478) 207-2440  
[www.sos.ga.gov/plb/cosmetology](http://www.sos.ga.gov/plb/cosmetology)

Date Entered	_____
Receipt #	_____
Submitted \$	_____
Date Issued	_____

## APPLICATION FOR APPRENTICE LICENSURE

Application Fees are non-refundable

(Check Only ONE)

- License Type:  BARBER APPRENTICE                       ESTHETICIAN APPRENTICE  
 BARBER II APPRENTICE                                       HAIR DESIGN APPRENTICE  
 COSMETOLOGY APPRENTICE                                       NAIL TECHNICIAN APPRENTICE

Please check the appropriate box:

- Initial Application \$90                       Change of Shop/Master or 2yr Renewal \$90

**ALL Licenses currently or previously held issued to you by the Georgia Professional Licensing Boards:**

1. Legal Name to appear on License:

\_\_\_\_\_

LAST                                      FIRST                                      MIDDLE                                      MAIDEN

2. Name as shown on exam records, transcripts or any documentation provided to the Board including maiden name (if different):

\_\_\_\_\_

LAST                                      FIRST                                      MIDDLE                                      MAIDEN

3. Social Security # <sup>1</sup>:

\_\_\_\_-\_\_\_\_-\_\_\_\_ Date of Birth: MM - DD - YYYY

<sup>1</sup> This information is authorized to be obtained & disclosed to state & federal agencies pursuant to O.C.G.A. § 19-11-1 & O.C.G.A. § 20-3-295, 42 U.S.C.A. § 551 & 20 U.S.C.A. § 101.

4. Gender:  Male                       Female

5. Residential Address:

PHYSICAL ADDRESS - NUMBER AND STREET NAME REQUIRED (P.O. BOX NOT ACCEPTABLE)                      APT #

\_\_\_\_\_

CITY                                      STATE                                      ZIP                                      APT #

6. Mailing <sup>2</sup> Address:

(P.O. BOX ACCEPTABLE)                      <sup>2</sup> O.C.G.A. §43-1-2 (k) Your name, mailing address and license number are public information and will appear on Secretary of State's website

\_\_\_\_\_

CITY                                      STATE                                      ZIP                                      APT #

7. Daytime Phone #

\_\_\_\_-\_\_\_\_-\_\_\_\_

Evening Phone #

\_\_\_\_-\_\_\_\_-\_\_\_\_

8. E-mail Address <sup>3</sup>:

\_\_\_\_\_ FAX \_\_\_\_\_

**<sup>3</sup>Acknowledgement of your application will be sent to your email. If further information is needed, Board staff will contact you by email so that your application can be processed in the most efficient manner. Your email will not be shared with third parties**

**SECTION 1 – TO BE COMPLETED BY COSMETOLOGY AND BARBER APPRENTICE APPLICANT**

**This application will be returned if you do not answer the questions on this page.**

Print Your Name: \_\_\_\_\_

Have you ever been **arrested** or convicted of a felony, misdemeanor (other than a minor traffic violation), crime involving moral turpitude, or a crime violating federal or state law relating to controlled substances or dangerous drugs? (DWI and DUI are not minor traffic violations.) For purposes of this question, a "conviction" includes a finding of verdict of guilty, plea of guilty, a plea of nolo contendere, or first offender treatment, and also includes adjudication of guilt or sentence withheld or not entered on the charge (s). **NOTE: The answer to this question is "YES" if an arrest or conviction has been pardoned, expunged, dismissed or deferred, you pled & completed probation under First offender and/or your civil rights have been restored and/or you have received legal advice that the offense will not appear on your criminal record.**

No  Yes



If you answered "Yes" to the question regarding arrest/court convictions, you must submit the following to the Board:

- (a) Submit a letter of explanation and certified copy of final court disposition from the county(s) in which you were arrested/convicted. The court document should include the charges and sentencing information.
- (b) Probation/Parole - Submit a statement (on official letterhead) from your probation / parole officer regarding your current status. If probation/parole has been completed, submit certified documents from the courts verifying case closed and completion of probation / parole.

Has **any** licensing board or agency in Georgia or **any** other state ever:

- (a) Denied your application for licensure, renewal, or reinstatement?
- (b) Revoked, suspended, restricted, sanctioned, or probated your license?
- (c) Requested or accepted surrender of your license?
- (d) Reprimanded, fined, or disciplined you?

No  Yes  
 No  Yes  
 No  Yes  
 No  Yes



If you answered "Yes" regarding sanctions from another board, you must request that the licensing board or agency send a certified copy of the action taken against your license with relevant supporting documents to the Board's office. Your application will not be processed until this information is received and reviewed by the Board. Provide the name of the agency or board in the space provided:

\_\_\_\_\_  
Name of State Board or Agency

I have enclosed a copy of my Secure and Verifiable Document (SVD) with this application such as my Driver's License, Passport, or other document OR a copy of my current immigration document(s) which includes either my Alien number or I-94 number and SEVIS number if needed.

**Secure and Verifiable Documents Under O.C.G.A. § 50-36-2  
Issued August 1, 2011 by the Office of the Attorney General, Georgia**

The Illegal Immigration Reform and Enforcement Act of 2011 ("IIREA") provides that "[n]ot later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law's website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General." O.C.G.A. § 50-36-2(f). The Attorney General may modify this list on a more frequent basis, if necessary.

The list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status. This list may be found on the Board's website at this address: <http://sos.ga.gov/admin/files/svd2013.pdf>

**Your application will not be processed until this information is received and reviewed by the Board.**

APPLICANT AFFIDAVIT



- License Type: [ ] BARBER APPRENTICE [ ] BARBER II APPRENTICE
[ ] COSMETOLOGY APPRENTICE [ ] HAIR DESIGN APPRENTICE
[ ] ESTHETICIAN APPRENTICE [ ] NAIL TECHNICIAN APPRENTICE

I hereby swear and affirm that all information provided in this application is true and correct to the best of my knowledge and belief. I further swear and affirm that I have read and understand the current state laws and rules and regulations of the Georgia State Board of Cosmetology and Barbers and I agree to abide by these laws and rules, as amended from time to time.

By signing this application, electronically or otherwise, I hereby swear and affirm one of the following to be true and accurate (Check or initial beside #1 or #2 below):

- 1) I am a United States citizen least 16 years of age or older. You must submit a copy of your current photo ID or Secure and Verifiable Document(s) such as driver's license, passport, or other document.
2) I am not a United States citizen, but I am a legal permanent resident of the United States 18 years of age or older, or I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older with an alien number issued by the Department of Homeland Security or other federal immigration agency. You must submit a copy of your current immigration document(s) which includes either your Alien number or your I-94 number and, if needed, SEVIS number.

The undersigned applicant also hereby verifies that he or she is at least 16 years of age or older and has enclosed at least one form of acceptable identification such as a Secure and Verifiable Document as required by O.C.G.A. § 50-36-1(e)(1), with this Affidavit.

In making the above representations under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20, and face criminal penalties as allowed by such criminal statute. I also understand that any failure to make full and accurate disclosures may result in disciplinary action by the Board for which I am applying for licensure.

Print Name of Applicant

Signature of Applicant

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE

DAY OF, 20

NOTARY PUBLIC SIGNATURE

MY COMMISSION EXPIRES:

O.C.G.A. §45-17-6 requires legible seals for notarized documents. If an embossed seal is used a foil overlay or shading should be applied to make the seal, state, title, name, and county legible when digitized.

NOTARY SEAL

**SECTION 2 – TO BE COMPLETED BY COSMETOLOGY AND BARBER APPRENTICE APPLICANT**

**I HAVE ATTACHED A COPY OF THE SHOP LICENSE OR COMPLETE ALL LINES IN THIS BOX:**

**Salon/Shop License Number** \_\_\_\_\_  
*MUST BE EXACTLY AS IT APPEARS ON THE LICENSE*

Salon/Shop Telephone Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Name of SALON/SHOP** where Apprentice will receive training

\_\_\_\_\_  
SALON / SHOP NAME

\_\_\_\_\_  
SALON/SHOP PHYSICAL ADDRESS                      SUITE NUMBER                      CITY                      STATE                      ZIP

Yes  No    Have you ever previously registered as an apprentice?  
**If YES:**  
When? \_\_\_\_\_  
What type of apprenticeship? \_\_\_\_\_  
License Number \_\_\_\_\_

Yes  No    Did you complete the apprenticeship?

Yes  No    Are you currently working under an apprentice license?  
**If YES,** give date of license expiration \_\_\_\_\_

I UNDERSTAND THAT IN ORDER FOR ME TO QUALIFY FOR THE EXAMINATIONS OFFERED BY THE BOARD, I MUST PROVIDE PROOF OF A HIGH SCHOOL DIPLOMA, **OR** GED DIPLOMA, **OR** A POSTSECONDARY EDUCATION, **OR** COLLEGE DEGREE.

\_\_\_\_\_  
Signature of Apprentice Applicant

\_\_\_\_\_  
Printed Name of Applicant

Sworn to and Subscribed before me on this  
\_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
Notary Signature

My commission expires on \_\_\_\_ / \_\_\_\_ / \_\_\_\_

O.C.G.A. §45-17-6 requires legible seals for notarized documents. If an embossed seal is used a foil overlay or shading should be applied to make the seal, state, title, name, and county legible when digitized.

**NOTARY SEAL**

4

**SECTION 3 – TO BE COMPLETED BY MASTER**

Apprentice Name: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ License No. \_\_\_\_\_  
(for this application)

**Questions for the Master Supervising the Apprentice Barber, Cosmetologist, Hair Designer, Esthetician or Nail Technician:**

- Yes**  **No** Salon/Shop owner or manager or master trainer, are responsible for keeping daily record of apprentice hours.
- Yes**  **No** Salon/Shop owner or manager and master trainer are responsible for apprentice having a thorough understanding of sanitization. Refer to sanitation tip sheet.
- Yes**  **No** Master trainer always monitors apprentice's sanitation procedure.
- Yes**  **No** Do you have cosmetology and/or barber books/workbook for apprentice to study?
- Yes**  **No** Do you have the sanitary regulations for apprentice to study?
- Yes**  **No** Do you have the rules of the Georgia State Board of Cosmetology and Barbers for Apprentice to study?
- Yes**  **No** Does Apprentice have related kit, and all the tools they will need to learn the specific profession in cosmetology or barbering?
- Yes**  **No** I understand the following regarding apprentices:  
*Hours can only be obtained during the period of time that the apprentice is licensed. If an apprentice changes master supervisor or salon/shop where he/she is apprenticing, a new apprentice application must be submitted. If the salon/shop changes ownership, name or location causing a new license number to be issued, a new apprentice application must be submitted. Hours can only be obtained during the period of time that the apprentice, master and salon license are active.*
- Yes**  **No** **I UNDERSTAND:** APPRENTICE HOURS ARE SUBTOTALLED 1<sup>ST</sup> OF JANUARY, 1<sup>ST</sup> OF APRIL, AND 1<sup>ST</sup> OF SEPTEMBER.
- Yes**  **No** **I UNDERSTAND:** HOURS REPORTED WILL BE KEPT ON FILE BY SALON/SHOP OWNER OR MANAGER FOR INSPECTOR TO REVIEW.

**SECTION 3 CONTINUED ON NEXT PAGE**

SECTION 3 CONTINUED – TO BE COMPLETED BY MASTER

Yes  No **I UNDERSTAND:** Failure to have cosmetology apprentice reports and/or records current shall result in a **Fine of \$200.00** (Rules 130-2-.06(2)(a)(b)(c) and 130-7-.04(a)(5).) Failure to have barber apprentice reports and/or records current shall result in a **Fine of \$250.00** (Rules 70-2-.07 and 70-6-.05).

Yes  No **I UNDERSTAND:** Failure of cosmetology apprentice to be under direct supervision of their registered master license holder or temporarily designated master license holder shall result in a **Fine of \$500.00** (Rules 130-2-.06(a)(c), 130-2-.09, 130-4-.06, and 130-7-.04(a)(6).) Failure of barber apprentice to be under direct supervision of their registered master license holder shall result in a **Fine of \$250.00** (Rules 70-2-.07 and 70-6-.05).

Yes  No **I UNDERSTAND:** Apprentice hours are accumulated according to the actual number of hours of performance and training. It is the responsibility of the salon/shop owner and the master to see that an accurate record is kept of the apprentice hours. IT IS NOT THE RESPONSIBILITY OF THE APPRENTICE.

Yes  No **I UNDERSTAND: IT IS MY RESPONSIBILITY AS MASTER TO SUBMIT APPRENTICE HOURS AT THE END OF THE APPRENTICESHIP EVEN IF THE APPRENTICE IS NO LONGER TRAINING WITH ME FOR ANY REASON.**

**I agree to act as supervising master barber, master cosmetologist, nail technician, esthetician or hair designer for the apprentice whose name appears above. I agree to provide direct supervision when the apprentice whose name appears above is working in the salon/shop.**

STATE OF GEORGIA  
COUNTY OF \_\_\_\_\_

\_\_\_\_\_  
**SIGNATURE OF THE MASTER**  
SUPERVISING THE APPRENTICE

SWORN AND SUBSCRIBED BEFORE ME THIS THE  
\_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
PRINT NAME

**NOTARY PUBLIC**

MY COMMISSION EXPIRES: \_\_\_\_\_

O.C.G.A. §45-17-6 requires legible seals for notarized documents. If an embossed seal is used a foil overlay or shading should be applied to make the seal, state, title, name, and county legible when digitized.

**NOTARY SEAL**







**GEORGIA STATE BOARD OF COSMETOLOGY AND BARBERS  
237 COLISEUM DRIVE  
MACON, GA 31217-3858**

**HOW TO CHANGE FROM CLOCK HOURS TO CREDIT HOURS**

**THEORY**

An apprentice can study theory in any category for one clock hour and get 1 credit hour.

**HAIRCUTTING AND SHAPING**

One haircut = .75 of a credit hour.

One shampoo = .25 of a credit hour.

A temp rinse = .75 of a credit hour.

**SHAMPOOING HAIRDRESSING AND STYLING**

One shampoo and style or one pressing, curling and comb-out= 1.5 credit hours.

**HAIR-COLOR OR BLEACHING**

One color including style = 2 credit hours.

A bleach including style = 2.5 credit hours

**PERMANENT**

One cold or heat wave including style = 3 credit hours.

**SCALP TREATMENT**

One scalp treatment = 1 credit hour.

**FACIALS AND MAKE-UP, ARCHING AND ESTHETICS**

One facial = 1 credit hour.

One brow and lash tint = .5 of a credit hour.

**CHARM RECEPTION ART AND ETHICS**

One hour learning how to work the desk and how to deal properly with clients for one clock hour = 1 credit hour.

**MANICURE AND PEDICURE**

One manicure = 1 credit hour.

One pedicure = 1 credit hour.

One sculptured nail application (full set) = 3 credit hours.

**CHEMICAL AND RELAXING**

One chemical relaxer = 2 credit hours.

**LABORATORY**

An apprentice will get training in preparing germicidal solutions, shampoos, tint and bleaches, practical training in washing and sanitizing all equipment in the beauty salon each. Each clock hour of this training will be equal to 1 credit hour.

PLEASE NOTE: CREDIT/CLOCK HOURS ARE THE SAME.

**DO NOT SUBMIT THIS PAGE WITH YOUR APPLICATION**





**GEORGIA STATE BOARD OF COSMETOLOGY AND BARBERS  
237 COLISEUM DRIVE  
MACON, GA 31217-3858**

**HOW TO CHANGE FROM CLOCK HOURS TO CREDIT HOURS**

**THEORY**

An apprentice can study theory in any category for one clock hour and get 1 credit hour.

**HAIRCUTTING AND SHAPING**

One haircut = .75 of a credit hour.

One shampoo = .25 of a credit hour.

One temp rinse = .75 of a credit hour.

**SHAMPOOING HAIRDRESSING AND STYLING**

One shampoo and style or one pressing, curling and comb-out it = 1.5 credit hours.

**HAIR-COLOR OR BLEACHING**

One color including style = 2 credit hours.

One = bleach including style for 2.5 credit hours

**PERMANENT**

One cold or heat wave including style = 3 credit hours.

**SCALP TREATMENT**

One scalp treatment = 1 credit hour.

**CHARM RECEPTION ART AND ETHICS**

One hour learning how to work the desk and how to deal properly with clients for one clock hour = 1 credit hour.

**CHEMICAL AND RELAXING**

One chemical relaxer = 2 credit hours.

**LABORATORY**

An apprentice will get training in preparing germicidal solutions, shampoos, tint and bleaches, practical training in washing and sanitizing all equipment in the beauty salon each. Each clock hour of this training will be equal to 1 credit hour.

**DO NOT SUBMIT THIS PAGE WITH YOUR APPLICATION**





**GEORGIA STATE BOARD OF COSMETOLOGY AND BARBERS  
237 COLISEUM DRIVE  
MACON, GA 31217-3858**

**HOW TO CHANGE FROM CLOCK HOURS TO CREDIT HOURS FOR  
NAIL CARE APPRENTICES.**

**THEORY**

An apprentice can study theory in any category for one clock hour and get 1 credit hour.

**MANICURING**

One manicure with hand and a forearm massage = 1 credit hour.

**ARTIFICIAL NAILS**

Artificial tip application with overlay (gel or acrylic) = 3 credit hours.

One fill in application = 1.5 credit hours.

One set sculptured nails = 3 hours.

Natural nail overlay = 1 credit hour.

One repair and artificial removal = .50 credit hours.

One natural nail wrap (silk or linen) =1 credit hour.

**PEDICURE**

One pedicure and foot massage = 1 credit hour.

**NAIL ARTS AND ETHICS**

One clock hour = one credit hour.

**RELATED SUBJECTS**

Professional nail drill usage = .50 credit hours.

Nail art & airbrush techniques, full set = 1 credit hour.

Hot oil treatment = .50 credit hour.

Paraffin treatment = .50 credit hour.

**ADDITIONAL INSTRUCTION**

**Additional instruction in any category for one clock hour = 1 credit/clock hour.**

**DO NOT SUBMIT THIS PAGE WITH YOUR APPLICATION**



**GEORGIA STATE BOARD OF COSMETOLOGY AND BARBERS**  
**237 COLISEUM DRIVE**  
**MACON, GA 31217-3858**

**TRANSCRIPT OF ESTHETICIAN APPRENTICE TRAINING**

It is hereby certified that \_\_\_\_\_  
 \_\_\_\_\_ Apprentice Last name      First name      Middle

Apprentice License # \_\_\_\_\_

Salon/Shop Name \_\_\_\_\_ Salon/Shop License No. \_\_\_\_\_

Completed the following hours from \_\_\_\_\_ to \_\_\_\_\_  
 \_\_\_\_\_ MM/DD/YYYY      MM/DD/YYYY

Master Signature \_\_\_\_\_ Master License No. \_\_\_\_\_

Apprentice Signature \_\_\_\_\_

**Hours can only be obtained during the period of time that the apprentice is licensed. If an apprentice changes master supervisor or salon where he/she is apprenticing, a new apprentice application must be submitted. If the salon changes ownership, name or location causing a new license number to be issued, a new apprentice application must be submitted. Hours can only be obtained during the period of time that the apprentice, master and salon license are active.**

<b>Hours Required</b>	<b>Courses</b>	<b>Hours Completed</b>
300 hrs.	PROFESSIONAL PRACTICES	
40 hrs.	PROFESSIONAL ETHICS	
160 hrs.	BUSINESS PRACTICES	
640 hrs.	SCIENCES	
150 hrs.	BODY TREATMENT	
230 hrs.	FACIALS	
180 hrs.	MAKE-UP	
150 hrs.	HAIR REMOVAL	
150 hrs.	SPA/SALON MANAGEMENT	
<b>2000 Hrs.</b>	<b>TOTAL HOURS</b>	

Sworn to and subscribed before me

This \_\_\_\_\_ Day of \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
 Notary Signature

My commission expires on \_\_\_\_ / \_\_\_\_ / \_\_\_\_

O.C.G.A. §45-17-6 requires legible seals for notarized documents. If an embossed seal is used a foil overlay or shading should be applied to make the seal, state, title, name, and county legible when digitized.

**NOTARY SEAL**



**GEORGIA STATE BOARD OF COSMETOLOGY AND BARBERS  
237 COLISEUM DRIVE  
MACON, GA 31217-3858**

**HOW TO CHANGE FROM CLOCK HOURS TO CREDIT HOURS FOR ESTHETICIANS.**

**THEORY; Professional Practices, Professional Ethics, Business Practices**

An apprentice can study theory in any category for one clock hour and get 1 credit hour.

**SCIENCES**

Sciences, in any category, one clock hour = 1 credit hour.

**BODY TREATMENT**

One body treatment = 1 credit hour.

**FACIALS**

One facial = 1 credit hour.

**MAKE-UP**

One make-up = 1 credit hour.

**HAIR REMOVAL**

One hair removal or waxing (lip, chin, face) = 1 credit hour.

One leg hair removal = 2 credit hours.

One bikini hair removal = .50 credit hours.

One arching = .50 credit hours.

**ADDITIONAL INSTRUCTION**

One brow and lash tinting = 1 credit hour.

**DO NOT SUBMIT THIS PAGE WITH YOUR APPLICATION**

**Georgia State Board of Cosmetology and Barbers – BARBER Apprentice Daily Log**    Month/Year \_\_\_\_\_

Apprentice license number \_\_\_\_\_ Print apprentice name \_\_\_\_\_ Signature of apprentice \_\_\_\_\_

Day	Theory	Hairstyling Techniques & Cutting	Shaving	Shampooing	Facials	Scalp Treatment Techniques	Permanent Waving, Relaxing and Chemical Application	Additional Instruction	Total Hours
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									
17									
18									
19									
20									
21									
22									
23									
24									
25									
26									
27									
28									
29									
30									
31									

This \_\_\_\_\_ Day of \_\_\_\_\_, 20 \_\_\_\_\_

**NOTARY SEAL**

Signature of Notary \_\_\_\_\_  
My commission expires:

Printed name of salon/shop owner or manager:  
\_\_\_\_\_

Signature of Master \_\_\_\_\_

Master License # \_\_\_\_\_

Signature of Salon/Shop Owner/Mgr:  
\_\_\_\_\_

**Georgia State Board of Cosmetology and Barbers – BARBER II Apprentice Daily Log**    Month/Year \_\_\_\_\_

Apprentice license number \_\_\_\_\_ Print apprentice name \_\_\_\_\_ Signature of apprentice \_\_\_\_\_

Day	Theory	Hairstyling Techniques & Cutting	Shaving	Shampooing	Facials	Scalp Treatment Techniques	Additional Instruction	Total Hours
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								
26								
27								
28								
29								
30								
31								

Sworn to and subscribed before me

**NOTARY SEAL**

Printed Name of Master \_\_\_\_\_

This \_\_\_\_\_ Day of \_\_\_\_\_, 20 \_\_\_\_\_

Signature of Notary \_\_\_\_\_

My commission expires:

Printed name of salon/shop owner or manager:

Owner/Mgr: \_\_\_\_\_

Signature of Master \_\_\_\_\_

Master License # \_\_\_\_\_

Signature of Salon/Shop

\_\_\_\_\_

**Georgia Board of Cosmetology and Barbers - Cosmetology Apprentice Daily Log**

Month/Year \_\_\_\_\_

Apprentice license number \_\_\_\_\_ Print apprentice name \_\_\_\_\_ Signature of apprentice \_\_\_\_\_

Day	Theory	Hair & Cutting Shaping	Shampooing Hairdressing Styling	Hair Coloring Bleaching	Perm. & Scalp Treatments	Facials Make-up Esthetics	Charm Reception Art & Ethics,	Manicure & Pedicure	Chemical & Relaxing	Lab. I	Additional Instruction	Total Hours
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												
16												
17												
18												
19												
20												
21												
22												
23												
24												
25												
26												
27												
28												
29												
30												
31												

Sworn to and subscribed before me

**NOTARY SEAL**

Printed Name of Master \_\_\_\_\_

This \_\_\_\_\_ Day of \_\_\_\_\_, 20 \_\_\_\_\_

Signature of Notary \_\_\_\_\_  
My commission expires:

Printed name of salon/shop owner or manager:  
\_\_\_\_\_

Signature of Master \_\_\_\_\_

Master License # \_\_\_\_\_

Signature of Salon/Shop Owner/Mgr:  
\_\_\_\_\_

**Georgia Board of Cosmetology and Barbers - Hair Designer Apprentice Daily Log -**  
**Month/Year** \_\_\_\_\_

Apprentice license number \_\_\_\_\_ Print apprentice name \_\_\_\_\_ Signature of apprentice \_\_\_\_\_

Day	Theory	Hair & Cutting Shaping	Shampooing Hairdressing Styling	Hair Coloring Bleaching	Perm. Treatments	Scalp Treatment	Charm, Reception Art & ethics,	Chemical & Relaxing	Lab. I	Total Hours
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30										
31										

Sworn to and subscribed before me  
 This \_\_\_\_\_ Day of \_\_\_\_\_, 20 \_\_\_\_\_

**NOTARY SEAL**

Printed Name of Master \_\_\_\_\_

Signature of Notary \_\_\_\_\_  
 My commission expires:

Signature of Master \_\_\_\_\_

Master License # \_\_\_\_\_

Printed name of salon/shop owner or manager: \_\_\_\_\_

Signature of Salon/Shop Owner/Mgr: \_\_\_\_\_

**Georgia Board of Cosmetology and Barbers - Nail Technician Apprentice Daily Log- Month/Year \_\_\_\_\_**

Apprentice license number \_\_\_\_\_ Print apprentice name \_\_\_\_\_ Signature of apprentice \_\_\_\_\_

Day	Theory	Manicure w/ hand / forearm massage	Artificial Nail Removal & Nail Repair	Nail Fill In Applications	Artificial Tip App. w/Overlay	Nail Wrapping	Nail Sculpturing	Pedicure w/foot and leg massage	Nail arts technique	Professional Drill Usage w/ drill designs	Air Brush Nail Art	Paraffin Treatment (Hand & feet)	Related Subjects / Advanced Tech.	Total Hours
1														
2														
3														
4														
5														
6														
7														
8														
9														
10														
11														
12														
13														
14														
15														
16														
17														
18														
19														
20														
21														
22														
23														
24														
25														
26														
27														
28														
29														
30														
31														

Sworn to and subscribed before me  
This \_\_\_\_\_ Day of \_\_\_\_\_, 20 \_\_\_\_\_

**NOTARY SEAL**

Printed Name of Master \_\_\_\_\_

Signature of Notary \_\_\_\_\_  
My commission expires:

Signature of Master \_\_\_\_\_

Master License # \_\_\_\_\_

Printed name of salon/shop owner/mgr : \_\_\_\_\_

Signature of Salon/Shop Owner/Mgr: \_\_\_\_\_

**Georgia Board of Cosmetology and Barbers - Esthetician Apprentice Daily Log - Month/Year \_\_\_\_\_**

Apprentice license number \_\_\_\_\_ Print apprentice name \_\_\_\_\_ Signature of apprentice \_\_\_\_\_

Day	Prof. Practices	Prof. Ethics	Business Practices	Sciences	Body Treatment	Facials	Make-up	Hair Removal	Spa/Salon Management	Total Hours
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30										
31										

Sworn to and subscribed before me  
This \_\_\_\_\_ Day of \_\_\_\_\_, 20 \_\_\_\_\_

**NOTARY SEAL**

Printed Name of Master \_\_\_\_\_

Signature of Notary \_\_\_\_\_  
My commission expires: \_\_\_\_\_

Signature of Master \_\_\_\_\_

Master License # \_\_\_\_\_

Printed name of salon/shop owner or manager :  
\_\_\_\_\_

Signature of Salon/Shop Owner/Mgr:  
\_\_\_\_\_