



North Dakota STATE BOARD OF COSMETOLOGY

4719 Shelburne St. Suite 1, Bismarck ND 58503 701.224.9800. ndcosmetology.com

Continuing Education Course Approval Application

Provider Contact Information

CE PROVIDER NAME:	
CE PROVIDER LICENSE #	
CONTACT PERSON:	
CONTACT MAILING ADDRESS:	
CONTACT CITY/STATE/ZIP:	
WEBSITE ADDRESS:	
EMAIL ADDRESS:	

Course Information

COURSE TITLE:		
TYPE OF CE:	<input type="checkbox"/> MANUFACTURER	<input type="checkbox"/> NON-MANUFACTURER
COURSE DATE(S):		
<input type="checkbox"/> IN PERSON CLASS	<input type="checkbox"/> ONLINE CLASS	<input type="checkbox"/> BOTH

Course Location(s)

ADDRESS:		
CITY:	STATE:	ZIP:
NUMBER OF HOURS REQUESTED:		

Course Content-- All of the following must be submitted with application

- Detailed course outline with time sequence.
- Description of materials that will be distributed in the course
- List of names and signatures of authorized individuals to sign certificates
- Copy of certificate attendees will receive
- Bio for instructor(s)

FOR OFFICE USE ONLY

<input type="checkbox"/> APPROVED	CE HOURS:	YEAR APPROVED FOR:
<input type="checkbox"/> DENIED	REASON:	
SIGNATURE:		DATE: