



PRACTICAL EXAMINATION APPLICATION
 NORTH DAKOTA STATE BOARD OF COSMETOLOGY
 SFN 61730 (09-2023)

- This application must be received in our office at least **two weeks prior to the testing date** with the correct fee.
****No payment will be accepted without a complete application.****
- Testing dates are subject to cancellation.

APPLICANT INFORMATION

Student Name	Social Security Number	Today's Date	
Telephone Number	Email Address		
Address	City	State	ZIP Code
Name of School Attended*		Graduation Date	

*If school is out-of-state, you must also provide the following:

- An official Transcript and Certificate of Completion
- A copy of your Birth Certificate
- High School Diploma or GED

Military Status: Are you a member, or spouse of a member, of the active or a reserved armed services of the United States? <input type="checkbox"/> No <input type="checkbox"/> Yes - provide proof of military/spouse status, such as military orders or a current base identification
In the past 5 years, have you been charged or convicted of an offense other than a minor traffic violation? <input type="checkbox"/> No <input type="checkbox"/> Yes - attach a written explanation, including nature of offense, action taken, and a copy of the criminal judgment

EXAMINATION APPLYING FOR:

Preferred Date of Examination		
	\$40.00	Cosmetology Practical* Fee
	\$50.00	Esthetics Practical Fee
	\$50.00	Manicure Practical Fee
	\$90.00	Instructor Practical Fee

*The following portion needs to be completed for Cosmetology course only

TO BE COMPLETED BY AUTHORIZED SCHOOL PERSONNEL

Hours Completed at Time of Application*	As of Date
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* Must complete **1300** minimum hours in Cosmetology program

Signature of Authorized School Personnel	Date
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I attest that the information stated is true and correct to the best of my knowledge.

Student Signature	Date
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Submit complete application and fee to:

ND State Board of Cosmetology
 4719 Shelburne St Suite 1
 Bismarck, ND 58503

Questions:

Email: bocinfo@nd.gov
 Call: (701) 224-9800
www.ndcosmetology.com

Privacy Act Statement: The disclosure of the individual's Social Security Number on this form is mandatory pursuant to North Dakota Century Code 43-50-02. Social Security Number is used for identification and verification purposes. Not providing the Social Security Number will cause the application to not be processed.