

**Gaston College**  
**Cosmetology Instructor Program Application**

Today's Date: \_\_\_\_\_

**PERSONAL INFORMATION:**

NAME \_\_\_\_\_ Student ID or SS# \_\_\_\_\_

ADDRESS \_\_\_\_\_  
Street City, State Zip Code

DATE OF BIRTH \_\_\_\_\_ EMAIL \_\_\_\_\_  
Month/Day/Year

TELEPHONE (H) \_\_\_\_\_ (C) \_\_\_\_\_

**EDUCATIONAL INFORMATION:**

Do you have an AAS Degree in Cosmetology?  YES  NO

Do you have a valid North Carolina Cosmetology license?  YES  NO

How many years of experience do you have as a licensed Cosmetologist? \_\_\_\_\_

I CERTIFY THAT ALL THE INFORMATION ON THIS FORM IS CORRECT AND COMPLETE.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature (if applicant is a minor)

\_\_\_\_\_  
Date

I understand individuals who have been convicted of a felony will be required to complete a pre-application review by the NC Cosmetic Arts Board **prior** to making application for a license to practice in the state of North Carolina.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature (if applicant is a minor)

\_\_\_\_\_  
Date

Gaston College is committed to fair and equal treatment for all persons without regard to race, color, sex, religion, or national origin, age or disability.