

**INFORMATION & INSTRUCTIONS – BARBER OR BEAUTY APPRENTICE  
(RETAIN FOR FUTURE REFERENCE)**

Access this form via our website at: [www.hawaii.gov/dcca/areas/pvl](http://www.hawaii.gov/dcca/areas/pvl)

This apprentice application is to be used for either **Barber** or **Beauty** Apprentice registration. Act 87, effective **April 29, 1997**, created a **cross-over training** provision that allows licensed barbers to train beauty apprentices in the hairdresser category, and licensed beauty operators in the hairdresser category to train barber apprentices. The training can occur in either a licensed **Barber** or **Beauty Shop**. The trainers for the other beauty operator categories (esthetician and nail technician) shall be licensed beauty operators in the appropriate categories.

Barber or Beauty apprenticeship is another pathway, other than schooling, to obtain training towards licensure. The apprenticeship program provides the **Registered Apprentice** with an opportunity to learn and train in either the practice of barbering or cosmetology.

Barber or Beauty Apprenticeship **training** information is as follows:

1. Apprenticeship training shall begin only after issuance of an **Apprentice Permit** that includes assignment of the **Apprentice Registration Number** along with an **effective date** and an **expiration date**.
2. The apprentice permit will be **MAILED TO and ISSUED IN CARE OF THE SHOP** identified on the application. **Be advised that apprentice registrations are mailed to the official mailing address of the shop as filed with the Board.** If you prefer that your registrations be mailed directly to your **Hawaii business address** on record, we ask that you provide either a self-addressed envelope or attach a mailing label with your Hawaii business address when submitting your Apprentice Registrations for processing.
3. Apprenticeship training shall occur only at **licensed shops** under supervision of **licensed barbers** or **beauty operators** in the appropriate license category. It is the responsibility of the apprentice applicant to seek the shop and supervisor willing to participate in the apprenticeship training.
4. The apprenticeship training **curriculum** is provided for in the Administrative Rules of the Board of Barbering and Cosmetology:  
 HAR §16-73-20.5 for barber apprentices, and  
 HAR §16-78-19 for beauty apprentices.

5. These are the minimum hours of apprenticeship training required for the following license categories:

<u>LICENSE CATEGORIES</u>	<u>APPRENTICESHIP HOURS</u>
Barber.....	1,500
Cosmetologist (Hairdresser, Esthetician and Nail Technician) .....	3,600
Hairdresser (Hair only) .....	2,500
Esthetician (Skin Care and Makeup).....	1,200
Nail Technician (Manicure and Pedicure) .....	700

6. The **MAXIMUM** length of time of apprenticeship training for the beauty apprentice is **42 months at a minimum of 20 hours a week**; the **MAXIMUM** for the barber apprentice is **12 months** for initial training and **6 months** for remedial training.
7. The licensed beauty operator shall be able to train only **one (1)** apprentice per apprenticeship period, and the licensed barber shall be able to train **two (2)** apprentices during the apprenticeship period. In order to be the licensed supervisor, the beauty operator or barber must have at least one year of licensed experience.
8. **Training Progress Reports** provide condensed information about the progress of the apprentice by subject, hours, and/or number of operations and procedures on a monthly basis. The SHOP OWNER and SUPERVISING OPERATOR SHALL BE RESPONSIBLE for the accuracy and submission of the apprentice's Training Progress Reports which are to be turned in to the Board on a periodic basis, and copies of the report should be also provided to the apprentice, supervisor and shop owner. The "**CERTIFICATE OF COMPLETION/Withdrawal from Apprenticeship Training**" form should be used to indicate the total amount of training credited to the apprentice.
9. Any **CHANGES** that impact the apprenticeship program, the registered apprentice, the supervising operator, and/or the shop must be reported to the Board. A new application and fees must be submitted when changing supervisors and/or shops.
10. Prior barber/beauty training (schooling or apprenticeship) will generally be recognized provided the training is **not more than three (3) years old** and verification of the training is provided to the Board. The Board relies on the shop and supervisor after an evaluation to determine the amount of hours that can be credited.

11. **UPON COMPLETION** of the apprenticeship training, the apprentice is responsible to apply for a barber or beauty operator license by completing a **Barber or Beauty Operator Application**. The type and amount of training should determine the appropriate license category. For applications, call our office at (808) 586-3000 or access an application via our website at: [www.hawaii.gov/dcca/areas/pvl](http://www.hawaii.gov/dcca/areas/pvl). Click on "Barbering and Cosmetology".

### Apprentice Registration Requirements

<b>AGE</b>	17 years of age for <b>Barber apprentices</b> . 16 years of age for <b>Beauty apprentices</b> .
<b>EDUCATION</b>	<b>COSMETOLOGY (All categories) applicants only:</b>  Provide evidence of having an education equivalent to the completion of high school. All documents must be in ENGLISH. Any of the following may be acceptable: <ol style="list-style-type: none"><li>1. Photocopy of a high school diploma or a General Education Certificate (GED);</li><li>2. Transcript of high school record;</li><li>3. Official statement of having a high school education from an official of the school or other authority; or</li><li>4. Evidence of graduating or attending college.</li></ol> NOTE: Documents written in a <b>FOREIGN</b> language must be translated into English. Submit a copy of the foreign document, an original English translation, which includes a statement that the translation is accurate AND that the translator is fluent in that foreign language and English. The translator must be someone other than the applicant AND sign the letter.  <b>Example of translator's statement:</b> The following is an <b>example</b> of a translator's statement and contains all of the elements required by the Board.  "I certify that I am competent in both the English language and the _____ language (language of the document) and that this is a true and complete translation of the foreign language original."
<b>APPLICATION FORM</b>	Type or print legibly in <b>dark ink</b> . Illegible writing could result in processing delays. Complete the application form and answer all questions. Only a completed application is acceptable. If a question or item is not applicable, then indicate "Not applicable" or "NA". <b>Sign and date</b> the application.  Failure to provide all the requested information will delay the processing of your application.
<b>SOCIAL SECURITY NUMBER</b>	Your social security number is used to verify your identity for licensing purposes and for compliance with the below laws. For a license to be issued you must <b>provide your social security number or your application will be deemed deficient and will not be processed further</b> . The following laws require that you furnish your social security number to our agency: <u>FEDERAL LAWS:</u> <b>42 U.S.C.A. §666 (a)(13)</b> requires the social security number of any applicant for a professional license or occupational license be recorded on the application for license; and If you are a licensed health care practitioner, <b>45 C.F.R., Part 61, Subpart B, §61.7</b> requires the social security number as part of the mandatory reporting we must do to the Healthcare Integrity and Protection Data Bank (HIPDB), of any final adverse licensing action against a licensed health care practitioner. <u>HAWAII REVISED STATUTES ("HRS"):</u> <b>§576D-13(j), HRS</b> requires the social security number of any applicant for a professional license or occupational license be recorded on the application for license; and <b>§436B-10(4) HRS</b> which states that an applicant for license shall provide the applicant's social security number if the licensing authority is authorized by federal law to require the disclosure (and by the federal cites shown above, we are authorized to require the social security number).
<b>FEES</b>	<b>Attach</b> the fee of <b>\$45</b> payable to COMMERCE & CONSUMER AFFAIRS, which includes a non-refundable \$20 application fee and \$25 registration fee.  <b>NOTE:</b> <i>One of the numerous legal requirements that you must meet in order for your new registration to be issued is the payment of fees as set forth in this application. You may be sent a registration before the payment you sent us for your required fees is honored by your bank. If your payment is dishonored, you will have failed to pay the required fee and your registration will not be valid, and you <b>may not</b> do business under that registration. Also, a \$25.00 service charge shall be assessed for payments that are dishonored for any reason.</i>

**LAWS & RULES**

Copies of the laws and rules are available by submitting a written request to the Board's address below.

Barber laws, Chapter 438, HRS, and administrative rules, Chapter 16-73, HAR.  
Cosmetology laws, Chapter 439, HRS, and administrative rules, Chapter 16-78, HAR.  
Chapter 436B, HRS, Professional and Vocational Licensing Act.

The laws and rules are also posted on our website at: [www.hawaii.gov/dcca/areas/pvl](http://www.hawaii.gov/dcca/areas/pvl).  
Look under "Barbering and Cosmetology".

Apprenticeship training should include training on the laws and rules, and the licensing examination includes questions regarding the laws and rules.

**Instructions for "Yes" Answers to questions (6) thru (8) of the Application for License (BACOS-01)**

A. The following documentation must be submitted with the license application. Applications for license will not be considered without this material.

1) Questions 6 and 7 refer to complaints, charges of unlicensed activity, or pending disciplinary actions for any profession, occupation, or license. If your answer is "yes" to one or more of these questions, read paragraph "B" below, AND you must submit the following:

- i. A statement signed by you explaining the circumstances; and
- ii. Copies of any documents from the agency, including final orders, petitions, complaints, finding of facts and conclusions of law, and any other relevant documents;

2) If your application indicates a criminal conviction, read paragraph "B" below, and you must submit the following:

- i. A statement signed by you explaining the circumstances leading to the conviction and detailing all activities since the conviction, including employment and business involvements. Include job title, period of employment, employer's name, description of duties, training attended, and educational courses attended;
- ii. A copy of the court order, verdict, and terms of sentence; and
- iii. If applicable, a copy of the terms of probation and/or parole and a signed statement from your probation or parole officer as to your compliance with the court orders, reputation for or record of experience, competency, honesty, truthfulness, financial integrity, and fair dealing;
- iv. Signed statements from employers, business associates/clients, and others who can attest to your business dealings, including a statement as to your reputation for or record of experience, competency, honesty, truthfulness, financial integrity and fair dealing.
- v. A current criminal history record check in your name, which you may obtain from the Hawaii Criminal Justice Data Center. Contact the department of the Attorney General, Hawaii Criminal Justice Data Center, Kekuanao'a Building, 456 S. King Street, Rm. 101, Honolulu, HI 96813. Ph: (808) 587-3100 or visit their website at: [www.hawaii.gov/hcjdc](http://www.hawaii.gov/hcjdc) to request a "Criminal History Record Check" form.

B. If you answered "yes" to questions (6) through (8), your application may be reviewed at a Barbering and Cosmetology Board meeting if you have provided all applicable information and documents as described above. The Board will not review incomplete applications. If you wish to present oral testimony at the meeting, submit a written request with your application.

**RELEASE OF INFORMATION**

If an agency or individual is assisting you with the licensure process, we will not be able to release any information to them unless you provide us with authorization. If you wish to do so, please complete the portion on **Release of Information to Third Party**, sign and date it.

**BOARD'S ADDRESS**

Mail or deliver the complete application and appropriate fees to:

Mailing Address:

OR

Deliver to Office Location:

*BOARD OF BARBERING & COSMETOLOGY  
DCCA, PVL Licensing Branch  
P.O. Box 3469  
Honolulu, Hawaii 96801  
Phone: (808) 586-3000*

*BOARD OF BARBERING & COSMETOLOGY  
DCCA, PVL Licensing Branch  
335 Merchant Street, Room 301  
Honolulu, Hawaii 96813*

**OTHER INFORMATION**

Apprentice registrations will not be issued the same day the application is received. Therefore, it is the applicant's responsibility to allow sufficient time for the review and approval of all documents submitted.

**ABANDONED APPLICATIONS**

Pursuant to HRS §436B-9 your application shall be considered abandoned and shall be destroyed if you fail to provide evidence of continued efforts to complete the licensing process for two consecutive years. The failure to provide evidence of continued efforts includes but is not limited to: (1) failure to submit any required information and documents requested by the licensing authority within two consecutive years from the last date the documents and information were requested, or (2) failure to complete any additional requirements for licensure that remain after approval of your application, such as attempting to complete an exam requirement, within two consecutive years from the date your application was approved, or (3) failure to provide the licensing authority with any written communication during two consecutive years indicating that you are attempting to complete the licensing process. If an application is deemed abandoned the applicant shall be required to reapply for licensure and comply with the licensing requirements in effect at the time of the reapplication.



Name of Applicant: \_\_\_\_\_

**SECTION 3 – To be completed by the APPRENTICE APPLICANT**

Circle your answers. If response is "Yes" to questions 6 to 8, refer to the instructions for additional documents that must be submitted with this application.

- 1) Are you at least **17** years of age for **barber** apprentice, or **16** years of age for **beauty** apprentice? ..... YES NO
- 2) Are you a U.S. citizen, a U.S. national, or an alien authorized to work in the United States? ..... YES NO
- 3) **Cosmetology (includes cosmetologist, hairdresser, esthetician & nail technician) Apprentice Applicant only.**  
Do you have an education equivalent to the completion of high school? **ATTACH VERIFICATION OF HIGH SCHOOL.** ..... YES NO  
*(Foreign graduates attach both foreign diploma and translation with translator's statement.)*
- 4) Have you every attended or are you now attending barber or beauty school? ..... YES NO  
If "yes",
  - Name of school? \_\_\_\_\_
  - Name of state? \_\_\_\_\_
  - When did you complete? \_\_\_\_\_
  - How many hours did you complete? \_\_\_\_\_

**Note:** Submit copy of your transcript(s) showing a breakdown by subjects and hours.
- 5) Do you hold or have you ever held or applied for a barber or beauty license, permit, or apprentice registration in Hawaii or any other jurisdiction? ..... YES NO  
If "yes": What state or country? \_\_\_\_\_  
Type of license held \_\_\_\_\_ Do you have 1 year of licensed experience? ..... YES NO
- 6) Has any license ever been suspended, revoked or otherwise subject to disciplinary action? ..... YES NO
- 7) Are there any disciplinary actions pending against you? ..... YES NO
- 8) In the past 20 years have you ever been convicted of a crime in which the conviction has not been annulled or expunged? ..... YES NO

**Affidavit of Applicant:**

I hereby certify that the statements, answers, and representations made in this application and in the documents attached are true and correct. I understand that any misrepresentation is grounds for refusal to grant or subsequent revocation of license and is a misdemeanor (Section 710-1017, Sections 436B-19, 438-14, and 439-19, Hawaii Revised Statutes). I further certify that I have read, understand, and will abide by all laws and rules pertaining to the Board of Barbering and Cosmetology.

Date \_\_\_\_\_

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

**Release of Information to Third Party:**

To assist me in the licensing process, I authorize the staff to release any and all information regarding my application (including but not limited to, application status) to:

Print Name of Individual who is assisting you: \_\_\_\_\_

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

\_\_\_\_\_  
Date

# ***IMPORTANT NOTICE***

## BOARD OF BARBERING AND COSMETOLOGY

### New License Requirement

Effective June 17, 2003 and pursuant to Hawaii Revised Statutes section 436B-10 and federal law, it is the policy of the State of Hawaii ("**State**") Board of Barbering and Cosmetology ("**Board**") that, in addition to meeting the education, experience, and examination requirements for licensure, an applicant for a Hawaii barber's, cosmetologist's, hairdresser's, esthetician's, or nail technician's license is required to be either **a United States citizen, a United States national, or an alien authorized to work in the United States.**

**This means that, even if an applicant meets the education, experience, and examination requirements for licensure, that applicant shall not be issued a license if that applicant is not a U.S. citizen, a U.S. national, or an alien authorized to work in the U.S.**

However, the Board will issue the applicant a **conditional approval** that signifies that the applicant has met the education, experience, and examination requirements for licensure; provided that this conditional approval shall **not** be considered a license to engage in the profession and shall **not** authorize the applicant to work in our State. To obtain authorization to work in our State, the applicant shall be required to contact the U.S. Citizenship and Immigration Services ("**USCIS**"). In addition, federal law [42 U.S.C.A. 666 (a)(13)] requires that once an applicant is authorized by the USCIS to work in the U.S., the applicant must supply his/her Social Security Number ("**SSN**") so that states can use this information for child support enforcement purposes.

Once the applicant submits evidence to the Board that the USCIS has authorized the applicant to work in the U.S. (without conditions or other encumbrances), **provides a SSN**, and meets all of the licensing requirements in effect at that time (including, but not limited to, the requirement that the applicant has not been convicted of any crime that is directly related to the profession), the applicant shall be issued a full and unrestricted license.

This conditional approval shall be valid for two (2) years. An applicant must obtain the appropriate USCIS authorization within this two (2) year period in order to have a license issued. If the applicant is unable to meet this deadline, the applicant may be required to reapply for licensure and meet all of the requirements in effect at that time.