

# BITTERROOT SCHOOL OF COSMETOLOGY

## ADMISSION APPLICATION (\$50.00 FEE)

COURSE CHOICE;  COSMETOLOGY  MANICURING  TEACHER TRAINING

### PERSONAL DATA

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street or PO Box City State Zip

Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Male  Female Marital Status:  Married  Single  Divorced  Separated

Are you a U.S. Citizen?  yes  no. If you answered no do you have the legal right to remain permanently in the U.S.?  yes  no. Alien Registration # \_\_\_\_\_

Are you a veteran?  yes  no. Number of Dependents \_\_\_\_\_ Ages: \_\_\_\_\_

### EDUCATIONAL DATA

School last attended: \_\_\_\_\_ Address or Phone \_\_\_\_\_

High School Diploma or GED  yes  no (required prior to starting classes)

### PHYSICAL DATA

Do you have any physical or learning disabilities which may limit your ability to perform the training you are applying for?  yes  no

### FINANCIAL DATA

Name and address of person(s) responsible for training expenses incurred.

Name: \_\_\_\_\_ Phone # \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_

Signatures: \_\_\_\_\_  
Person Financially Responsible Applicant

Date: \_\_\_\_\_ Applicants e-mail address: \_\_\_\_\_

**INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED FOR ENROLLMENT. THE \$50.00 APPLICATION FEE IS NON REFUNDABLE (UNLESS APPLICANT IS REFUSED ENROLLMENT), AND MUST ACCOMPANY THIS APPLICATION. PLEASE SCHEDULE YOUR INTERVIEW ASAP WITH THE REGISTRAR/DIRECTOR TO RESERVE A SEAT IN THE NEXT AVAILABLE CLASS.**