



NEW HAMPSHIRE



APPLICATION

Reinstate, Out of State and Apprentice Candidates 2010

It is recommended that you read all of the information contained in the Candidate Information Bulletin (CIB). A CIB may be obtained from your school or visit our web site at www.DLRoope.com

You are required to complete both sides of this application. Please **PRINT** clearly using a ballpoint pen or typewriter. Submit a cashier's check or money order made payable to DL Roope Administrations Inc. **PERSONAL CHECKS WILL NOT BE ACCEPTED AND MAY DELAY SCHEDULING.** Fees are **NOT** refundable or transferable and will be applied to the approved examination date. Examination dates and deadline dates are provided on the back of this application. Applications must be received by 5:00 pm eastern time on or before the deadline date. Applications received after the deadline date will be scheduled based on space availability. If you have missed the deadline date or if the examination is full, you will be scheduled for the next available examination date. Candidates will receive an admission letter after the deadline date. Your admission letter will indicate the date and time of your scheduled examination. This will allow approximately 10 days for travel arrangements.

If you have a disability and require accommodations in accordance with the Americans with Disabilities Act of 1991, please request the required forms from your school or contact DL Roope Administrations Inc. at 1-888-375-2020. Documentation must be submitted with this application and is subject to approval.

PLEASE PRINT OR TYPE THE FOLLOWING INFORMATION:

----- LAST NAME	----- FIRST NAME	----- M I	----- DATE OF BIRTH
----- MAILING ADDRESS	----- CITY/TOWN	----- STATE	----- ZIP CODE
----- SOCIAL SECURITY #	----- HOME PHONE #	----- WORK PHONE #	
----- CELL PHONE #	----- PHOTO IDENTIFICATION # (i.e. Drivers License, Photo ID etc.)	----- E-MAIL ADDRESS	

PLEASE CHECK THE EXAMINATION THAT YOU ARE APPLYING FOR:

- Candidate Examination (Written, State Law & Practical) – fee \$124.00**
 - Cosmetologist
 - Barber Styling
 - Barber 1 (no chemical)
 - Esthetician
 - Nail Technician
- Instructor Candidate Examination (Written & Practical) – fee \$175.00**
 - Cosmetologist Instructor
 - Barber Styling Instructor
 - Barber 1 Instructor
 - Esthetician Instructor
 - Nail Technician Instructor

ATTENTION: PLEASE CHECK ONLY ONE BOX FOR DELIVERY OF YOUR RESULT LETTER:

- Result letter available on DL Roope website. Result letters will be available to view and print from our website 24 to 48 hours **AFTER** your examination date. Please refer to the Candidate Information Bulletin for printing information.
- Result letter mailed. (If your result letter is mailed to you it will **NOT** be available on our website to view or print.)

For office use only: Money order # _____ Total Amt. Pd _____		Initials _____	App. _____
O/R _____	Ex Class _____	Ex Area _____	SC# _____
Month _____	TC _____	App Received Date _____	NH

NH EXAMINATION DATES AND DEADLINE DATES

EXAMINATION DATES	~	DEADLINE DATES	EXAMINATION DATES	~	DEADLINE DATES	EXAMINATION DATES	~	DEADLINE DATES
November 2, 2009	~	October 6, 2009	April 12, 2010	~	March 19, 2010	September 27, 2010	~	September 3, 2010
December 7, 2009	~	November 17, 2009	May 17, 2010	~	April 23, 2010	November 8, 2010	~	October 18, 2010
January 11, 2010	~	December 18, 2009	June 28, 2010	~	June 7, 2010	December 6, 2010	~	November 16, 2010
February 22, 2010	~	January 29, 2010	August 2, 2010	~	July 16, 2010			

TRAINING WAS COMPLETED BY:

- *BOARD APPROVED INSTRUCTOR – WORK EXPERIENCE QUALIFICATIONS (SC # 3333)
- *BOARD APPROVED APPRENTICE TRAINING IN A LICENSED ESTABLISHMENT BY A QUALIFIED SUPERVISOR. (SC # 1111)
- *BOARD APPROVED OUT OF STATE APPLICANT. (SC # 0000)
- *BOARD APPROVED REINSTATE BY EXAMINATION APPLICANT. (LAPSED LICENSE) (SC # 2222)

***CANDIDATES MUST ATTACH A VERIFICATION OF ELIGIBILITY FORM FROM THE NEW HAMPSHIRE STATE BOARD OF BARBERING, COSMETOLOGY & ESTHETICS.**

APPLICATION AUTHORIZATION

I affirm that the applicant named herein has successfully completed the requirements established by the New Hampshire State Board of Barbering, Cosmetology and Esthetics for examination eligibility, and all information provided in connection with this application is true to the best of my knowledge and belief. I affirm this with the understanding that any omissions, inaccuracies or failure to make full disclosures may be deemed sufficient reason to suspend or revoke a license issued by the Board.

I hereby understand that receiving a passing score does not guarantee licensure and that all requirements for licensure must be met as set forth by the New Hampshire State Board of Barbering, Cosmetology and Esthetics.

I also understand that it is recommended that I completely read all of the information contained in the Candidate Information Bulletin (CIB). A CIB may be obtained at www.DLRoope.com.

I further understand that I will be required to present current government issued Photo Identification (Drivers License or State ID) to be admitted to my scheduled examination. If I cannot be admitted, my examination fee will be forfeited.

APPLICANT SIGNATURE (REQUIRED).....

APPLICANT PRINTED NAME (REQUIRED).....

PHOTO IDENTIFICATION NUMBER (REQUIRED).....DATE OF BIRTH.....

FOR REGULAR MAIL DELIVERY (ALLOW 2- 5 DAYS):

DL Roope Administrations Inc.
P.O. Box 631
Hampden, ME 04444-0631

FOR OVERNIGHT DELIVERY:

DL Roope Administrations Inc.
50 Dave's Way
Hermon, ME 04401

Toll free: 888-375-2020
Website: www.DLRoope.com