CERTIFICATE BY STUDENT

	attended							
from the day of	until the day of ,							
continuously, with the following	ng exceptions:							
	·							
I	, hereby certify that the foregoing copy is							
a correct account of the cours	se completed by me at							
that my work at the school ha	se completed by me at							
a licensed instructor, and I f	urther state that the information contained herein is							
true and correct to the best of	f my knowledge.							
	(Student)							
	(Student)							
Subscribed and sworn to before	ore me this day of ,							
0541	N							
SEAL	Notary Public Official Signature							
	Expiration Date:							
INS.	TRUCTORS CERTIFICATE							
•								
I.	, hereby certify that I am a licensed							
instructor in barbering / cosm	etology in							
school, that I have instructe	d the above named person and that the foregoing							
statement is a true and corre	ct record of the instruction obtained and the practice							
performed by	(student).							
	(Instructor)							
Subscribed and sworn to bef	fore me this day of ,							
	oro into uno <u></u> aay or <u></u> , <u></u> .							
SEAL	Notary Public Official Signature							
	Expiration Date:							

IDAHO BARBER AND COSMETOLOGY SERVICES LICENSING BOARD

Idaho Division of Occupational and Professional Licenses 11341 W. Chinden Blvd., Bldg. #4, Boise ID 83714 or P.O. Box 83720, Boise ID 83720-0063

Phone: (208) 334-3233 Website: https://dopl.idaho.gov
E-mail: bcb@dopl.idaho.gov

STUDENT RECORD OF INSTRUCTION

Esthetician

This record shall be maintained by the school and verified by both the student and an instructor of the school. The record shall be kept to date and available upon request for inspection by the Bureau during school hours.

This is the only official record of training and shall be submitted to the Bureau within thirty (30) days of the student's completion of training.

Name
Address
Date & Place of Birth
Date of Admission to Cosmetology School
Last Day of Attendance
Name & Location of Cosmetology School

Esthetician

STUDENT		SCHOOL		DATE OF ADMISSION		DATE OF COMPLETION		DAYS PRESENT			
MONTH AND YEAR	Massage/ Manipulation Application of Creams, Lotions, etc	Cosmetics	Machine Application Use of Mechanical & Electrical Equip.	Eyebrow Arch & Hair Removal	Laws & Rules	Disinfection, Safety Precautions	Theory Grade	Practical Grade	Theory Work Hours	Clinical Work Hours	Total Daily Hours
1.											
2.											
3.											
4.											
5.											
6.											
7.											
8.											
9.											
10.											
11.											
12.											
13.											
14.											
15.											
16.											
17.											
18.											
19.											
20.											
TOTAL											
							N	INIMUM HOU	RS REQUIREI	D =	600
REMARKS:		LIST OF INSTRUCTORS FOR ENTIRE COURSE:			DURSE:						
						1					
							1				
							1				
							-				
							-				
							-				
					1		1				