



TEXAS DEPARTMENT OF LICENSING AND REGULATION

P.O. Box 12157 - Austin, Texas 78711-2157
(800) 803-9202 - (512) 463-6599 - FAX (512) 475-2871
www.tdlr.texas.gov - cs.barbers@tdlr.texas.gov

APPLICATION FOR:

Texas Barber Technician/Hair Weaving Specialty License

PURSUANT TO OCCUPATIONS CODE, CHAPTER 1601

DO NOT WRITE IN THE FEE AREA IMMEDIATELY BELOW

Table with 6 columns: FEE, RECEIPT NUMBER, EVENT CODE, FEE AMOUNT, PMT. AMOUNT, MONEY TYPE. Row 1: License Fee, \$30.00

USE THIS FORM IF YOU HAVE A BARBER TECHNICIAN LICENSE AND A BARBER HAIRWEAVING CERTIFICATE

DO NOT WRITE ABOVE THIS LINE

NOTE: ALL INFORMATION MUST BE TYPED OR PRINTED IN INK.

1. Applicant's Full Name:

Last (Family Name) First (Given Name) Middle

2. Applicant's Social Security No.:

Note: If you have a Social Security Number (SSN), Section 231.302 of the Texas Family Code REQUIRES all applicants to disclose their SSN when filing an application. The SSN that is provided is confidential and is required to enforce Child Support orders.

3. Do you have a Social Security Number? (circle one) YES NO

4. Date of Birth: Month Day Year 5. Gender: MALE FEMALE (circle one)

6. Mailing Address and Contact Information: (USED FOR ALL CORRESPONDENCE) (P.O. Box is allowed for this address.)

Number, Street and Apartment No. - OR - P.O. Box Number
City State Zip Code Country Area Code Phone Number
FAX Number: Area Code Phone Number E-mail Address (johndoe@aol.com for example)

7. Barber Technician License # Barber Hair Weaving Specialty Cert. #

8. Have you ever been convicted of, or placed on deferred adjudication for, any misdemeanor or felony, other than a minor traffic violation? YES NO (check one) If YES, attach a "Criminal History Questionnaire" to this application. A Criminal History Questionnaire may be found at www.tdlr.texas.gov/barbers/barberforms.htm

9. Have you had a license, certification or registration suspended, revoked or denied in any state? YES NO (check one) Please note this is not referring to a driver's license, but rather any type of work-related license, certification or registration. If YES, attach a "Disciplinary Action Questionnaire" with this application. A Disciplinary Action Questionnaire may be found at: www.tdlr.texas.gov/barbers/barberforms.htm

STATEMENT OF APPLICANT

I certify that I will comply with all applicable provisions of the Texas Occupations Code, Chapters 51, 1601 and 1603; Tex. Admin. Code, Chapter 60; and the Barber Administrative Rules, Tex. Admin. Code, Chapters 82. I understand that providing false information on this application may result in revocation of the license I am requesting and the imposition of administrative penalties.

Date Signed Signature of Applicant

NOTE: State law prohibits renewing a license more than once after a licensee has defaulted on a student loan guaranteed by the Texas Guaranteed Student Loan Corporation (TGS LC) unless the licensee has entered into a repayment agreement with TGS LC. YOU SHOULD CONTACT TGS LC BEFORE FILING THIS APPLICATION if you have defaulted on a student loan. An application or renewal may be rejected if this agency has received information from TGS LC that the applicant has defaulted on a student loan. The Texas Guaranteed Student Loan Corporation can be contacted at: Texas Guaranteed Student Loan Corporation, P.O. Box 15996, Austin, Texas 78761-5996; Telephone: 1-800-222-6297.