



TEXAS DEPARTMENT OF LICENSING AND REGULATION

Education & Examination Division

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Exam.sme.app@tdlr.texas.gov www.tdlr.texas.gov

APPLICATION FOR THE TEXAS COSMETOLOGY EXAMINATION DEVELOPMENT COMMITTEE

PLEASE PRINT

Applicant Name		Business Name		
Business Address		Email Address		
City, State & Zip		Business Phone		Alt #

List All Cosmetology Related Licenses/Certificate Numbers	State/Date Licensed	Years Held	Active/Inactive
a.			
b.			
c.			

List Any Other Certifications, Contributions, or Other Qualifications You Want TDLR to Consider: (YOU MAY SUBMIT AN ATTACHMENT TO YOUR APPLICATION, AS NEEDED.)

Do You Now or Have You Ever Taught a Cosmetology Exam Prep Class? (YOU MAY SUBMIT AN ATTACHMENT TO YOUR APPLICATION, AS NEEDED.)	YES	NO
List Class Titles and Dates:		

If selected for the Texas Cosmetology Examination Development Committee, I understand that considerable effort will be expected, and that appointment carries an obligation to regularly attend meetings, actively participate in the generation of exam content, and to timely address assigned tasks, draft reports, and ballots. I agree to abide by the rules and policies of the Texas Department of Licensing and Regulation, and notify the Department of any change in the information provided on this application, including change in employment.

As a condition of service on this Committee I agree to maintain the security of all examinations developed. I will not provide to any person or assist any person attempting to obtain information concerning the examination content developed by this Committee. I may participate in seminar courses, program or activity to assist individuals in the preparation for the cosmetology examination. However, I shall uphold and abide by the confidentiality copyright materials contained in the examination content. Your contribution to the development and validation of examination questions and other written or electronic media are the sole property of the Texas Department of Licensing and Regulation.

I hereby attest that all the information provided in this application for Texas Committee appointment is true and accurate.

Signature _____ Date _____