**APPLICATION FOR:**

**Texas Cosmetology Esthetician Curriculum Approval (750 Hour)**

**PURSUANT TO TITLE 9, OCCUPATIONS CODE, CHAPTER 1602**

<table>
<thead>
<tr>
<th>School Name:</th>
<th>License #:</th>
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</table>

**School’s Mailing Address**

<table>
<thead>
<tr>
<th>Number, Street and Apt. No</th>
<th>-OR-</th>
<th>PO Box Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>State</td>
<td>Zip Code</td>
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<tr>
<th>Contact Person</th>
<th>Email Address (<a href="mailto:johndoe@aol.com">johndoe@aol.com</a> for example)</th>
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<tr>
<td>(_____ )</td>
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<table>
<thead>
<tr>
<th>Area Code - Contact Phone Number</th>
<th>Area Code – Alternate Phone Number</th>
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</table>

Place your initials in the box to confirm compliance with the curriculum content requirements of 1602.453

**I confirm our school will develop our daily lesson plans in accordance with 83.120 to complete 750 hours of instruction.**

Place an X in **only 1 box** to confirm the manner and format of reporting student hours in accordance with 83.72.

**CLOCK HOURS**

- Schools record of student’s accrued time in accordance with 83.72 (m) will be clock hours.

**CREDIT HOURS**

- Schools record of student’s accrued time will be credit hours which will be maintained in accordance with 83.72 (n) for each course or module.

Provide below the number of weeks, hours and total hours which should total 750 hours for full and/or part time students. *(This is an estimated number of weeks and hours)*

**Full-Time Students:**

- The course term will be _____ number of weeks for _____ number of hours each week totaling _____ hours.

**Part-Time Students:**

- The course term will be _____ number of weeks for _____ number of hours each week totaling _____ hours.

**STATEMENT AND SIGNATURE OF APPLICANT(S)**

By signing this application, I certify all information submitted on this application is true and accurate. I certify that I will comply with all applicable provisions of the Texas Occupation Code, Chapters 51, 1602 and 1603; Texas Administrative Code, Title 16, Chapter 60 and the Cosmetology Administrative Rules, Texas Administrative Code, Title 16, Chapter 83. I understand that providing false information on this application may result in revocation of our license or the approval being requested and the possible imposition of administrative penalties.

| Printed Name of Owner, Officer, or Authorized Representative | Signature of Owner, Officer, or Authorized Representative | Date Signed |
CERTIFICATION STATEMENT OF REQUIRED DOCUMENTATION

School Name: License #:

Required Equipment will be provided: facial chair, lighted magnifying glass, woods lamp, dry sanitizer, steamer machine, brush machine for cleaning, vacuum machine, high frequency for disinfection, product penetration, stimulation, galvanic machine for eliminating encrustations, product penetration, paraffin bath and wax, facial bed, mannequin head and wet sanitizer.

By placing a check in each applicable box below and by my signature, I certify that the required documentation will be maintained and made available to the Department. All required information will be provided to all prospective students. I certify that I am providing accurate information and will comply with all applicable provisions of the Texas Occupations Code, Chapters 51, 1602 and 1603; Tex. Admin. Code, Title 16, Chapter 60 and the Cosmetology Administrative Rules, Tex. Admin. Code, Title 16, Chapter 83. I understand that providing false information on this application may result in revocation of the license or approval I am requesting and the imposition of administrative penalties.

Place a √ in each box:

- Course Outline (in accordance with §1602.452, this is your course syllabus)
- Tuition & Fee Schedule (in accordance with §1602.452; public secondary schools are exempt)
- School’s Tuition Refund Policy (in accordance with §1602.452-457-458; public secondary or public post-secondary schools are exempt)
- Attendance Policy and Grading Policy (in accordance with §1602-451-452)
- Withdrawal or Termination Policy (in accordance with §1602.459)
- Make-up Hour Policy (in accordance with §1602.452)
- Daily Lesson Plans (in accordance with §1602.453)

STATEMENT OF APPLICANT(S)

Printed Name of Owner, Officer, or Authorized Representative  Signature of Owner, Officer, or Authorized Representative  Date Signed

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