

# Out-of-State Barber License Transfer Application

## Personal Information

Full Name:

Date of Birth:

Address:

Phone Number:

Email Address:

## Current License Information

State Licensed In:

License Number:

Original Issue Date:

## Background Information

Have you ever had a license suspended or revoked?  Yes  No

## Attachments

Upload copy of your current barber license:  Choose File No file selected

Upload government-issued ID:  Choose File No file selected

[Submit Application](#)