

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