

Career Profile Information Sheet (Enrollment Application)

Personal Information			
First Name:	Last Name:	SS#:	_
Drivers License Number:	State:	Date of Birth:	
Address:	City	State: Zip Code:	
Cell: ()	_ Cell Phone Carrier:	Email:	
Are you a current or former member of the U.S. Armed Forces, or a dependent, spouse or widow of a member of the U.S. Armed Forces? Yes No			
Marital Status: Single Married Separated Divorced Widowed			
Do you have children? Yes No If yes, how many?			
How will you get to school? ☐ Bus ☐ Ride with friend ☐ Car ☐ Other:			
Program			
Select the program you are applying for: Barber-Styling Cosmetology Natural Hair Instructor Training			
Would you like to attend ☐ Day Classes or ☐ Evening Classes			
Were you previously enrolled in a Cosmetology/ Barber training institute? Yes No			
If Yes, please provide the name of ins	titute	# hours earne	ed.
Education			
Please tell us how you completed you	r high school education: High	n School Diploma 🔲 G.E.D. 🔲 Not Finishe	ed.
Name of High School:	Dat	te Completed:	_
	Work History		
Going to college 6 days a week is not easy to do, especially as a working adult. It is important that we understand what you do outside of school that could affect your success in school.			
Are you currently employed? ☐ Yes ☐ No			
Primary employer:	Job tit	tle:	
Hours per week:	Compensation:	☐ Week ☐ Bi-Week ☐ Month ☐ Annua	al

Financial Plan		
Contributing directly to your education costs is a great way to reduce the need for loans and future debt. Think about the amount of money you can pay per month.		
Do you expect to contribute to your educational expenses? Yes No		
What's the maximum amount you're able to contribute each month:		
All educational expense may not be covered by federal grants and loans, will you be able to maintain your living expenses such as room/ board, transportation, and personal expenses without federal assistance: Yes No		
If no, what could you maintain without federal assistance:		
☐ Tuition ☐ Fees ☐ Books ☐Kit/ Supplies ☐ Housing ☐ Food ☐ Transportation ☐ Personal Expenses		
Are you looking to finish the program with the least amount of debt possible? Yes No		
Commitment		
What is one obstacle that would prevent you from starting school?		
On a scale of 1 to 10, how motivated are you to finish school?		
Describe in detail why you want to continue your education at our school and how it will benefit you in the future:		
Signature: Date:		
Signature: Date:		
Signature: Date:		