

PARIS BEAUTY COLLEGE

1655 Willow Pass Road - Concord, California - 925-685-7603

APPLICATION FOR ADMISSION

PROGRAM OF INTEREST

Cosmetology **Manicuring** **Esthetician** **Massage Therapy**

PERSONAL INFORMATION

First Name _____ Last _____ Middle _____ Gender (circle one) M F

Marital Status Married Single Divorced Separated

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ SSN _____ - _____ - _____

Email _____ Date of Birth _____

Preferred Method of Contact: Home Phone Cell Phone Email

How did you hear about Paris Beauty College? _____

State of Birth _____ D.L.# _____ D.L. State _____ US Citizen Yes No

High School Attended _____ City _____ State _____ Year Graduated _____

High School Diploma or GED Still in High School (ROP program) Name of High School _____

Applicant must provide official High School transcript/Diploma or GED certificate/scores. If applicant attended high school outside of the United States, the translated transcript must be submitted for review.

Highest Level of Education: High School Some College Vocational Associates Bachelors

I am requesting consideration for the transfer of hours/credits for previous coursework. Applicant must provide official transcripts for consideration. Number of hours completed at prior school _____

Can you perform the requirements of the program/career without reasonable accommodations?

Yes No If "No", please explain: _____

I, applicant, certify that all information provided in connection with this application is true, correct and complete. Providing false information or omitting required information is fraud and grounds for denial or enrollment or immediate expulsion from Paris Beauty College

Applicant Signature _____ Date _____

QUESTIONNAIRE

What do you know about the program/career that you are interested in?

Personally and academically, what are your challenges to completing the program? How do you plan to overcome these challenges?

Where do you see yourself in 5 years?

Why is Paris Beauty College your preferred school?

For Office Use Only

Program applying for: _____

Start Date: _____

Schedule: _____

Funding: _____

Notes: _____

