# STATE BOARD OF COSMETOLOGY

Telephone: □ Fax: 717-705-5540

E-mail: <a href="mailto:st-cosmetology@pa.gov">st-cosmetology@pa.gov</a> Website:<a href="mailto:www.dos.pa.RY/cosmet">www.dos.pa.RY/cosmet</a>

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State Board of Cosmetology
2525 N 7th Street, Suite 330
Harrisburg, PA 17110

# **SCHOOL CHANGE APPLICATION**

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#### **Instructions and Requirements**

**PLEASE NOTE:** this application is active for six months from the date of receipt in the Board office. If the application has not been successfully processed by that time, it will be necessary to re-apply with a new fee.

This application is to apply changes to a Cosmetology School, including a change in address/same location, change in square footage, change in name, change in some partners in ownership, change in curriculum. If you are deleting partners, you must obtain and include a signed authorization from the deleted partner(s). The Board cannot remove any partners from a license without the authority from the involved partner(s). For a complete change of ownership of an existing school, an inspection is required prior to practice with an exception shown under Instruction #2, Inspection.

PLEASE READ CAREFULLY AND FOLLOW ALL INSTRUCTIONS. AN INCOMPLETE OR INCORRECT APPLICATION OR APPLICATIONS PRESENTED TO THE BOARD FOR CONSIDERATION OF A VARIANCE WILL DELAY THE LICENSURE OF YOUR SCHOOL.

YOU MUST KEEP A COPY OF THIS APPLICATION AND ALL ATTACHMENTS SUBMITTED WITH YOUR APPLICATION, TO INCLUDE THE SCHOOL LICENSE IF APPLICABLE.

#### YOU MUST ALLOW AT LEAST FOUR WEEKS FOR PROCESSING.

#### 1. **FEE:**

The required fee is payable with a check or money order, payable to "Commonwealth of PA". DO NOT SEND CASH. The required fee is for processing of the application and is non-refundable. This fee is required regardless of issuance of a license.

A processing fee of \$20.00 will be assessed for any check or money order returned unpaid by your bank, regardless of the reason for non-payment.

#### 2. APPROPRIATE LICENSEE REQUIRED:

To be given the authority to practice, a school must be ready to operate at the time of inspection. This includes the requirement that the school must have a cosmetology teacher as supervisor who holds an active license. Student to teacher ratios must be met. Without an appropriate licensee, authority to practice at the time of inspection cannot be provided and a re-inspection will be necessary to determine compliance.

#### 3. EXISTING SCHOOL CHANGE OF LOCATION OR OWNERSHIP:

If changing location of an existing school you must return the current school license with this application. If the license is not available to return, submit a statement explaining why the school license is not available to return.

#### 4. **DELETING PARTNERS:**

If any partners are being deleted, a statement from the deleted partner(s) must accompany your application. If you are unable to obtain the signature of the deleted partner(s), you must apply for an initial (new) school license. Be sure to return the existing current school license with a statement indicating that you are unable to obtain the required deleted partner(s) signature. If applying for initial (new) school licensure, the school cannot be open/operating prior to inspection.

#### 5. CORPORATE APPLICANTS:

If applicant is a corporation, include a copy of the certificate of incorporation from the Pennsylvania Corporation Bureau. Be sure that the corporation is authorized to conduct business within Pennsylvania. To register the corporation, contact the Pennsylvania Corporation Bureau at 717-787-1057. A corporation is an individual and may be used for ownership of a school.

# 6. FICTITIOUS NAME (TRADE NAME) REGISTRATION:

If you will be using any name other than your own name, it would be considered a fictitious name and must be registered with the Corporation Bureau as a fictitious name. You may contact the Corporation Bureau at 717-787-1057. While the proof of registration of a fictitious name need not be submitted with this application, it is the school owner's responsibility to ensure that a fictitious name is properly registered. A fictitious name is not an individual identity and cannot be used for ownership of a school.

# 7. SCHOOL ADDRESS CHANGE ONLY, SAME PHYSICAL LOCATION:

Licenses must be issued to the school's physical address. If the Post Office changes the school's designated address, but the physical location remains the same, the address change must be noted on the licensing database. There will be a fee to print the duplicate license with the revised address.

# 8. SCHOOL MANAGEMENT:

A. Every cosmetology school must designate a licensed cosmetology teacher as supervisor. The school supervisor is to ensure that the school conforms to requirements of the law. This individual shall possess a current teacher's license issued by the Board and have either acquired 2,500 hours of satisfactory experience as a cosmetology teacher or acquired 1,250 hours of satisfactory experience as a cosmetology teacher and 1,800 hours of satisfactory experience as the designated person in charge of a cosmetology salon.

B. A school may not have more than one teacher supervisor. A person may not serve as supervisor of more than one school at the same time.

C. The supervisor of the school must be readily available during regular business hours to bureau inspectors. If a designated supervisor's absence is to exceed two weeks, the supervisor shall notify the board in writing of the absence and designate a temporary supervisor as well as display such notice in the school.

D. In addition to the teacher supervisor, a school may also have an administrator (i.e. principal or a corporate owner) who does not need to have a cosmetology teacher license.

E. The school may designate a night supervisor for administrative and accountability purposes but this individual would not be regarded as the supervising teacher for the school. Schools opting to have this designation should notify the board for record keeping and inspection purposes but there is no fee to file this information. This optional night teacher would not need to meet the regulatory requirements for the supervisor teacher.

#### 9. SCHOOL CURRICULUM REQUIREMENT:

The Board's Regulation <u>SCHOOL CURRICULUM REQUIREMENT</u> at 49 PA Code §7.129 sets forth the breakdown of hours by subject for cosmetology curriculum. These shall comprise 1250 hours for cosmetology curriculum, 695 for a licensed barber, 500 hours for teacher curriculum, 300 for cosmetician curriculum and 200 for a manicurist curriculum. All schools must offer a cosmetology curriculum. Schools may also offer specialized curriculum.

If your school changes include changes to curriculum, be sure to include the appropriate changes of these documents. If a previously submitted document is not changing, there is no need to resubmit.

#### SCHOOL GENERATED INFORMATION AND PUBLICATIONS

- A. School catalog
- B. Enrollment agreement (not needed for vocational technical school applications)
- C. Organizational chart
- D. Attendance records
- E. School rules and regulations
- F. Release form
- G. Inventory of school equipment
- H. List of instructional materials, audio-visual materials, and any other available instructional materials
- I. Forms used to record both written and practical progress for each course offered.
- J. Curriculum and course outline for each course offered (Refer to § 7.129 of the Cosmetology Rules and Regulations as well as page 4 of this application for information on preparing your curriculum and course outline)
- K. Copy of diploma for each course offered
- L. Consumer information that lists the following:
  - (1) Licensure and educational requirements for each course offered
  - (2) Non-discriminatory clause
  - (3) Tuition, student kit and other fees
  - (4) Admission requirements
  - (5) Graduation requirements

#### 10. SCHOOL RATIO REQUIREMENTS:

For the purposes of classroom instruction, according to Section 6(a)(7) in no case shall there be less than one teacher to each twenty-five pupils.

NUMBER OF TEACHERS IN CLASSROOM: 1 2 3 4 5 6 NUMBER OF STUDENTS IN CLASSROOM: 25 50 75 100 125 150

#### 11. SCHOOL PHYSICAL REQUIREMENTS:

§7.116 for each 25 student or less, the school shall have a minimum area of 2,750 square feet, exclusive of office space and lavatory facilities, 750 square feet of which shall be devoted to classroom instruction. An additional area of 9 square feet to the classroom space is required for each additional student.

NUMBER OF STUDENTS IN CLASSROOM: 25 50 75 100 SQUAREFOOTAGE IN CLASSROOM: 2,750 2,975 3,200 3,425

# 12. SCHOOL STUDENT EQUIPMENT REQUIREMENTS (student kits):

All schools must meet the following minimum equipment requirements. For each additional set of 25 students, supplies and equipment must be increased so that each student can practice in a safe and efficient manner.

| §7.115 school shall ensure that each                                      | §7.115 school shall ensure that each esthetician                |
|---|---|
| cosmetology student possess and maintains in                              | student possess and maintains in sanitary                       |
| sanitary condition the following:   | condition the following:  |
| - 1 shampoo cape  | - 1 facial cape   |
| - 1 pair of scissors  | - 2 spatulas  |
| - 1 hair-cutting razor  | - 1 pair of tweezers  |
| - 2 brushes   | - 1 make-up kit   |
| - 6 combs   | - Facial supplies   |
| - 100 pin curl clips minimum  | - Carrying case of sufficient size to accommodate the equipment |
| - Complete tools for manicuring, including emery boards, pusher and brush | and supplies used by the student                                |
| - 1 pair of tweezers  | - 1 basic skin care/make-up textbook                            |
| - Carrying case of sufficient size to accommodate the equipment           |   |
| and supplies used by the student  |   |
| - 1 basic cosmetology textbook. A book of questions and                   |   |
| answers is not considered a textbook                                      |   |
| §7.115 school shall ensure that each nail                                 | §7.115 school shall ensure that each natural hair               |
| technician student possess and maintains in                               | braider student possess and maintains in                        |
| sanitary condition the following:   | sanitary condition the following:                               |
| - 1 polish kit  | - 1 shampoo cape  |
| - Complete tools for nail care, including emery boards, pusher            | - 1 comb-out cape   |
| and brush   | - 2 brushes   |
| - Carrying case of sufficient size to accommodate the equipment           | - 6 combs   |
| and supplies used by the student  | - 100 pin curl clips minimum                                    |
| - 1 basic nail technology text book                                       | - Carrying case of sufficient size to accommodate the equipment |
|   | and supplies used by the student                                |
|   | - 1 basic natural hair braiding text book                       |
|   |   |
|   |   |

#### SCHOOL FLOOR EQUIPMENT REQUIREMENTS (clinic room): 13.

§7.114 for each 25 students or less the school shall have a minimum of the following:

4 shampoo basins

8 hair dryers

4 manicuring tables and chairs

4 closed containers for sanitized implements

4 wet sterilizers

4 facial chairs

4 complete sets of cold wave equipment 12 styling stations, mirrors and chairs

1 mannequin for each student 1 locker for each student 3 closed waste containers

4 closed containers for soiled linen

3 timer clocks

1 linen cabinet

2 sanitary towels per student

1 container for sterile solution for each manicuring table

1 bulletin board with dimensions of at least 2 feet by 2 feet

1 chalkboard with dimensions of at least 4 feet by 4 feet

1 arm chair or usable table and chair for each student in the theory room

Attendance records for each student

# STATE BOARD OF COSMETOLOGY

Telephone: 833-367-2762 Fax: 717-705-5540

**SCHOOL NAME** 

E-mail: st-cosmetology@pa.gov Website:www.dos.pa.gov/cosmet

**1 DEMOGRAPHIC INFORMATION** 

# **Mailing Address:**

State Board of Cosmetology PO Box 2649

Harrisburg, PA 17105-2649

# **Courier Address:**

State Board of Cosmetology 2525 N 7th Street, Suite 330 Harrisburg, PA 17110

# SCHOOL CHANGE APPLICATION

PLEASE NOTE: this application is active for six months from the date of receipt in the Board office. If the application has not been successfully processed by that time, it will be necessary to re-apply with a new fee.

For processing staff use only: Application Number: Staff initials:

| (Name must match license):   |   |  |  |  |
|--|---|--|--|--|
| ADDRESS  | STREET:   |  |  |  |
|  | CITY:   |  |  |  |
|  | STATE: ZIP CODE:  |  |  |  |
| LICENSE  |   |  |  |  |
| TELEPHONE  |   |  |  |  |
| EMAIL  |   |  |  |  |
| Cosmetology@.pa.gov Providing an email add   |   |  |  |  |
|  | artners in Ownership <i>(no inspection required) (\$69.00)</i>                                      |  |  |  |
| Change of School Fictitious Name (return the license) (no inspection required)(\$69.00)                                    |   |  |  |  |
| Change of School Supervisor (no inspection required)(\$31.00)  |   |  |  |  |
| Adding a New Curriculum (no inspection required)(\$69.00)  Change to Existing Curriculum (no inspection required)(\$69.00) |   |  |  |  |
|  | Footage at Same Location (inspection required) (submit sketch) (\$125.00)                           |  |  |  |
|  | Address Same Location- Postal or 911 Change HE LICENSE) (no inspection required)(\$5.00)            |  |  |  |
| Change of Location   | n or Corporate Ownership (Please STOP. Do not use this application. the School License Application) |  |  |  |
| Other change (no fee) - INDICATE CHANGE HERE:  |   |  |  |  |
|  |   |  |  |  |

| 3. EFFECTIVE DATE OF S   | CHOOL CHANG                 | E  |  |
|--|-----------------------------|--|--|
| Please indicate the date the indicated scho  | ool change became or will   | become effective:                          |  |
| DATE:  |                             |  |  |
| 4. CHANGE IN OWNERSH license)  |                             |  |  |
| Print the names of ALL owners (licensed o<br>incorporation and provide a list all corporat   |                             |  |  |
| OWNERS/OFFICERS NAMES TITLE  |                             |  | OWNER DISPOSITION                          |
|  |                             |  | Delete □ Add □                             |
|  |                             |  | Delete □ Add □                             |
|  |                             |  | Delete □ Add □                             |
|  |                             |  | Delete □ Add □                             |
|  |                             |  |  |
| 5. CHANGE of SCHOOL T<br>A school changing its name will need to att<br>change the name of the school came to be                               | tach a written statement fr | om the School Board Adr                    | ministration detailing how the decision to |
| OLD NAME   |                             | LICENSE NUMBER                             |  |
| NEW NAME   |                             | LICENSE NUMBE                              | R  |
|  |                             | l  |  |
| 6. CHANGE of SQUARE F<br>SUBMIT A SKETCH DET   |                             |  | spection required)                         |
|  |                             | NEW TOTAL SQUARE FOOTAGE FOR ENTIRE SCHOOL |  |
| ORIGINAL SQUARE FOOTAGE FOR CLASSROOM<br>TO BE CHANGED   |                             | ADDITIONAL SQL                             | JARE FOOTAGE TO BE ADDED                   |
|  |                             |  |  |
| 7. CHANGE OF ADDRESS   | SAME LOCATION               | ON <i>(Postal Ch<mark>ai</mark></i>        | nge) (No Inspection required)              |
| NEW SCHOOL ADDRESS (If changing address, be sure to provide your new address here. The ZIP code must remain the Same as previously submitted). | STREET:                     |  |  |
|  | CITY:                       |  |  |
|  | STATE:                      | ZIP CODE:                                  |  |
| 8. STUDENT ENROLLMEN   | IT SCHOOL                   |  |  |
| Please indicate total anticipate   | d atudant                   |  |  |
| enrollment after indicated chan  |                             | Y:   | _ EVENING:                                 |

| (Attach a copy of the teacher's  | resume of experience) see §7.111(a)(2)(ii)  |
|--|---|
| OLD SUPERVISING TEACHER  | LICENSE NUMBER  |
| NEW SUPERVISING TEACHER  | LICENSE NUMBER  |
| Signature of new designee:   |   |
| *See Section 9 in instructions for supervisor tea                                | cher requirements. Resume required.   |
| 10. CHANGE of SCHOOL ADMINIST  | FRATOR (Non-licensee) see §7.111(1)(3)  |
| Old Supervisor/Administrator   | TITLE   |
| New Supervisor/Administrator   | TITLE   |
|  |   |
| 11. DESIGNATING NIGHT SUPERV Old Night Supervisor (Teacher)                      | LICENSE NUMBER  |
| New Night Supervisor (Teacher)   | LICENSE NUMBER  |
|  |   |
|  |   |
| 12. CHANGE of SCHOOL CURRI   | ICULUM (Submit Relevant School Generated taught in all schools.                                       |
|  |   |
| Documents) Cosmetology must be to  | taught in all schools.  |
| Documents) Cosmetology must be to TEACHER CURRICULUM  NAIL TECHNICIAN CURRICULUM | Remove  * Add   Increase hours  |
| Documents) Cosmetology must be t   | Remove   * Add   Increase hours    Remove   * Add   Increase hours    Remove   * Add   Increase hours |

# APPLICATION WILL NOT BE PROCESSED UNLESS OWNER'S OATH (SECTION 13) IS COMPLETED

# 13. OWNER'S OATH

All owners must sign below. If applicant is a corporation, all officers must sign.

By signing below, I verify that this form is in the original format as supplied by the Department of State and has not been altered or otherwise modified in any way. I am aware of the criminal penalties for tampering with public records or information pursuant to 18 Pa. C.S.§4911.

Additionally, I certify that the statements in this application are true and correct to the best of my knowledge, information and belief, and that I am of good moral character. I understand that any false statement made is subject to the penalties of 18 Pa. C.S. §4904 relating to unsworn falsification to authorities and may result in the suspension or revocation of my license or certificate.

I further understand that if a bureau inspector determines that I have not correctly answered any questions provided within this application or if my school does not meet all requirements for licensure, authority to operate will not be given at the time of inspection and I will be responsible for all applicable re-inspection fees.

| TRADE NAME OF SCHOOL:    |       |
|--------------------------|-------|
| Owner/Officer Signature: | Date: |
|                          |       |