

## Cosmetology, Hair Design, Barber, Manicurist, Esthetician, or Master Esthetician License, Renewal, Reinstatement, or **Reciprocity Application**

20901-APPLICATIONS

Apply, renew, reinstate, or transfer your licenses.

Online: https://professions.dol.wa.gov

Or mail this completed application, any documents, and a check or

money order payable to the Department of Licensing to:

Cosmetology Program **Department of Licensing** PO Box 3856 Seattle WA 98124-3856

For questions or language help, call (360) 664-6626.

**Application for** (check each that applies)

Cosmetology Hair Design Barber Manicurist Esthetician Master Esthetician

## **Application type and fees**

General application - \$35 per license: Must have completed all school or apprenticeship hours and both the written and the practical exams before your application can be processed.

Renewal (Washington State only) - \$66 per license or \$131 per license if late.

Reinstatement of a canceled license: If you have not renewed within one year of your expiration date, your license is in cancellation. Provide a copy of a previously held Washington State license or renewal notice. Washington State requires a written and practical examination for licensure. You will be contacted with exam scheduling information. Third-party testing fees may apply.

Reciprocity/Out-of-jurisdiction - \$60 per license: To get a license, submit a copy of a current and valid license and proof of exams. If you have not taken exams, Washington State requires written and practical exams before licensure. You will be contacted with exam scheduling information. Third-party testing fees may apply. Contact your licensing board, institution, or agency to request verification showing a license in good standing and proof of exams. You may provide other documentation if your jurisdiction cannot provide verification.

 Do you have a license in another jurisdiction? Yes No · Did you pass exams to obtain your license? Yes No

Licenses are available for self-printing with an online account.

If you want us to print and mail your license add a \$5 print fee for each copy to your payment.

To print all license types on one document you must self-print combined license online.

\$0 self-print license online.

\$5 each. DOL print and mail license. Quantity Total \$

## Applicant information

• •			
TYPE or PRINT Name as you would like it to app	Date of birth (mm/dd/yyyy)		
Full legal name (First, Middle, Last)			
Mailing address			
City		State	ZIP code
Current or previous Washington license number	Out-of-jurisdiction license number	Social Security	number* (New/Reinstatement only)
Military? (check if applicable)			
Current or former: Military member	Military spouse or domestic partner	-	
Email		10-digit phone	e number

<sup>\*</sup>You are not required to have a Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN or TIN) to apply for or be issued a license. If you do not have an SSN or ITIN, leave that section blank. If you do have a SSN, ITIN or TIN, you are required by federal and state law to provide it on the application (42 U.S.C. 666(a)(13) and RCW 74.20A.320).

## Legal background

Answer the guestions below If you answer	"Voc." attach a detailed explanation		
Answer the questions below. If you answer	· '		
(fine, suspension, revocation, censure, su	y other jurisdiction, have you had any action urrender, etc.) taken against any professional or nit held by you?	Yes	No
convicted of, or entered a plea of no cont	y other jurisdiction, have you defaulted, or been est to a gross misdemeanor or felony crime?	Vac	No
		Yes	No
I declare under penalty of perjury under the la	aw of Washington that the foregoing is true and cor	rect.	
	TYPE or PRINT Name		
	X		
Date and place	Applicant signature		

Providing false information in this application may be cause for denial, suspension, or revocation of your professional license in the State of Washington.