



BUSINESS CONSUMER SERVICES AND HOUSING AGENCY • GAVIN NEWSOM, GOVERNOR
 DEPARTMENT OF CONSUMER AFFAIRS • BOARD OF BARBERING AND COSMETOLOGY
 P.O. Box 944226, Sacramento, CA 94244-2260
 Phone: (800) 952-5210 Email: barbercosmo@dca.ca.gov
 Website: www.barbercosmo.ca.gov



CERTIFICATE OF BARBER APPRENTICE

COMPLETION or **DISCONTINUANCE**

(Hours will expire if not completed within 3 years)

SECTION A: APPRENTICE INFORMATION

License Number CB <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		Expiration Date: <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
Last Name		First Name		Middle Name
Address		City	State CA	Zip
Phone Number		Date of Birth	Social Security Number or ITIN	

SECTION B: PRACTICAL HOURS AND OPERATIONS COMPLETED

Total OJT Hours Completed:	Related Training Hours Completed:	Date Training Completed:
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On the Job Training Hours and Operations

Hair Dressing	Hours	Operations	Health and Safety	Hours	Operations
Hairstyling			Laws and Regulations		N/A
Permanent Waving			Health and Safety Considerations		N/A
Hair Coloring and Bleaching			Disinfection and Sanitation		N/A
Hair Cutting			Anatomy and Physiology		N/A
Training in Shaving	Hours	Operations			
Preparation and Performance					

SECTION C: PRIOR CREDIT OF HOURS (Complete this section if the apprentice is using hours from another program sponsor. Attach a copy of their certification of discontinuance from the previous program sponsor)

Program Sponsor Name	Sponsor Code	Date of Last Attendance
Prior OJT Hours Received:	Prior Related Training Hours Completed:	

SECTION D: DISCONTINUANCE (Complete only if the apprentice has NOT completed the program)

Why is the apprentice being discontinued? Quit Dropped, Explain: _____

Is the license being returned? Yes No, Explain: _____

SECTION E: CERTIFICATION AND SIGNATURES

Check one: The apprentice **has*** **has not** met the course curriculum requirements.
We the undersigned, certify under penalty of perjury under the laws of the State of California, that all the information contained herein is true and correct. No stamped signatures accepted.

Signature of Apprentice	Date
Signature of Trainer	Date
Signature of Program Sponsor	Date