 **New Student Application** Date:

Name:

 Last First MI Maiden Name Email Address

Address:

 Street City Zip

Date of Birth: Phone #:( ) Cellular # ( )

**EDUCATION:**

Highest Grade Completed (circle one) 8 9 10 11 12 GRAD GED High School Graduation Date / GED Date:

 Name of High School:

 Name City State

Name of Colleges Attended: (1) Year:

College Completed (circle one) 1 2 3 4 GRAD (2) Year:

Have you previously attended Perfections Beauty Colleges? (circle one) Yes or No Approx. # of Hours:

Ethnic Group (Optional) African American American Indian Asian Spanish Surname Caucasian Other (specify)

**I am interested in the following:** (check each that applies)

 hair styling manicuring salon management perm waving/relaxing beauty consultant make-up

 hair design sculptured nails cosmetology teacher hair coloring skin care

**How did you hear about Perfections? (please circle one)**

 Mail T.V. Radio Yellow Pages Internet PBC Student / Graduate Family / Friend Salon Other (specify)

**Name and address of parents and/or nearest relative:**

 **Name Address Phone Number Relationship**

 **Name Address Phone Number Relationship**

**In case of emergency contact:**

 **Name Address Phone Number Relationship**

**My present occupation is: I think the one factor that holds back career success is: When it comes to working by myself:**

 Not too promising Not having enough ambition I can set up and follow my own schedule

 Filled with opportunity Insufficient training I need occasional reminders

 I’m unemployed Lack of confidence I need close supervision

**The greatest rewards of working are: My ability to understand subjects that interest me is: The field I inquired about interest me because:**

 High Income Above average

 A sense of accomplishment Average

 Enjoying the job Below average

 Being my own boss

In about 5-10 years from now I’d like to be:

I understand that Perfections Beauty Colleges are relying on the information I have provided above for purposes of evaluation my application and my eligibility for financial aid and I certify that all such information is complete and accurate.

Signed: Date:

**Please initial that you understand Friday attendance is a requirement**