

NC Board of Barber and Electrolysis Examiners APPRENTICE BARBER EXAM APPLICATION

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STOP! PLEASE READ BEFORE YOU BEGIN!

- You must complete all fields, unless they are marked as optional. If you leave any required fields blank, your application will be delayed.
- Please make sure the form is legible.
- Please make sure that you also submit the fee listed in the "Fee" section to avoid delaying your application. Without the fee, we will not schedule you for an exam.
- Send the completed form to the address listed above.
- After you submit this application, we will notify you of the exam date and time and provide instructions.
- If you have any questions, please contact us.

PERSONAL INFORMATION

Last name:	First n	ame:	MI:	(Optional)
Address:				
Address:				
City:	State: _	ZIP:		
Phone (optional):		Fax (optional):		
Email (optional):				
What barber school did you attend?				
When did you graduate from barber	school? _			

OTHER IDENTIFYING INFORMATION

IMPORTANT: this information is required, and we cannot process your application without it.

Social Security Number: _____ Date of birth: ______ Date of birth: _______ Date of birth: _____

Privacy and security information

Why do we collect this information?

N.C. Gen. Stat. § 93B-14 requires the board to collect and disclose data to the following state agencies:

- Department of Revenue for the purpose of enforcing tax laws; and
- Department of Health and Human Services for the purpose of enforcing child support orders.

How will this information be used?

We only use this data for identification purposes and disclose it only as required by law. Apart from sharing the data with the Department of Revenue and Department of Health and Human Services, we currently also share the data with the Government Data Analytics Center as required by N.C. Gen. Stat. § 143B-1385(c). If the board is required to share data with any other sources not listed above, the board will post a general notice on its website.

How is this information protected?

We follow industry best practices and strict state laws designed to protect your data from unauthorized access, including limiting the number of staff members who have access, protecting data behind firewalls, and encrypting data at rest in and in transit.

The application continues on the next page

The rest of this page is left blank to comply with N.C. Gen. Stat. § 132-1.10(b)(2).

FEE

The total fee for the two exams is \$170. Please pay by check, cashier check, or money order (no cash).

Have you included the fee with this application? [] Yes [] No

ATTESTATION

I, _____, the applicant, declare that I am the person making this application, that I have read the application in its entirety and understand its contents, and that all the statements made in this application are true and correct.

Applicant's signature:	Date: