State of Nevada
Board of Cosmetology
1785 E. Sahara, Suite 255
Las Vegas, NV 89104
Phone (702) 486-6542
Fax (702) 369-8064

State of Nevada
Board of Cosmetology
4600 Kietzke Lane, Bldg O Suite 262
Reno, NV 89502
Phone (775) 688-1442
Fax (775) 688-1441

www.cosmetology.nv.gov

License Renewal Notice

Please be advised that your license will expire/ has expired on. Please submit the following prior to your expiration date to continue your current license status:

- Every licensee is required to complete 4 CEU hours in Infection Control in order to renew. Please visit our website at www.cosmetology.nv.gov and select Infection Control Test under Popular Links on the homepage to take the class online free of charge. You will need to print the certificate of completion and include it with your renewal. ***These hours will count toward your instructor CEU requirement.***

- The enclosed renewal form including the completed "Child Support Questionnaire"
  - The Child Support form must be filled out by all licensees regardless of your situation. One box must be checked and your social security number, date, and signature are required by federal mandate. Any child support form not filled out will be denied renewal.
  - A copy of legal proof of name changes such as a marriage certificate, a divorce decree, or citizenship papers are required if you are changing your name.

- Two current and identical **PASSPORT** photos:
  - Taken within the last 3 months.
  - Color photos ONLY on Glossy Photo paper with a white background.
  - Prints on paper are not acceptable.
  - Face forward, no hats or sunglasses in frame.
  - Name and/or license number printed on the back of the pictures.

- Total renewal fee of $70.00 in Money Order or Cashier's check (**No Personal Checks or Cash**);
  - Credit/Debit Cards will be accepted in person only.
  - Credit/Debit transactions require a matching government issued photo identification.
  - Late fees accrue at a rate of $20.00 per month past your due date, starting on the first day of expiry.
  - Make payable to *Nevada Board of Cosmetology.*

- All Instructors need to submit their required 30 CEU's for each expiry period:
  - Only CEU's given by Nevada board approved providers will be accepted. Please visit our website for a list of approved CEU providers and classes at www.cosmetology.nv.gov under Resources, Approved CEU Classes.

- Please allow 4 weeks for processing to receive your Renewal License.

Sincerely,

Nevada State Board of Cosmetology

LICENSE RENEWAL FORM

Nevada State Board of Cosmetology

1785 E. Sahara Avenue #255
Las Vegas, Nevada 89104
(702) 486-6542

4600 Kietzke Ln #O-262
Reno, Nevada 89502
(775) 688-1442

Total Renewal Fee of $70.00. Late fees accrue $20 per month starting the day after expiration date.

This renewal application must be completely filled-in, signed and either mailed or hand delivered to one of the above addresses.

Please print the information below; name change requires legal proof.

PN# _____ **Expiration** M M / D D / Y Y Y Y

First Name _____ **Middle Name** _____

Last Name _____

Address _____

City _____ **State** _____ **Zip** _____

Personal Phone ___ - ___ - ____ **Salon Phone** ___ - ___ - ____

E-Mail _____

NAME OF SALON: WHERE I WORK _____ CITY: _____

CHILD SUPPORT INFORMATION

You **MUST** mark **only one** of the responses below, no exceptions are allowed. Failure to mark one of the three responses and not including your Social Security number will result in **denial** of the renewal.

☐ I **am not** subject to a court order for the support of a child.

☐ I **am** subject to a court order for the support of one or more children and **am** in compliance with the order or **am** in compliance with the plan approved by the District Attorney or other public agency enforcing the order for the repayment of the amount pursuant to the order

☐ I **am** subject to a court order for the support of one or more children and **am NOT** in compliance with the order or **am NOT** in compliance with a plan approved by the District Attorney or other public agency enforcing the order for the repayment of the amount pursuant to the order.

Social Security No: _____ Date: _____ Signature: _____

Pursuant to NRS 644.212 and NRS 644.214 "Any applicant for the issuance or renewal of a license or evidence of registration issued pursuant to NRS 644.190 to 644.330, inclusive, shall submit to the board the statement prescribed by the welfare division of the Department of Human Resources pursuant to NRS 425.520. The statement must be completed and signed by the applicant, and must include the Social Security Number of the applicant.

Do not write below this line; for Nevada State Board of Cosmetology use only

Received M M D D Y Y Y Y **Receipt #** _____ **Amount Paid** $

☐ Cashier's Check ☐ Money Order ☐ Credit Card ☐ Business Check ☐ Voucher