

## PERSONAL RENEWAL APPLICATION

- **Complete & Mail to:** Arizona State Board of Cosmetology □ 1721 E Broadway □ Tempe □ AZ □ 85282

<b>IF YOU DO NOT RENEW ON OR BEFORE YOUR BIRTHDAY, YOUR LICENSE WILL REVERT TO AN <i>INACTIVE</i> STATUS</b>	
If paid or postmarked <b><i>ON</i></b> or <b><i>BEFORE</i></b> birth date your renewal fee is: <b>\$60.00 – 2 year renewal</b>	If paid or postmarked <b><i>AFTER</i></b> your birthday <b>the total renewal and penalty fee is: \$90.00</b>
1. LICENSE #:	<b>2. SOCIAL SECURITY #:</b> Required (ARSS25-320)
3. Legal Name: Print	4. COMPLETE ONLY FOR NAME CHANGE: Copy of LEGAL document enclosed for Marriage ( )    Divorce ( )    Other ( )
5. COMPLETE <b><i>ONLY</i></b> FOR ADDRESS CHANGE:	6. PHONE #:
7. Birthdate:	8. EMAIL ADDRESS:

**FEES ARE NON-REFUNDABLE**

[www.azboc.gov](http://www.azboc.gov)

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