

## CHECK OFF LIST FOR SCHOOL RENEWALS:

1. ***COMPLETE*** School License Renewal form:  
\*Name of School must match the original application – if different, you must re-apply as a New School;  
\*Notarize the bottom of renewal form
2. Submit Fee - \$500.00 Renewed on or before June, 30;  
**\$600.00 After June, 30 (delinquent)**
3. Copy of current bond showing renewal date;
4. A subject description for each new course and its schedule, if applicable;
5. Most recent school catalog that:
- Indicates where any modifications, additions, or deletions from the previously submitted catalog may be found;
  - Contains an index that shows where the information required by A.R.S. §32-559 is located in the catalog;
  - Contains the name of each accrediting or approving organization; and
  - Provides a signed statement that the establishment has the equipment required by statute and rule for the school.
6. Articles of Incorporation- must show all owners' names – (if new owners or owner change you will need to apply as a new application, not a renewal)
7. The name and address of any new statutory agent if the change will take effect with the new license year.
8. A new operating schedule if changes will occur beginning with the new license year;
9. The owner of a school shall submit to the Board the terms and conditions of any management contract entered into for the school after contract is executed.
10. The name and license number of the current licensed instructor in charge of the school
11. A Signed statement that the establishment has the equipment required by statute and rule for the school

If you have any questions, please call (480) 784-4539 Theresa x238



# ARIZONA STATE BOARD OF COSMETOLOGY

1721 East Broadway, Tempe, Arizona 85282

Phone #: (480) 784-4539 Fax #: (480) 784-4962 www.azboc.gov

## SCHOOL RENEWAL APPLICATION

### GENERAL SCHOOL INFORMATION

1. FEE AMOUNT SUBMITTED:

- \$500.00 (if paid or postmarked ON OR BEFORE June 30th)
- \$600.00 (if paid or postmarked AFTER June 30<sup>th</sup>)

2. SCHOOL TYPE: **choose only one**

- AESTHETICS (1007)     COSMETOLOGY (1006)     NAIL TECHNOLOGY (1008)

**SCHOOL LICENSE #** \_\_\_\_\_ (Refer to your posted school license)

3. OWNER TYPE:

- Individual                       Corporation                       Partnership                       School District

### SCHOOL INFORMATION

School Name:

Address: (Street, City, State, Zip Code)

School Phone Number:  
(       )

School Fax number:  
(       )

School E-mail Address: (required for student hour report)

School Website Address:  
  
www.

### SCHOOL OWNERSHIP INFORMATION

Owners Name: (*may be a corporation name or LLC name*)

Address: (Street, City, State, Zip Code)

Phone Number:  
(       )

### BOND INFORMATION

Bond Company's Name & Agent's Name:

Address: (Street, City, State, Zip Code)

Phone Number:  
(       )

Bond Number:

Expiration Date:

### LICENSED INSTRUCTOR IN CHARGE:

Instructor's Name:

Arizona Instructor's License #: (8 digits)

### NOTARY AREA: (Application must be notarized for renewal)

State of Arizona:

County of \_\_\_\_\_ I hereby certify by my signature that I am in compliance with A.R.S. Title 32, Chapter 32-551 et seq.

Owner's Signature: \_\_\_\_\_

Owner's Name & Date (Printed) \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

NOTARY PUBLIC: \_\_\_\_\_ My Commission expires: \_\_\_\_\_