

The Atelier Academy of Beauty  
1413 Main Street, Hopkins MN 55343

## Application For Cosmetology School Admission

This application is for individuals interested in attending The Atelier Academy of Beauty for a cosmetology license. A cosmetology license is licensed and certified through the Minnesota Board of Cosmetologist Examiners. To become an operator of a cosmetology license, 1550 hours of instruction and application need to be practiced at a BCE approved Minnesota Cosmetology School.

### Application Checklist

- A completed application form, signed and dated.
- A \$50 non-refundable application fee. Make your check or money order payable to *The Atelier*. Student name and birthdate must be placed in the check memo.
- An official high school transcript for grades 9-12 or GED scores.
- Submit completed application form and supporting materials to:

The Atelier Academy  
Attn: Admissions  
1413 Main Street  
Hopkins MN 55343

*Personal Information*

FULL LEGAL NAME

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last first middle

BIRTHDATE (mm/dd/yy) \_\_\_\_\_

PERMANENT ADDRESS

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number and street

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city state zip

PERMANENT PHONE (\_\_\_\_) \_\_\_\_\_

OTHER PHONE (\_\_\_\_) \_\_\_\_\_

MAILING ADDRESS, IF DIFFERENT FROM ABOVE

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number and street

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city state zip

EMAIL

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## *Educational Plans*

Select semester you wish to begin:

- Winter (January-March)
- Spring (April-June)
- Summer (July-September)
- Fall (October-December)
  
- 2022
- 2023
- 2024

Note that start dates for Refresher Courses are discussed upon enrollment.

Select if you are a new or transfer applicant:

- New Applicant Cosmetology – have graduated from high school or GED equivalent but have not previously matriculated to another post-secondary academy for Cosmetology in Minnesota.
- New Applicant Refresher Course – have already graduated from a cosmetology program.
- Transfer – have graduated from high school, and have previously attended another post-secondary academy for Cosmetology in Minnesota.

Select enrollment course:

- Cosmetology Program, 1550 Hours
- Nail Program, 350 Hours
- Eyelash Extension, 38 Hours

*Residency Information*

Are you a U.S. citizen?

- Yes
- No (If selected, please complete the following questions under Non-U.S. Citizen)

Non-U.S. Citizen (Please answer questions A, B and C).

A. Country of Citizenship \_\_\_\_\_

B. Country of Birth \_\_\_\_\_

C. I am a:

- Permanent Resident
- Temporary or nonimmigrant visa holder

\_\_\_\_\_

Please list type of Visa (e.g. F-1, J-1, H-4, L-2).

If you are in the U.S. on a temporary visa, the name listed on this application and your passport must match. You must also include your permanent home country address under Mailing Address.

- Other (please specify)

\_\_\_\_\_  
\_\_\_\_\_

State in which you Claim Legal Residence?

- Minnesota
- Other (please specify) \_\_\_\_\_

How long have you lived in that state?

- Lived there all my life
- OR
- \_\_\_\_\_  
years      months

*Additional Information*

Have you ever been convicted of a criminal offense (felony, misdemeanor, or juvenile offense) other than a minor traffic violation, or is any such charge now pending against you?

- No
- Yes. If yes, please attach a description of the incident(s), including date(s) and location(s). If your answer changes prior to enrollment, you must contact Admission of The Atelier Academy.

Have you ever been expelled from, suspended from, or placed on probation at any high school or college for reasons of academic dishonesty or because of an offense that harmed or had the potential to harm others, or are you ineligible to return to any high school or college you have attended?

- Yes
- No

### *Educational History*

List the high schools you have attended, beginning with your most recent.

<i>Name of High School</i>	<i>City/State</i>	<i>From (mm/yy)</i>	<i>To (mm/yy)</i>	<i>Graduation Date</i>

Have you earned a GED?

- Yes
- No

List any universities, colleges, PSEO courses or academies you have attended that are applicable to Cosmetology hours in Minnesota. Please send your official transcript to Admissions at The Atelier Academy.

<i>Name of College/Academy/University</i>	<i>City/State</i>	<i>Hours Completed</i>	<i>From (mm/yy)</i>	<i>To (mm/yy)</i>

*The following questions are optional and used for scholarship consideration. Additionally, the information provided will be used to better assist the applicant's admission process.*

Have either of your parents received a cosmetology license?

- Yes
- No

Have you held any employment?

- Yes (Please list any work experience below)
- No

<i>Place of Employment</i>	<i>City/ State</i>	<i>Job Title</i>	<i>From (mm/yy)</i>	<i>To (mm/yy)</i>	<i>Hours/ Week</i>

List any school sponsored activities (clubs, music, student government). Please include the name of the activity, years participated and any leadership positions/grades held.

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List any outside of school activities (community service, volunteer, scouting, 4-H, etc.). Please include the name of the activity, years participated and any leadership positions/grades held.

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List any other special talents, honors, achievements or awards.

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If you have any special circumstances that may have affected your academic performances in high school (family, work, personal or economic), please include an explanation on a separate sheet.

*Authorization of File and Application Access*

The Atelier Academy of Beauty complies with federal and state privacy laws and regulations. Those who gain access to information in your files are staff and faculty of The Atelier who need to have access. Outside organizations and government bodies, in limited circumstances, are authorized by state and federal laws. In addition, you may review your file at any time with a written request. No one else may review your file without your written consent or a subpoena or court order. If you want The Atelier to give information to someone else, such as a parent, spouse, other relative, or friend, you must complete and sign this section of the application. If you give someone else access to your file, that person maybe be able to help us process your application. By leaving this question blank you are indicating you do not want access give to anyone.

I hereby authorize The Atelier Academy of Beauty to release my file to the following person:

Name:

\_\_\_\_\_  
Relationship to me:

\_\_\_\_\_  
Email address of authorized person:

I certify that the information I have provided on this application and on all other admission application materials is complete, accurate and true to the best of my knowledge. I understand it is my responsibility to request that official transcript from each academic institution I have attended to be submitted directly to The Atelier Academy of Beauty. I understand that misrepresentation of application information is sufficient grounds for canceling my admission or registration.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**REFUND POLICY**

If your application is rejected, you will receive a full refund of the application fees.