

UTC SCHOOL OF COSMETOLOGY
 251 Marietta Street
 Clarksburg, WV 26301
 Phone: 304-326-7592 Fax: 304-622-6138



Admission Application

Name: _____

Last Name
First Name
Middle Name
Maiden

Mailing Address: _____

Number & Street
City
State
Zip Code

Permanent Address: _____
 (If Different)
Number & Street
City
State
Zip Code

Telephone: (_____) _____ Cell Phone: (_____) _____

Email: _____

Gender: Male Female

Nearest Relative: Father Mother Spouse / Partner

Name	Address	City, State, Zip	Phone

Have you ever been convicted of a felony? Yes No If yes, explain: _____

Which best describes your application status? New Applicant Former UTC Student Transfer

If transfer, from where? _____ How many hours do you currently have? _____

Do you have reliable transportation? Yes No Do you work? Yes No If yes, where? _____

List the last high school you attended and your status when you left (i.e. Grad, GED, Withdrew). **List all other educational institutions you have or are attending. Please be sure to include UTC, if you have attended UTC in the past.**

	Name of Institution, City, State	From (mo./yr.)	To (mo./yr.)	Diploma/GED/Degree
High School:				
Cosmetology School:				
College:				

Have you been suspended or dismissed from any cosmetology school or college for academic, attendance or disciplinary reasons? Yes No If yes, explain: _____

To provide you the best education, please let us know if you have an IEP or Special Education plan so we can make accommodations for your State Board Exam. Yes No

United Technical Center does not discriminate on the basis of race, color, national origin, sex, religion, disability, age, or any other basis prohibited by law in its programs, activities, or employment practices. For inquiries contact: Matthew Call, Title IX Director, 251 Marietta Street, Clarksburg, WV 26301, 304-326-7580.

Employment and Military History

List your employment experience (including military service) for the last 12 months.

Employer	Street Address	City, State Zip	From (Month & Year)	To (Month & Year)
Employer	Street Address	City, State Zip	From (Month & Year)	To (Month & Year)
Employer	Street Address	City, State Zip	From (Month & Year)	To (Month & Year)

Answer the following questions in 3 or 4 sentences.

- 1) Why will you be a great student at our school? _____

- 2) What obstacles might prevent you from achieving excellent attendance and excellent academic performance?

- 3) How did you hear about UTC's School of Cosmetology? _____

- 4) What traits do you have that will help you succeed in this industry? _____

- 5) What are your long-term goals? _____

- 6) Why did you choose UTC? _____

Application Policy

- All prospective students must complete an Admissions Application and return it to UTC.
- All applications will be reviewed and approved by UTC Director and Cosmetology Coordinator.
- Incomplete applications will not be considered for review.
- Applications received from an applicant with a felony conviction will be further reviewed by the school's Director.
- Submitting an application does not guarantee admission.
- Perspective students will be notified by phone of approval or denial of admission.
- In the event a prospective student cannot be reached via phone, a letter will be mailed to the address provided on the Admission Application.

I certify that to the best of my knowledge, the information given in this application is true. I understand that any omission or misrepresentation of facts will be cause for refusal of admission, cancellation of application, or dismissal from UTC if later discovered. I further understand that, if I am approved and accepted into the program, it is MY RESPONSIBILITY to arrange for ALL ADMISSION CREDENTIALS (diploma, official transcripts, down payment, etc.) to be received by the Admissions Office AT THE TIME OF MY ENROLLMENT.

Applicant Signature: _____

Date: _____