P.O. Box 8935 Ship To: 4822 Madison Yards Way Madison, WI 53708-8935

Madison, WI 53705

FAX #: (608) 251-3036 E-Mail: dsps@wisconsin.gov Phone #: (608) 266-2112 Website: http://dsps.wi.gov

DIVISION OF PROFESSIONAL CREDENTIAL PROCESSING

SCHOOL OR SPECIALTY SCHOOL APPLICATION INFORMATION

This information and application (Form #1655) is being sent for issuance of your credential to operate a school of barbering, cosmetology, aesthetics, manicuring, or electrology. School credentials are required to be renewed biennially. The credential will expire on April 1 of the odd-numbered year.

The application should be submitted to the Division of Professional Credential Processing at least 45 business days prior to the anticipated opening date. If your school does not meet the state requirements or does not have appropriate equipment and supplies when inspected, you may be subject to a forfeiture or disciplinary action against your license.

The fee for each type of school is listed below.

Schools of Cosmetology, Aesthetics, Electrology, and Manicuring Credential Initial Fees: \$11.00 Schools of Cosmetology, Aesthetics, Electrology, and Manicuring Renewal Fees: \$11.00 Schools of Barbering Credential Initial Fees: \$60.00 Schools of Barbering Renewal Fees: \$60.00

Application for Initial Credential: (Per Wis. Admin. Code § SPS 61.03 the application shall contain all of the following information.)

- 1. The names and address of all owners. If the owner is a corporation, a copy of the articles of incorporation and most recent annual report filed with the secretary of state, together with a list of the names and addresses of the incorporators, officers, directors, and shareholders of the corporation shall be submitted. No identification is required of any shareholder owning or controlling fewer than 10% of the shares of the corporation. If the owner is a partnership, the names and address of all partners and a copy of the partnership agreement must be submitted.
- 2. A statement that a certified public accountant has completed financial statements, consisting of a balance sheet, a profit and loss statement, and a cash flow statement, and that a copy of those statements will be made available for inspection by the Department on request at any time.
 - The Department may require an audit of the finances of a school, at the applicant's expense, if the licensing application contains information, which reasonably gives rise to concern that the school is not financially sound or is not otherwise stable.
- 3. A detailed floor plan of the premises to be used by the school, which identifies the site of the school and includes a description of fixtures and
- 4. A list of the names and addresses of all schools of any description whatsoever currently or previously owned or operated by any of the owners of the school applying for licensure. If the owner of the school applying for licensure is a corporation or partnership, a list of the names and addresses of all schools of any description whatsoever which are currently or were previously owned or operated by any of the incorporators, officers, directors, or shareholders of the corporation or partner. No report is required for any shareholder owning or controlling fewer than 10% of the shares of the corporation.
- 5. For every school required to be listed by item 4, a detailed statement with all pertinent details indicating:
 - Whether the school was ever denied accreditation by any accrediting agency;
 - Whether the school was ever denied a license or had a license suspended, limited, restricted, or revoked;
 - Whether the school was ever subject to any form of receivership; and,
 - Whether the school was ever the subject of or named in any lawsuit alleging fraud, misrepresentation, or violation of law.
- 6. A copy of the printer's proof of the catalog or bulletin described in Wis. Admin. Code § SPS 62.01.
- 7. A copy of any contract form used by the school or which the school intends to use in enrolling students per Wis. Admin. Code § SPS 62.02.
- 8. A list of the names and applicable license or certificate numbers of the instructors hired to provide practical and theory instruction to its
- 9. The number of students anticipated to be enrolled during the license period.

Anticipated Enrollment	Amount of Surety Bond
0 - 50 Students or Enrollees	\$25,000

51 - 100 Students or Enrollees \$40,000 Over 100 Students or Enrollees \$50,000

10. The name and Wisconsin address of a designated agent upon whom any process, notice, demand, or other document may be served.

The completed application must be submitted to the Department with the credential fee, detailed floor plan, and proof of surety bonding, copy of the student contract, copy of the school catalog, and copy of the curriculum. No application will be reviewed unless all required items have been submitted.

Prior to advertising or beginning instruction, a school must have a license issued by the Department. All schools must supply the tools, supplies, and equipment necessary to train students in all subjects required by Wisconsin Administrative Code (Wis. Admin. Code ch. BC 5 and Wis. Admin. Code § SPS 50.300).

Application Requirements for License Renewal: (Wis. Admin. Code § SPS 61.04)

- 1. Application for the renewal of a license for a school or specialty school shall be filed on or before the expiration date. The Department shall grant or deny the application for license renewal within 45 business days following receipt of the application.
- 2. A renewal application shall be filed together with the fee required by Wis. Stat. § 440.08, and shall contain the following information:
 - a. All the information required for an initial license under Wis. Admin. Code § SPS 61.03;
 - b. A copy of every advertisement used by the school or specialty school in the 12 months preceding the date of the application for license renewal, including the script for every radio or television advertisement;
 - c. The number of students currently enrolled in the school or specialty school and the number anticipated to be enrolled during the license period; and,
 - d. A statement that a Certified Public Accountant has completed financial statements consisting of a balance sheet, a profit and loss statement, and a cash flow statement for the school or specialty school, and that the report is on file at the school or specialty school and will be available for inspection by the Department on request at any time during regular business hours. The Department may require an audit of the finances of a school or specialty school, at the applicant's request, if the licensing application contains information, which reasonably gives rise to concerns that the school or specialty school is not financially sound or is not otherwise stable.

Application Requirements for Reinstatement of an Expired License: (Wis. Admin. Code § SPS 61.05)

To apply for reinstatement of a license expired for one year or longer, the owner of a school or specialty school shall file an application for an initial license.

To apply for reinstatement of a license expired for less than one year, the owner of a school or specialty school shall file an application for renewal, as required by Wis. Admin. Code § SPS 61.04, together with the application fee and late fee required by Wis. Stats. § 440.08.

The Department shall grant or deny the application for reinstatement within 45 business days of receiving the application. The application shall include the following additional material:

- 1. The dates on which any form of instruction was provided to students at the school or specialty school applying for license reinstatement during the period following the expiration of the license to the time the application for reinstatement is filed.
- 2. The names and address of the instructors who provided any instruction to any student at the school or specialty school during the period following expiration of the license, the names and addresses of the students in attendance during the period following expiration of the license, and the number of hours of training in each topic each named student received during the period following expiration of the license.

Wisconsin Department of Safety and Professional Services Mail To: P.O. Box 8935 Madison, WI 53708-8935 FAX #: (608) 251-3036 Phone #: (608) 266-2112 Professional Services Ship To: 4822 Madison Yards Way Madison, WI 53705 E-Mail: dsps@wisconsin.gov http://dsps.wi.gov

DIVISION OF PROFESSIONAL CREDENTIAL PROCESSING

APPLICATION FOR SCHOOL CREDENTIAL

The Department must deny your application if you are liable for delinquent state taxes, UI contributions, or child support (Wis. Stat. §§ 440.12 and 440.13).							
PLEASE TYPE OR PRINT IN INK Your name, address, phone number, and e-mail address are available to the public. Check box to withhold street address/PO Box, phone number, and email address from lists of 10 or more credential holders (Wis. Stat. § 440.14).							
Apply	ving for:	New License	☐ Renewal	☐ Change of	Ownership	☐ Change of Loc	ation
Indica	ate Type of School:	Barbering Only	☐ Barbering and Co	osmetology	☐ Aesthetics	☐ Electrology	☐ Manicuring
Schoo	l Name				Proposed Oper	ning Date	-
Schoo	ol Address				School Telepho	one Number	
Empl	oyer Identification Number		Your Social Security				
	application on this form. If you do not have a Social Security Number, you must complete Form #1051. The Department may not disclose the Social Security Number collected except as authorized by law.						
	de the names of all owners. I onal sheet.	Provide the name	of the corporation or	partnership, if	f applicable. For	additional space, ple	ease attach
Name	e(s) of Owner(s)						
Corp	oration or Partnership Name	(if applicable)					
Corporation of Farthership (value (if applicable)							
E-ma	il Address						
If the owner is a corporation, a copy of the articles of incorporation and most recent annual report filed with the Secretary of State, together with a list							
of names and addresses of the incorporators, officers, directors, and shareholders of the corporation, shall be submitted. No identification is required of any shareholder owning or controlling fewer than 10% of the shares of the corporation. If the owner is a partnership, the names and addresses of all							
partners and a copy of the partnership agreement shall be submitted.							
	ICATION FEES: Please check ap and attach to this application. To				For Receipting U	Use Only (59/87/88/8	39/187)
	I am seeking a Veteran Fee Wa page 2 for further information)	niver (for Initial Cred	dential Fee only, see				
	Barbering School Initial Crede ☐ Initial \$60.00 ☐ Renewal \$60.00	ential Fee or Renew	al Fee				
	Cosmetology, Aesthetics, Electric Credential Fee or Renewal Fee Initial \$11.00 Renewal \$11.00	0.	ng School Initial				

#1655 (Rev. 7/2021) Wis. Stat. ch. 440

ARE YOU A VETERAN? If yes, please view the DSPS website at <a "="" 10.1001="" doi.org="" href="https://nright.com/ht</th><th>former service members, a fee? Yes No e and list your WDVA Vo and experience? Ye</th><th>ucher Code #:s \qquad \qq \qu</th></tr><tr><th>(You may contact the WDVA at 1-800-947-8387 or <u>dva.wi.gov</u> for assistant related to your training.)</th><th colspan=8>If Yes, complete and return the Veteran Request Application Addendum (Form #2996). This form must be included with this application. (You may contact the WDVA at 1-800-947-8387 or dva.wi.gov for assistance in obtaining your WDVA Voucher Code and/or documents related to your training.)</th></tr><tr><th>If you qualify, are you a service member, former service member, or space of the service member of space of space of the service member of space of space of space of the service member of space of s</th><th></th><th></th></tr><tr><th>RENEWAL REQUIREMENTS: Please view the Department website at https://doi.org/10.1001/j.j.gov/	://dsps.wi.gov and select "	Professions," then the hyperlink for the		
1. Provide the name and Wisconsin address of a designated agent upon whom a	iny process, notice, deman	d, or other document may be served:		
Name				
Address				
of the school applying for licensure. If the owner of the school is a corporati of any description whatsoever which are currently or were previously owned shareholders of the corporation or partners. No report is required for any share corporation. For every school listed, attach a detailed statement indicating if the school value of the penied accreditation by any accrediting agency; Denied a license or had a license suspended, limited, restrict Subject to any form of receivership; or The subject of or named in any lawsuit alleging fraud, miss.	or operated by any of the reholder owning or contro was ever: eted, or revoked; epresentation, or violation	incorporators, officers, directors, or lling fewer than 10% of the shares of the of law.		
closing date.	closing date.			
	Credential Pulmber			
Please submit a current surety bond that is in compliance Wis. Admin. Code Anticipated Enrollment	§ SPS 61.06(2):	, , , , , , , , , , , , , , , , , , , ,		
0 - 50 Students or Enrollees \$25,000 51 - 100 Students or Enrollees \$40,000 Over 100 Students or Enrollees \$50,000				
5. Please indicate the number of students enrolled during the license period:				
 List names and credential numbers of all instructors hired by the school to pr necessary.) 	ovide practical and theory			
Name		Credential Number		
<u></u>				

#1655 (Rev. 7/2021) Wis. Stat. ch. 440

7.	f renewing, has a certified public accountant completed financial statements consisting of a balance sheet, a profit and loss statement, and a cash low statement?							
	☐ Yes ☐ No							
	Copies of the statements must be on file at the school and available for inspection upon request by the Department.							
8.	For initial credential or change of ownership, please verify that the school is in compliance and that you have submitted the following documents by checking each item below:							
	A detailed floor plan of the premises to be used by the school, which identifies the site of the school and includes a description of fixtures and equipment.							
	A copy of the school catalog and the completed Required Contents for School Catalogs (Form #2037).							
	☐ A copy of the student contract and the completed Required Contents for Student Contracts (Form #2036). ☐ A copy of the partnership agreement, if owned as a partnership.							
	A copy of the articles of incorporation and most recent annual report filed with the secretary of state, if owned as a corporation.							
	A copy of the curriculum, which satisfies the course of instruction requirements, found in Wisconsin Administrative Code (Wis. Admin. Code of Cos 5 for Payboring and Cosmetalawy, Wis. Admin. Code of S.P.S. 50 300 for Payboring and Cosmetalawy, Wis. Admin. Code of S.P.S. 50 300 for Payboring and Cosmetalawy.							
	ch. Cos 5 for Barbering and Cosmetology, Wis. Admin. Code § SPS 50.300 for Barbering only). A copy of current surety bond.							
9	For renewal of credential, please verify that the school is in compliance and that you have submitted the following documents by checking each							
٠.	item below:							
	A detailed floor plan of the premises to be used by the school, which identifies the site of the school and includes a description of fixtures and equipment.							
	☐ A copy of the school catalog and the completed Required Contents for School Catalogs (Form #2037).							
	A copy of the student contract and the completed Required Contents for Student Contracts (Form #2036).							
	 ☐ A copy of the partnership agreement, if owned as a partnership. ☐ A copy of the articles of incorporation and most recent annual report filed with the secretary of state, if owned as a corporation. 							
	A copy of every advertisement used by the school in the 12 months preceding the date of the application for license renewal, including the							
	script for every radio or television advertisement.							
	If the curriculum has changed since application of initial credential, please submit a copy to verify compliance with Wisconsin Administrative Code (Wis. Admin. Code ch. Cos 5 for Barbering and Cosmetology and Wis. Admin. Code § SPS 50.300 for Barbering only).							
	☐ A copy of current surety bond.							
CO	NTINUING DUTY OF DISCLOSURE:							
	derstand that I have a continuing duty of disclosure during the application process. If information I have provided in this application becomes							
invalid, incorrect, or outdated, I understand that I am obliged to provide any necessary information to ensure the information on my application remains								
current, valid, and truthful. I understand that credentialing authorities may view acts of omission as dishonesty and that my duty of disclosure during the application process exists until licensure is granted or denied.								
AF	FIDAVIT OF APPLICANT:							
	signing below, I am signifying that I have read the above statements (Continuing Duty of Disclosure and Affidavit of Applicant) and understand the gation I have as an applicant or credential-holder should information I've provided to the Department of Safety and Professional Services change.							
C:~	nature of Overage							
Sig	nature of Owner: Date://							
<u>PO</u>	ST-SECONDARY SCHOOL DESIGNATION: (optional)							
If you wish to be designated in the DSPS database as a post-secondary institution, which is required to be eligible for Title IV federal funding, <u>please</u>								
	submit proof (such as a copy of your school admissions policy), and attest to the fact that your school maintains an admissions policy that requires applicants to possess a high school diploma, GED, HSED or apply through a dual-enrollment/dual-credit program that is in compliance with Wis. Stat.							
	18.55.							
C :.	nature of Owners							
Sig	nature of Owner: Date://							

#1655 (Rev. 7/2021) Wis. Stat. ch. 440