



## GEORGIA STATE BOARD OF COSMETOLOGY

237 Coliseum Drive  
Macon, Georgia 31217  
Phone (478) 207-2440  
[www.sos.ga.gov](http://www.sos.ga.gov)

### APPLICATION FOR OUT OF STATE / COUNTRY COSMETOLOGY LICENSURE BY RECIPROCITY

Please read the instructions carefully and be familiar with the laws and rules governing the practice of Cosmetology/Hair Designer/Nail Technology/Esthetics in the State of Georgia. Visit our website for information:

<http://www.sos.ga.gov/plb/cosmetology>.

#### **\*\*Important\*\***

**The Board cannot process incomplete applications. If any item is missing, incomplete, or incorrect, your application cannot be reviewed by the Board. Please review this application before you submit it to ensure that all information and documentation is complete and correct. Incomplete applications result in delayed processing. Incomplete applications are void after one year. Furthermore, because application information is time sensitive, documents cannot be transferred from old applications to new applications.**

### Application Checklist

**The following checklist is an important part of your application. Please use this checklist to ensure that you submit a COMPLETE application.**

**NON-REFUNDABLE APPLICATION FEE:**

\$50 – Cosmetologist/Nail Technician/Esthetician/Hair Designer

The payment must be made by check or money order payable to the Georgia State Board of Cosmetology.

DO NOT SEND CASH OR COUNTER CHECKS. Checks returned for insufficient funds are subject to a \$40.00 service charge pursuant to O.C.G.A. §16-9-20.

**NOTARIZED APPLICATION:** The complete application must be mailed to the Board's office at the address listed above, along with your **FEE**

**OTHER STATE LICENSURE CERTIFICATION:** If you are or have ever been licensed in another state, please have that state(s) officially certify that license to the Georgia Board's office. A letter of certification from EACH state in which you were issued a license must be sent. The certification from your original state of licensure must indicate that you passed the examination in English without the assistance of a translator.

**EDUCATION:** All applicants are required to present proof of high school graduation, or GED, or a postsecondary education, or a college degree (copy of high school or college transcript).

**MASTER LEVEL REQUIRED TRAINING:**

Cosmetologists: 1,500 hours (school) of at least nine months' duration  
3,000 hours (apprentice) of at least eighteen months' duration

Estheticians 1,000 hours (school) of at least nine months' duration  
2,000 hours (apprentice) of at least eighteen months' duration

Nail Technicians: 525 hours (school) of at least four months' duration  
1,050 hours (apprentice) of at least eight months' duration

Hair Designer: 1,325 hours (school) of at least seven months' duration  
2,650 hours (apprentice) of at least fourteen months' duration

**PHOTOGRAPH:** A full-face (approximately 2x2) photograph taken within one year before the submission of the application.

**CITIZENSHIP:** Please submit a copy of your current Secure and Verifiable Document(s) such as driver's license, passport, or document as indicated on pages 9 & 10 of this application. If not a U.S. citizen, please attach documentation and complete form to determine qualified alien status.

**SUBMIT APPLICATION IN A 9X12 or LARGER ENVELOPE – Do not staple pages or check/money order. Do not fold pages of the application.**

# Cosmetology Reciprocity Fact Sheet

- All out of state / country applicants must file a reciprocity application with the Georgia State Board of Cosmetology. Only individuals trained in a Cosmetology profession within a Georgia post secondary school(s) or a Georgia Salon/Shop apprentice program should be referred to PSI Services LLC (PSI) to apply for examination. For Cosmetology examination information, contact PSI using one of the following methods:
  - Via the Internet 24 hours a day at [www.psiexams.com](http://www.psiexams.com).
  - Using a touch-tone phone, call PSI 24 hours a day at (800) 733-9267.
  - With a PSI registrar at (800) 733-9267, available Monday through Friday, between 7:30 am and 8:00 pm and Saturday, between 11:00 am and 5:00 pm, Eastern Time.

Contact PSI about the examinations, fees, dates, locations, exam content and grade notifications.

## Non-Reciprocal States

Georgia does **not** reciprocate with California, Connecticut, Florida, Hawaii, Oregon, Washington State or New York. For all other states, reciprocity will be granted or denied on an individual basis in accordance with the law. Georgia may reciprocate with Florida if the applicant's license was issued prior to August, 1986 and all other requirements are met. Georgia may reciprocate with New York if the applicant's license was issued prior to June 1, 2001 and all other requirements are met. Georgia may reciprocate with Illinois if the applicant's license was issued prior to December, 1984 and all other requirements are met.

\*\*Georgia does not reciprocate the nail technician license with Mississippi and South Carolina.

Georgia requires that the applicant take and pass the written and practical examination in English without the assistance of a translator.

## Denied Reciprocity Applicants

**All denied reciprocity applicants who may become eligible for licensure by examination will be provided a verification of eligibility letter** from the Georgia State Board of Cosmetology to apply for examination with PSI Services LLC (PSI). The verification of eligibility letter must be attached to their application for examination. Reciprocity application fee(s) remitted to the Georgia State Board of Cosmetology will remain active for one year. **The fee may be applied as the application for licensure fee once an individual has passed both the written and practical exams.**

## Translation of Documents

\*\*The Georgia State Board of Cosmetology requests that all "OUT-OF-STATE/COUNTRY APPLICANTS" provide a copy of the transcripts of training with an official translation. An applicant's documentation of education must be translated into English and must accompany this application. **Translation of documents must be completed by a translator on the board approved list of translators; this list may be found on the Board's website under "Download Forms."**

Should an applicant have a CURRENT license in another state or country, or territory of the United States, or the District of Columbia, where SIMILAR RECIPROCALITY IS EXTENDED TO THIS STATE AND THE REQUIREMENTS ARE SUBSTANTIALLY EQUAL TO THOSE IN THIS STATE and have paid to the division director a fee in such amount as shall be set by the board by regulation, the applicant may be issued without examination, a certificate of registration at the appropriate level, entitling him or her to practice cosmetology or the teaching of cosmetology at that level, UNLESS THE BOARD IN ITS DISCRETION, SEES FIT TO REQUIRE EXAMINATION SUBJECT TO THE TERMS AND PROVISIONS OF THIS CHAPTER. See *O.C.G.A. §43-10-9(d)*. Applicants who do not qualify for reciprocity under this law may be required to take the Georgia cosmetology examination.

## Definitions:

**Cosmetologist (Hair/Nails/Skincare)** -any person who performs any one or more of the following services for compensation:

- Cuts or dresses the hair;
- Gives facial or scalp massage or facial and scalp treatment with oils or creams and other preparations made for this purpose, either by hand or mechanical appliance;
- Singes and shampoos the hair, dyes the hair, or does permanent waving of the hair;

- Performs nail care, pedicure, or manicuring services as defined in Georgia law, or
- Performs the services of an esthetician as defined in Georgia law.

**Esthetician (Skincare only)** - any person who, for compensation, engages in any one or a combination of the following practices, esthetics, or cosmetic skin care:

- Massaging the face or neck of a person;
- Trimming eyebrows;
- Dyeing eyelashes or eyebrows; or
- Waxing, stimulating, cleansing, or beautifying the face, neck, arms, or legs of a person by any method with the aid of the hands or any mechanical or electrical apparatus or by the use of a cosmetic preparation.

**Hair designer (Hair only)** - any person who performs any one or more of the following services for compensation:

- Cuts or dresses the hair; or
- Singes and shampoos the hair or dyes the hair.

**Nail technician (Nails only)** - any person who, for compensation, trims, files, shapes, decorates, applies sculptured or otherwise artificial nails, or in any way cares for the nails of another person.

FOR BOARD USE ONLY  
 Amount Submitted \_\_\_\_\_  
 Date \_\_\_\_\_  
 Receipt # \_\_\_\_\_



FOR BOARD USE ONLY  
 Certificate Number \_\_\_\_\_  
 Date Issued \_\_\_\_\_  
 Applicant No. \_\_\_\_\_

**GEORGIA STATE BOARD OF COSMETOLOGY**  
 237 Coliseum Drive • Macon, Georgia 31217 • (478) 207-2440  
[www.sos.ga.gov/plb/cosmetology](http://www.sos.ga.gov/plb/cosmetology)

**APPLICATION FOR OUT OF STATE / COUNTRY COSMETOLOGY  
 LICENSURE BY RECIPROCITY**

**Application Fee \$50.00(non-refundable)** Checks returned for insufficient funds are subject to a **\$30.00** service charge pursuant to O.C.G.A. §16-9-20.

**License Type:** \_\_\_\_\_ Master Cosmetology  
 \_\_\_\_\_ Esthetician  
 \_\_\_\_\_ Nail Technician  
 \_\_\_\_\_ Hair Designer

**Additional License Type(s) and number (currently or previously issued by the Georgia Professional Licensing Boards):** \_\_\_\_\_

**Applicant is applying for above referenced license by:**

( ) Reciprocity from the **State of** \_\_\_\_\_

**Name** \_\_\_\_\_  
 (Please Print) First Middle Last

Name as shown on exam records or transcripts  
 (if different) \_\_\_\_\_  
 First Middle Last

\_\_\_\_\_  
**Social Security Number** **Date of Birth** (mm/dd/yyyy)

**Physical Address** \_\_\_\_\_  
**P.O. Box not acceptable** - Number and Street Apt. No City/State/ Zip  
 (If you are granted a license, your name, mailing address and license number become public information and will be posted on the Secretary of State's website. The mailing address is used for renewal notices, and application processing.)

**Mailing Address** \_\_\_\_\_  
 (if different) Number and Street Apt. No City/State/ Zip

\_\_\_\_\_  
 Telephone Number Day Telephone Number Evening Email\* Fax

**\*Acknowledgement of your application will be sent by email. Also, if further information is needed, email is the most efficient way for Board staff to contact you so that your application can be processed in the most efficient manner. Your email address will not be shared with any third party.**



**GEORGIA STATE BOARD OF COSMETOLOGY**  
 237 Coliseum Drive • Macon, Georgia 31217 • (478) 207-2440  
[www.sos.ga.gov/plb/cosmetology](http://www.sos.ga.gov/plb/cosmetology)

- Please check one of the following: MALE \_\_\_\_\_ FEMALE \_\_\_\_\_
- Education: High School Diploma \_\_\_\_\_ GED \_\_\_\_\_ or College or University Degree \_\_\_\_\_  
 (check one and attach documentation)
- Cosmetology School: \_\_\_\_\_  
 Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
 Number of credit hours \_\_\_\_\_ Dates of attendance \_\_\_\_\_  
 Year graduated \_\_\_\_\_ Circle one: Cosmetology / Esthetician / Nail Care  
 Salon/Shop training: \_\_\_\_\_  
 Number of hours/dates of training? \_\_\_\_\_  
 Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

- License received on \_\_\_\_/\_\_\_\_/\_\_\_\_ in the state of \_\_\_\_\_.  
 MM DD YYYY

I took a practical exam: \_\_\_yes \_\_\_no      I took a written exam: \_\_\_yes \_\_\_no

Did you take both parts of the exam in English without the assistance of a translator? \_\_\_yes \_\_\_no


- List each state in which you currently or previously held a license and your license number in that state(s):  
 \_\_\_\_\_  
 \_\_\_\_\_

License registration: A letter of certification from **each state board** where you obtained a license must be attached in a sealed envelope. Proof is required that you took and passed the examination in English without the assistance of a translator.

- Have you previously applied for registration in Georgia at any other time? Yes ( ) No ( )  
 If YES, explain:

Please be familiar with the laws and rules of the Georgia State Board of Cosmetology including the section relative to RECIPROCITY at [www.sos.ga.gov/plb/cosmetology](http://www.sos.ga.gov/plb/cosmetology).

**Your license will not be issued if you do not answer the questions on this page.**

Have you ever been convicted of a felony or misdemeanor (other than minor traffic violation) or entered a plea of guilty, nolo contendere or under the "First Offender Act," or been sanctioned by another board or agency? DUI and DWI are not minor traffic violations.  Yes  No 

If you answered "Yes" to the question regarding court convictions, you must submit to the Board the following: a) a copy of conviction/sentencing document(s) from the Court before which you were convicted and sentenced, signed by the presiding judge, and showing said conviction and sentence; AND, if applicable, b) a statement (on official letterhead) from your probation / parole officer regarding your current status/completion of any probation / parole. Your application will not be processed until this information is received and reviewed by the Board.

Have you ever had a license revoked, suspended, or otherwise sanctioned by any professional licensing board or agency, or have you ever been denied issuance of, or pursuant to disciplinary proceedings refused renewal of a license by any professional licensing board or agency in Georgia or any other state?

Yes  No



If you answered "Yes" regarding sanctions from another board, you must request that the licensing board or agency send a certified copy of the action taken against your license with relevant supporting documents to the Board's office. Your application will not be processed until this information is received and reviewed by the Board.

**Place passport size Photo here  
Must be 2" x 2" (NO COPIES)  
Photograph must be less than one year old.**

**APPLICANT AFFIDAVIT:**

I hereby swear and affirm that all information provided in this application is true and correct to the best of my knowledge and belief. I further swear and affirm that I have read and understand the current state laws and rules and regulations of the Georgia State Board of Cosmetology and I agree to abide by these laws and rules, as amended from time to time.

By signing this application, electronically or otherwise, I hereby swear and affirm one of the following to be true and accurate pursuant to O.C.G.A. § 50-36-1:

1) \_\_\_\_\_ I am a United States citizen 18 years of age or older. Please submit a copy of your current Secure and Verifiable Document(s) such as driver’s license, passport, or document as indicated on pages 9 & 10 of this application.

2) \_\_\_\_\_ I am not a United States citizen, but I am a legal permanent resident of the United States 18 years of age or older, or I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older with an alien number issued by the Department of Homeland Security or other federal immigration agency. Please submit a copy of your current immigration document(s) which includes either your Alien number or your I-94 number and, if needed, SEVIS number.

In making the above attestation, I understand that any failure to make full and accurate disclosures may result in disciplinary action by the Georgia State Board of Cosmetology and/or criminal prosecution.

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

\_\_\_\_\_  
Print Applicant’s Name

Personally appeared before me, the undersigned official authorized to administer oaths, comes

\_\_\_\_\_ who deposes and swears that he/she is the person who executed this  
(Applicant’s Name)  
application for a license by examination for Cosmetology in the State of Georgia; and that all of the statements herein contained are true to the best of his/her knowledge and belief.

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_\_

Notary Public Signature \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_

My Commission Expires \_\_\_\_\_

(seal)

## **HELPFUL HINTS FOR COSMETOLOGY RECIPROCITY APPLICANTS**

Individuals coming from another country must provide the following copies of original documents along with a translation if not in English. All translations must be completed by a Georgia State Board approved translator(s). The list of approved translators may be found on the Board's website under "Download Forms."

You may be required to take both the written and practical examination in English. If you are required to take the examination, your reciprocity application fee will be applied toward the licensing fee (for a period of one year) upon certification that you have passed both parts of the examination.

### **Copies of Original Documents Are Required:**

#### **PROOF OF TRAINING:**

Is your proof of training on letterhead/stationary?

Is it signed and notarized, and is there a seal on the document?

Is there a list of the subjects that you have taken and the number of hours for each subject?

#### **PROOF OF LICENSING:**

Did you include proof of licensing from the state / country, such as a copy of a current license and/or a letter from the licensing agency/authority?

Did you include a statement from the licensing agency/authority of the state / country that you passed a written and practical examination in English without the assistance of a translator to obtain your license?

Did you include a statement from the licensing agency/authority of the state / country that reciprocity is extended from that state or country to licensees from Georgia?

#### **PROOF OF SUCCESSFUL COMPLETION OF EDUCATION: (You must submit one (1) of the following):**

Proof of 9th Grade Education (If licensed before July 1, 2000)

Proof of High School Diploma or General Education Diploma (If licensed after July 1, 2000)

#### **PROOF OF 17 YEARS OF AGE (You must include one of the following):**

a copy of your birth certificate; or

a copy of your current passport

#### **PROOF OF NAME CHANGE (You must submit one (1) of the following and all names must match together with proof):**

any legal documents which verifies your legal name change

**APPLICANT: PLEASE CHECK THE FORM OF IDENTIFICATION BELOW THAT YOU POSSESS.  
RETURN THIS FORM ALONG WITH A COPY OF YOUR APPROPRIATE DOCUMENTATION.**

\_\_\_\_\_  
**Name**

Secure and Verifiable Documents Under O.C.G.A. § 50-36-2  
Issued August 1, 2011 by the Office of the Attorney General, Georgia

The Illegal Immigration Reform and Enforcement Act of 2011 (“IIREA”) provides that “[n]ot later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law’s website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General.” O.C.G.A. § 50-36-2(f). The Attorney General may modify this list on a more frequent basis, if necessary.

The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.

\_\_\_\_\_ A United States passport or passport card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ A United States military identification card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ A driver’s license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ An identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ A tribal identification card of a federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be found at:  
<http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm>  
[O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ A United States Permanent Resident Card or Alien Registration Receipt Card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ An Employment Authorization Document that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ A passport issued by a foreign government [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ A Merchant Mariner Document or Merchant Mariner Credential issued by the United States Coast Guard [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

- \_\_\_\_\_ A Free and Secure Trade (FAST) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- \_\_\_\_\_ A NEXUS card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- \_\_\_\_\_ A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card [O.C.G.A. §50-36-2(b)(3); 22 CFR § 41.2]
- \_\_\_\_\_ A driver's license issued by a Canadian government authority [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- \_\_\_\_\_ A Certificate of Citizenship issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- \_\_\_\_\_ A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- \_\_\_\_\_ In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document or other form of identification for proof of or documentation of identity, that document or other form of identification will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit. [O.C.G.A. § 50-36-2(c)]