

# COSMETOLOGY



The following items are required for your application to be considered complete:

#### Complete the STANDARD MTC CAREER PROGRAM APPLICATION.

In addition to the MTC application, you must also submit the following items from the supplemental packet:

- Cosmetology Application Essay telling why you are interested in the Cosmetology program and what you know about the Cosmetology profession.
   OR
- Complete Cosmetology Application Questionnaire
- TWO (2) completed Professional Recommendation Forms
  - References cannot be related to you; No family members, friends, spouses etc.
- Complete TWO (2) Professional Salon Service Questionnaires
- · Read, sign, and date Technical Standards Form
- Recommend attendance at (1) MTC Information Session
- Dates are on the www.MarionTC.edu website



## Cosmetology Application Essay

In your own words, please use the following section to tell us why you are interested in the Cosmetology Program, as well as what you know about the Cosmetology profession. (This essay MUST be handwritten. Cursive is preferred; however, this essay must be legible or it will not be valid.)

NAME:	DATE:	



## COSMETOLOGY APPLICATION QUESTIONNAIRE

APPLICANT NAME: \_\_\_\_\_\_DATE: \_\_\_\_\_

Please print legibly and respond briefly to the following questions:
1. REASON FOR APPLYING/UNDERSTANDING OF THE FIELD
a. Tell us why you would like to become a Cosmetologist.
<ul> <li>b. Do you have any experience in the Cosmetology industry? If so, please explain.</li> </ul>
c. Tell us what you know about the Cosmetology field.
<ul> <li>d. Tell us what your plans/goals are for the future if you were to become a Cosmetologist.</li> </ul>
2. FINANCIAL AND TIME MANAGEMENT ARRANGEMENTS

b. What arrangements have you made to provide for the expenses involved in the program? Considering time dedicated for class and study, do you plan to work during your enrollment?

a. What hardships do you foresee, if any, with the 90% attendance requirement for the program? Please explain how you plan to deal with this problem(s).

c. Do you have reliable transportation? Do you have a back-up plan



#### **3.GENERAL QUESTIONS**

a.	What are some comments that your most recent employer / teacher has made to you about your performance at work / school?
b.	Approximately how many days have you missed from work / school in the past year? Two years?
	Can you explain the reason for the majority of these absences?
C.	Can you relay to us the most recent experience you had dealing with a conflict situation involving another person at work or school? What did you learn from this experience?
d.	How well do you manage dealing with difficult people or people that are from a different culture or have different beliefs?
e.	Can you tell us about an experience that demonstrates your ability to handle unexpected changes at work, school or at home?
f.	How did you hear about our program?
g.	Do you want to be considered for the day or evening class? Please check one:
	☐ DAY ☐ EVENING
NAME: _	DATE:

Marion County Public Schools

Equal Opportunity Schools



### **Grooming and Salon Services Recommendation Form**

has applied for the following program:	
Day Cosmetology / Evening Cosmetology / Day Nails / Evening Facials / Day B Other:	arbering /
Please answer the following questions in reference to your knowledge of this applicant.	
IN WHAT CAPACITY HAVE YOU KNOWN THE APPLICANT?	
Professional / Personal (non-relative) /Other:	
HOW LONG HAVE YOU KNOWN THE APPLICANT?	
WHAT DO YOU KNOW ABOUT THE APPLICANT THAT WOULD MAKE THEM AN ASSET IN TH GROOMING AND SALON SERVICES FIELD?	
ADDITIONAL COMMENTS:	
SIGNATUREDATE	
NAME (Please Print)	
PHONE: EMAIL:	



### **Grooming and Salon Services Recommendation Form**

has applied for the following prog	ıram:
Day Cosmetology / Evening Cosmetology / Day Nails / Evening Facials Other:	/ Day Barbering /
Please answer the following questions in reference to your knowledge of this applications	ant.
IN WHAT CAPACITY HAVE YOU KNOWN THE APPLICANT?	
Professional / Personal (non-relative) /Other:	
HOW LONG HAVE YOU KNOWN THE APPLICANT?	
WHAT DO YOU KNOW ABOUT THE APPLICANT THAT WOULD MAKE THEM AN ASS GROOMING AND SALON SERVICES FIELD?	
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ADDITIONAL COMMENTS:	
SIGNATURED	DATE
NAME (Please Print)	
PHONE: EMAIL:	



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HOW LONG HAVE YOU KNOWN THE APPLICANT?	
WHAT DO YOU KNOW ABOUT THE APPLICANT THAT I	
ADDITIONAL COMMENTS:	
SIGNATURE	DATE
NAME (Please Print)	
PHONE:EN	ЛАIL:



# PROFESSIONAL SERVICE QUESTIONNAIRE

INSTRUCTIONS TO POTENTIAL STUDENTS:

You are required to have two (2) professional salon services. You are to ask the Barber/Stylist the following questions; you are to document their answers on your paper. Have the Barber/Stylist sign off and give you a business card to attach to the form. Please return this form with your completed application.

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1.	How physically demanding is it to be a Barber/Stylist?
2.	Are the physical demands more than you expected?
3.	Where did you train? Was the training more or less than you expected?
4.	How many hours was the program where you received your training?
5.	How much marketing is required to maintain your client base?
6.	Do you rent, work on commission, or are you on a salary?
7.	Do you specialize? If so, in what area?
8.	What is the demand for your area of expertise?
9.	How many hours per week do you work?
Barber/ Styl	ist Signature Date
Applicant's	Signature Date



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Barber/ Styl	ist Signature [	Date
Applicant's	Signature	_ Date



#### **TECHNICAL STANDARDS**

#### Cosmetology

The student must be able to meet all of the essential skills to participate in all scheduled classroom, laboratory and client lab sessions:

- Walk the equivalent of three (3) miles a day.
- Grip, reach above shoulder level, bend at the knee, squat, stoop and crawl.
- Sit, stand for prolonged periods of time. ☐ Perform CPR/First Aid
- Lift a minimum of 50 lbs.
- Manipulate small objects proficiently.
- Tolerate exposure to dust, fumes, chemicals, detergents, body fluids, and latex.
- Distinguish colors.
- See objects as small as 1 mm.
- Withstand varied environmental conditions, such as heat, cold, and moisture.
- Cope with a high level of stress.
- Prioritize and make decisions quickly under pressure.
- Cope with anger, fear, hostility and/or confrontation in a calm manner. Be flexible and self-directed.
- Concentrate.
- Be able to use critical thinking in order to solve problems.
- Demonstrate a high degree of patience and confidentiality.
- Communicate well both verbally and in writing.

Applicant's Signature:		
Print Name:	Date:	



