Admission Application

Please complete and submit the entire 2-page application. Incomplete applications will be returned to you and will delay the decision on your acceptance.

Name:		First name		Preferred first r	name	.	M.I. Ma	aiden	
Mailing address:_	Number & street				City		State		Zip code
Permanent addre	cc.				,				
Permanent addre (if different)	Number & st	reet			City		State	!	Zip code
Telephone: ()				_ Cell phone: ()					
E-mail:			IN	M:					
Gender: □Male	□Female								
Nearest Relative:	☐ Father	- □ Mothe	r 🗖	Guardian		Spouse	/partner		
				City, State, Zip					
Name	Address	_						none	
Have you ever be	en convicted o	f a felony?	⊒Yes 🗖	No If yes,	explai	n:			
Which best descr	ibes your applic	cation status?]New app	olicant	□Forn	าer Stเ	ıdent		□Transfer
If transfer, from where? How many hours do you currently have?									
When would you									
Which program a	re you intereste	ed in? 🔲 Eyelasi	h Extensio	on⊡Estheti	cs	□Man	icure		
		☐ Instru	ictor —	_	_	Ш	_		
5	⊟ 6 11 .:		Ш				Ш		
Do you plan to be									
Which schedule a Do you have re	•	ŕ	_		u Ev	-	Na Té		2
work? If you resi	-			•			,	•	re?
inst the last high so							-		
institutions you I IHeart Lash Acade	nave or are att	ending. Please l	be sure to	include I	Heart	Lash A	cademy in	f you ha	ve attended
High School:	Name of institut	ion, City, State		From (mo.,	/yr.)	To (mo	o./yr.)	Diploma	/GED/Degree
Cosmetology School:									
College:									
-									
Have you been sudisciplinary reason. If yes, explain:	ns? 🗐Yes 🛚	ŪNo	•	ology schoo	ol or co	ollege f	or acaden	nic, atter	ndance or
To provide you th	ne best education	on, please let us	know if y	ou have ar	n IEP c	or Spec	ial Educat	ion plan	so we can

make accommodations for your State Board Exam. □Yes

Employment ar	nd Military History List you	ır employment experience (ir	ncluding military service) fo	r 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 ques	stions in 3 or 4 sentences.			
1.) Why will you be	a great student at our school? _			
	night prevent you from achieving		and excellent acade	mic
3.) How did you hea	nr about IHeart Lash Academy?			
4.) What traits do yo	ou have that will help you succee	ed in this industry?		
5.) What are your lo	ng-term career goals?			
6.) Why did you cho	ose IHeart Lash Academy?			
 All applications will be revi Incomplete applications w Applications received from Representative and Ma 	ust complete an Admissions Application and rewed and approved by the campus Admission ill not be considered for review. In an applicant with a felony conviction will be sanager.	ns Representative and campus N	Aanager.	ampus Admissions
 Prospective students will b In the event a prospective IHeart Lash Academy reseduring conversations wor on the behalf of a prospective IHeart Lash Academy teach 	does not guarantee admission. e notified by email or phone of approval or d student cannot be reached via phone, a letter rves the right to approve or deny admission b with prospective students or friends and family ctive student, or any other form of communic thes all courses in English only. The Texas Stat is not the primary language of a prospective %.	r will be mailed to the address pased on information gathered for members of prospective stude ation. Board of Cosmetology admini	rom the Admissions Applications to the phone or in persons the licensing examinations.	on, on), letters written by
I certify that to the any omission or mis or dismissal from II- accepted into the pr	best of my knowledge, the inform representation of facts will be calleart Lash Academy if later discongram, it is MY RESPONSIBILIT down payment, etc.) to be receive	ause for refusal of adm overed. I further unde Y to arrange for ALL Al	nission, cancellation of rstand that, if I am a DMISSION CREDENT	of application, approved and IALS (diploma,
			Date:	
For Office Use Only: Date application received:			Submit by Ema	il Print