



# ACADEMIES OF COSMETOLOGY, INC.

\_\_\_\_ 10036 South US Hwy 1  
Port St Lucie, FL 34952  
772-337-4747

\_\_\_\_ 3028 South US 1  
Fort Pierce, FL 34982  
772-464-4885

\_\_\_\_ 1375 US 1 Suite 2  
Vero Beach, FL 32960  
772-978-7178

**Application for enrollment:** Referred by: Website \_\_\_\_ Facebook \_\_\_\_ Instagram \_\_\_\_

Individual Name \_\_\_\_\_ \*\*Check all that apply

Name (Block Letter) Dr/Mr/Ms \_\_\_\_\_

Date of Birth

D		M		Y	
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Visually Challenged \_\_\_\_ Physically Challenged \_\_\_\_

Have you ever been arrested: \_\_\_\_ Yes \_\_\_\_ No    Were you convicted: \_\_\_\_ Yes \_\_\_\_ No

<p><b>Physical Address</b></p> <p>_____</p> <p>_____</p> <p>_____</p> <p>State _____</p> <p>Telephone (STD code) _____</p> <p>Mobile: _____</p> <p>email: _____</p>	<p><b>Mailing Address if Different:</b></p> <p>_____</p> <p>_____</p> <p>_____</p> <p>State _____</p>
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**Academic Education:**

	Subject (s) & Specialisation	% of Marks/Grade	School	Year
High School/GED				
Associate Degree				
Bachelor Degree				

Contd. P/2

**Details of Employment** (in chronological order):

Employer	Position	Period		Nature of Duties
		From	To	

*I hereby declare that the entries made in this application form are true to the best of my knowledge and belief.*

**Signature of Applicant** \_\_\_\_\_

**Dated:** \_\_\_\_\_

*Notes:* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Admission Representative Signature* \_\_\_\_\_

## Methods of Payment Available

Please check off the ones interested in getting further information on.

**Financial Aid Programs:** Federal Grants\_\_\_\_ Federal Student Loans\_\_\_\_

\* Must complete current FAFSA on line at [www.studentaid.gov](http://www.studentaid.gov)

**Department of Veteran Affairs:** Chapter 33\_\_\_\_ Chapter 32(VEAP)\_\_\_\_ Chapter 31\_\_\_\_  
Chapter 30\_\_\_\_ Chapter 35\_\_\_\_ Chapter 1606(Montgomery Bill) \_\_\_\_ Chapter 1607(REAP)\_\_\_\_  
Yellow Ribbon Campaign \_\_\_\_

\*Must supply your DD214 and/or Enrollment Certificate.

**Scholarships:** Gold Seal\_\_\_\_ Bright Future\_\_\_\_ Tribal\_\_\_\_ Private Scholarships\_\_\_\_

\* Must notify the organization of the school planning on attending.

**PrePay:** Florida Prepay\_\_\_\_ 529 College Prepay Plan(Outside of Florida)\_\_\_\_

\* Must notify Prepay of the school planning on attending.

**Private Pay Options:** Cash\_\_\_\_ Credit Card\_\_\_\_ Debit Card\_\_\_\_ Money Order\_\_\_\_

Certified Cashiers Check \_\_\_\_ Personal Check (with proper ID and preprinted Name and Address)\_\_\_\_

## Available Schedules

**Day Schedules:** \_\_\_\_ Tuesday through Saturday

(Saturday is mandatory unless letter on file from employer or day care which are the only exceptions allowed for exemption from Saturday attendance)

**Night Schedules:** \_\_\_\_ Monday through Thursday and Saturday

(Saturday is mandatory unless letter on file from employer or day care which are the only exceptions allowed for exemption from Saturday attendance)