

Salon Assessment

I am in the process of enrolling in cosmetology school. To help supplement my tuition, I am applying for the Access to Cosmetology Education (ACE) Program. A requirement of the application process is to meet with a salon industry professional. Please take a few minutes to run through this assessment and provide me with some valuable feedback.

Salon Industry Professional: The purpose of this assessment is to provide a positive introduction of the beauty industry for this prospective student. Feel free to spend as much time as necessary with the student to explain the benefits of a career in the beauty industry. Thank you for your assistance.

Applicants Name: _____

Desired Cosmetology School: _____

What made you decide to pursue a career in cosmetology: _____

What are some of your interests/hobbies: _____

Name one person that is supportive of your plans: _____

Name one great thing you've heard about the salon industry: _____

What are your plans and expectations after receiving your license? _____



Name of Salon: _____

Name of person conducting assessment: _____

Title: _____

Salon Telephone Number (_____) _____ - _____

I would be interested in mentoring this student: YES NO (circle)

ACE APPLICANT:

Bring this form, along with the ACE Program Application, and a copy of your high school diploma or GED certificate with you when meeting with the school owner or admissions director. Questions? Contact Info@beautyschools.org or (480) 281-0431.



ACE PROGRAM APPLICATION

Prior to visiting the cosmetology school you are interested in attending, please complete this form. Bring the completed Salon Assessment and proof of your high school diploma or GED certificate for the initial meeting with the school owner or admissions director.

Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Telephone: (_____) _____ - _____

DOB: ____/____/____ SSN# _____ - _____ - _____

High School Diploma or GED (circle)

Name of Institution: _____

Date of Completion: _____

Circle course(s) you're interested in:

Cosmetology

Barbering

Nail Technician

Esthetics

Massage Therapist

Instructor

Salon Management

Make-up

Other: _____

How did you hear about the ACE Program? _____

I hereby apply for the Access to Cosmetology Education Program and affirm that the information contained in this application and accompanying material is accurate and complete to the best of my knowledge.

Signature: _____

Date: _____