

Wyoming Board of Cosmetology

2515 Warren Avenue, Suite 302

Cheyenne, WY 82002

Phone: (307) 777-3534 Fax: (307) 777-3681

Renewal Application Personal License and/or Independent Contractor

Renewal Fee: Personal License: \$96.00 (2 years) Independent Contractor; \$75.00 (1 year)

NAME _____ (_____)
FIRST LAST LIST ALL PREVIOUS NAMES

HOME MAILING ADDRESS CITY STATE ZIP

BIRTH DATE: _____ - _____ - _____ LAST 4 DIGITS OF SOCIAL SECURITY # _____
(REQUIRED FOR RENEWAL SYSTEM) (FOR LICENSE VERIFICATION ONLY)

PHONE _____ Email _____

RENEWAL IS FOR: PERSONAL LICENSE _____ INDEPENDENT CONTRACTOR LICENSE _____

FOR INDEPENDENT CONTRACTOR RENEWAL, NAME OF SALON WORKING IN _____
(Include late fees, if applicable, for Independent Contractor's license when renewing after 8/31)

We receive requests for mailing lists from industry members who have a desire to mail information of interest to licensees; may we include your name?
Yes () No ()

Since your last renewal or within the past two (2) years:

1. Has any state(s) rejected your application or disciplined, restricted, revoked or suspended your license? Yes _____ No _____
2. Have you ever voluntarily surrendered your license in order to avoid disciplinary action by any regulatory agency? Yes _____ No _____
3. Have you ever been convicted of any felony? Yes _____ No _____

Signature of Licensee _____

The following information will be shredded after processed.

There is an additional charge of \$4.00 for all credit card payments.

CREDIT CARD TYPE [] VISA [] MASTERCARD [] DISCOVER

CREDIT CARD NUMBER: _____

CVC: _____ (3 digit # on the back of the card) EXPIRATION DATE: MO _____ YR _____

NAME AS IT APPEARS ON THE CARD: _____

BILLING ADDRESS: _____

CITY: _____ ST: _____ ZIP: _____ TELEPHONE # _____