



# Enrollment Application

Campus applying to:

- Bayshore: 5780 N. Port Washington Road, Glendale, WI 53217**
- South: 4111 S. 108<sup>th</sup> Street, Greenfield, WI 53228** ( Esti, South only)
- Madison: 353 E. Campus Mall, Madison, WI 53715**

For Office Use Only:

Date: \_\_\_\_\_ Recd By: \_\_\_\_\_

\$10.00 App Fee Recd: \_\_\_\_\_

Start Date: \_\_\_\_\_

Please complete this application and submit with copies of your high school diploma or GED certificate, official high school transcripts, Driver's license or state ID card, social security card, a letter of intent, and a \$10.00 non-refundable application fee. Missing or inaccurate data may result in application being returned as incomplete and/or may result in denial of your application.

## PERSONAL INFORMATION

Full Name:		Social Security #:	
Present Full Address (include city, state and zip):			
Cell Phone:	Home Phone:	Email:	
Birth date:	Age:	Marital Status:	Number of Dependent Children:

## FAMILY INFORMATION

Mother's Full Name:	Phone:
Present Full Address (include city, state and zip):	
Father's Full Name:	Phone:
Present Full Address (include city, state and zip):	

Please check if parents are:  married  separated  divorced  other: \_\_\_\_\_

**EDUCATION: Have you ever attended this or any other Cosmetology School?**  Yes  No **If yes, please attach official transcripts.**

High School or GED/HSED Issuing body (include name and location):	Date Graduated:
College / Trade School #1 and Major (include name and location):	Date graduated or withdrew and reason for not completing:
College / Trade School #2 and Major (include name and location):	Date graduated or withdrew and reason for not completing:

**EMPLOYERS: Please provide information for your current employer and/or most recent employment.**

Employer Name and phone:	Dates Employed:	Position:	Reason for leaving:
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**REFERENCES: Please provide us with two personal references not related to you, whom you have known at least one year.**

<b>Name of Reference #1:</b>	Phone #:
Address of Reference #1 (include city, state zip code):	Relationship of Reference #1:
<b>Name of Reference #2:</b>	Phone #:
Address of Reference #1 (include city, state zip code):	Relationship of Reference #2:

