

Barber School Application

The entire application process including public hearing must be completed to obtain the required registration to teach; solicit students; advertise or conduct any barber instruction for profit or tuition charge in the State of Minnesota.

The data provided by you on this application will be used by the Minnesota Board of Barber Examiners to determine eligibility. You are not legally obligated to provide this information; however, failure to complete the application process may delay processing or result in denial of your barber school application.

Disclosure of your Social Security Number is required by Minnesota Statute 270C.72 and it may be requested by and released to the MN Commissioner of Revenue. Your Social Security Number may be used for Revenue Recapture as authorized by Minnesota Statute 270A.

Upon issuance of registration, all information provided in the application process, with the exception of your Social Security Number, personal telephone and personal e-mail address will become public information pursuant to Minnesota Statute Chapter 13.

Pursuant to Minnesota Statutes 604.113 and 609.535, the Minnesota Board of Barber Examiners is authorized to charge a service fee of \$30.00 for any check that is returned for nonpayment.

Application Fee: \$1030.00 by check or money order made payable to the Minnesota Barber Board. Effective August 1, 2020, the Board will no longer accept cash payments.

Section 1: School Information

Name of School		School Telephone Number
Address of School		School E-mail Address (optional)
City	State	Zip Code
Minnesota Tax Identification Number:	Employer Identification Number:	

Section 2: Ownership Structure

CORPORATE OWNERSHIP

****Attach a copy of the certificate of incorporation to the application****

Corporation/Company Name	Type of Incorporation or structure	CEO Name	
Corporation Address			Telephone Number
City	State	Zip Code	County
MN Tax Identification Number (required)		Contact person name and phone number:	
Federal Employer Identification Number (required)			

INDIVIDUAL OWNERSHIP (Sole Proprietorship)

Owner Last Name	Owner First Name	Date of Birth (required)	
Address		Telephone Number	Owner Social Security Number
City	State	Zip Code	County
MN Tax Identification Number (required)		Email	

Section 3: Operator Information

Last Name	First Name	Telephone Number:	
Address			Original Registered Barber Date:
City	State	Zip Code	Barber Registration Number
Social Security Number:		E-mail Address	

Section 4: Operation Hours

Please indicate the days and times the school will be conducting business.

Days of the week school will be open:	Hours of Operation:
<input type="checkbox"/> Monday	
<input type="checkbox"/> Tuesday	
<input type="checkbox"/> Wednesday	
<input type="checkbox"/> Thursday	
<input type="checkbox"/> Friday	
<input type="checkbox"/> Saturday	
<input type="checkbox"/> Sunday	

Section 6: Occupations and Residences

List of occupations for the past ten (10) years for applicant and school operator if different.(Rule 2500.5100 Sub 1 B)

Occupations			
School Operator	Occupation	Address	Dates

If additional space is needed, continue this list on the back of this page or on a separate attached piece of paper.

List of residences for the past ten (10) years for applicant and school operator if different. (Rule 2500.5100 Sub B)

Residences		
Name	Address	Dates

If additional space is needed, continue this list on the back of this page or on a separate attached piece of paper.

Section 7: Complete Financial Statement

A complete financial statement is required. (*Rule 2500.5100 Subd 1 D*)
 Attach the following financial documents to the application:

- a. **Income statement**
- b. **Balance sheet for the business entity and for each owner.***
**For individuals, a Balance Sheet is also called a personal financial statement.*
- c. **Attach monthly income and cash flow projections for the school’s first three years of operation.**

Please ensure the projections specify:

- The cost of tuition used to calculate the tuition projections.
- The number of students used in the calculations.
- The amount of income expected to be generated from student kits and fees.
- The amount of income expected to be generated from school barbering services.

Section 8: Scale Drawing

Provide Scaled Drawings for:

- a. **Dimensions of the school**
 - Dimensions of the school must be clearly listed on the scale drawing including:
 - i. Provide dimensions of the classroom.
 - ii. Provide dimensions of the waiting area.
 - iii. Provide dimensions of areas where barbering services are provided.
- b. **Size and location of entrances and exits**
 - Provide a list of dimensions for each entrance and exit.
- c. **Waiting area separate from workstations or classroom.** (*2100.5100 Sub1 E(1)*)
 - Indicate on a scale drawing which areas are:
 - i. Waiting Areas
 - ii. Classroom Areas
 - iii. Areas where barbering services are provided
- d. **Classroom space of at least 25 square foot per student (Use table to calculate)**
 (*2100.5100 Subd 1 E(2)*)

Classroom Area Square Footage	Number of Maximum Students	Square feet per Student

- e. **Number of barber chairs (workstations) to be installed with a minimum of five feet between barber chairs, measured center to center.** (*2100.5100 Sub1 E(1)*)
 - Clearly color code each barber chair on a scale drawing.
- f. **One sink or dispensary as required by 2100.8100, subpart 3 for each barber chair.**
 - Clearly color code each sink (1 sink required for each 2 barber chairs *Rule 2100.8100 Sub 2*)
 - Clearly label and color code each dispensary.
- g. **One closed cabinet for clean towels for each barber chair**
 - Clearly label and color code each cabinet on a scale drawing. (*Rule 2100.5100 Sub 1E(7)*)

- h. One closed container for soiled towels for each barber chair**
 - Clearly label and color code a soiled towel container for each barber chair. (*Rule 2100.5100 Sub 1E(7)*)
- i. Separate washroom facilities for men and women**
 - Clearly label on a scale drawing the separate washroom facilities for men and women. (*Rule 2100.5100 Sub 1 E(4)*)
- j. At least one hair dryer**
 - Clearly label the location on a scale drawing. *Rule 2100.5100 Sub 1E(7)*
- k. At least one time clock or a digital software alternative for tracking student hours.**
 - Clearly label the location on a scale drawing. *Rule 2100.5100 Sub 1E(7)*

Section 9: Detailed Plans

Provide Detailed plans for:

- a. Plumbing and Sewer System**
 - Provide detailed plans for the plumbing and sewer system. (*Rule 2100.5100 Sub 1 E(4)*)
 - Provide a statement regarding the availability and intended use of municipal sewer and water supplies. (*Rule 2100.5100 Sub 1 E(4)*)
- b. Lighting and Ventilation**
 - Provide detailed plans for the lighting. (*Rule 2100.8500*)
 - Provide detailed plans for ventilation. (*Rule 2100.8500*)
- c. Flooring Material**
 - Indicate the type of flooring used in the school keeping in mind the requirements of rule 2100.8400.
Floors of barber shops or barber schools shall be covered with hardwood, linoleum, composition tile, or some other washable and nonporous material.

Section 10: Classroom Material Statement

Provide a statement showing the following will be available within the classroom: (*Rule 2100.5100 Sub 1E(3)*)

- a. One desk for each enrolled student
- b. Chart of skin and hair
- c. Chart on blood supply to the face and neck
- d. Chart on muscles of the face, head, and neck
- e. Chart on nerves of the face head and neck
- f. Chart on the bones of the face head and neck
- g. One black (or white board) of not less than six by three and one-half feet

Section 11: Course Outline

Provide a course outline including instructional units showing a course of study of not less than 1500 hours of instruction as described in Minnesota Statute 154.07. (*Rule 2100.5100 Sub 2*)

Section 12: Policies and Student Information

Provide policies and information related to students including:

- a. **Copy of a student brochure that includes:** (*rule 2100.5100 Sub 3*)
 - Any fees charged including and any additional fees.
 - Enrollment Procedures.
 - Termination Procedures.
- b. **Provide copies of all financial aid and student refund policies.**
 - Attach a copy of each policy. If you do not provide financial aid you do not need a policy.
- c. **Provide a copy of the student rules and disciplinary action forms.**
 - Attach copies of each document.

Section 13: Insurance and Bond Information

Provide the following:

- a. **Worker's Compensation Certificate**
 - Provide a Certificate of Worker's Compensation . (*MN Stat 176.182*)
- b. **Surety Bond**
 - Provide a copy of a School Surety Bond of at least a minimum of \$25,000.00 (*MN State 154.07 Sub 5(1)*)

Barber School Responsibilities

Renewal:

Your school registration will expire each year on December 31st. Failure to renew on or prior to that date will result in additional penalty fees. While the Minnesota Board of Barber Examiners will make every effort to send renewal notices, it is your responsibility to ensure your registration is renewed on time.

Business Structure Change:

If you change any part of your business structure, you must notify the Board immediately by providing documentation of the change or, at the request of the Board, a new application.

Name Change:

If the name of the school changes, please notify the Board in writing and provide documentation of the change.

Address Change:

If the address of a school changes, a new application must be completed, and the required application fee must be paid prior to issuance of a new registration. Change of physical location of the school requires a full new school application.

Barber Laws and Rules:

Copies of the Minnesota Barber Laws and Rules may be purchased from the Minnesota Bookstore (651.297.3000, 660 Olive Street, St. Paul) or at: www.leg.state.mn.us

AFFIDAVIT OF APPLICANT

I attest that any judgment levied against the school or owner(s) on account of fraud, misrepresentation, or deceit practiced by them or their agents will be paid in full to the Minnesota Board of Barber Examiners. I further attest that the information provided within this application is true and accurate to the best of my knowledge and the application has not been altered in any way

I, _____ being duly sworn, depose and say that I am the

_____ of _____

(Title)

(Name of barber school)

I have read and completed the above application and attest that all statements made are true and complete to the best of my knowledge.

Signature of Applicant

Date

Subscribed and sworn before me this _____ day of _____, 20_____

Notary Seal

Notary Public

County

My Commission Expires

BUILDING AND ZONING COMPLIANCE

To assure that the Barber School is in compliance with current local building and zoning ordinances, this page must be completed for all Barber School applications even if the location has been a Barber School before.

**BUILDING AND ZONING COMPLIANCE STATEMENT TO BE
COMPLETED BY ZONING OFFICIAL, ORIGINAL
SIGNATURE REQUIRED**

I attest that the barber school located at _____

(School Address)

as identified in this application, is in compliance with local building and zoning requirements.

City or County of Jurisdiction

Signature of Zoning Official

Title

Date

Printed Name of Zoning Official

Telephone

*This document is available in alternative formats to individuals with disabilities by calling
651-201-2820 or through the Minnesota Relay Service at 1-800-627-3529.*

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