

335 Randolph Avenue, Suite 120 St. Paul, MN 55102

Phone: 651-201-2820 Fax: 651-797-1371 mn.gov/boards/barber-examiners

Email: BBE.Board@state.mn.us

### RECIPROCITY APPLICATION

# OUT OF STATE OR FOREIGN COUNTRY TRANSFER APPLICATION

The Minnesota Board of Barber Examiners will evaluate the information provided to determine if your training and experience are substantially the same as the training and experience required for a license in Minnesota. Applications are evaluated on a case by case basis.

REQUIRED FEE:		
☐ <b>Registered Barber</b> A Pursuant to Minnesota	ed to charge a service fee of \$3	, the Minnesota Board of Barber
REQUIRED DOCUMENTS	8	
☐ Original letter of licen	se verification from the licensing cate, registration, or license is contact.	
origin. Contact yo	be received by the Board directory to be the board of Barber Examination of Barber Exami	ave a verification
□ Barber School Transcr completed; training m • Transcript inclusions school completed.	urrent barber license with this a ript showing a minimum of 150 ust include training in shaving. Using all subjects that were taung is required. Cosmetology So	0 hours of barber school ght and total number of hours of
☐ A copy of your High S diploma, or GED.	school Transcript showing com	pletion of at least 10 <sup>th</sup> grade,
PPLICANT INFORMATIO	N	
ast Name	First Name	Middle Initial

### AP

Last Name	First Name		Middle Initia	al
Address			Telephone N	Number
City	State	Zip Co	l ode	County
Date of Birth /	Social Security Number	E-mai	l address	

## FOREIGN COUNTRY TRAINING OR LICENSE VERIFICATION REQUIREMENTS:

All Foreign Country applicants for barber registration in Minnesota are required to have their foreign credentials verified by a Board-approved credentialing service prior to submitting the Minnesota barber reciprocity application.

The required documents are:

- secondary school transcript
- barber school transcript and certificate
- barber license

Foreign credentials must be submitted for verification to one of the Board-approved credentialing agencies listed below.

The Board will receive a report from the credentialing agency for review along with the reciprocity application you submit directly to the Board. The applicant will be informed of the Board's decision regarding registration and/or examination requirements after all documents are received and reviewed.

Contact one of these agencies for the required verification of your foreign education, training, and license:

## **AEQUO International**

Josef Silny & Associates, Inc: International Education Consultants

Span Tran: The Evaluation Company

The credentialing agency will submit a report to the Board.

## **Applicant Information Collection and Use**

The information collected during the application process is used to determine eligibility for examination or barber registration/license. You are not legally obligated to provide any of the information requested. If you do not provide the information, the Board may be unable to process your application resulting in the application process being delayed or the application being denied.

The Board is required to have a licensee's Social Security Number on file by Minnesota Statute 270C.72 and cannot issue a license without having the number. Your Social Security Number may be requested by and released to the Minnesota Commissioner of Revenue and may be used for revenue recapture as authorized by Minnesota Statute. Minnesota Statute 13.355 classifies Social Security Numbers as private data on individuals and your Social Security Number will not be released except as specifically authorized by law.

Upon issuance of a certificate, license, or registration all information provided during the application process will become public information pursuant to Minnesota Statute Chapter 13.41 Subd. 5, with the exception of Social Security Numbers as specified above.

**To avoid delay in processing,** please complete all parts of the application and provide all requested documentation. Applications are not complete and cannot be processed until all information and documentation is provided.

You should receive information regarding the status of your application within 10 business days of the Board receiving the completed application. If you have questions regarding the application process or need assistance, please call the office at 651-201-2820, Monday - Friday 8:00 am to 4:30 pm excluding holidays. If we do not answer, please leave a message and we will return the call.

Effective August 1, 2020, the Barber Board will no longer accept cash payments. All fees must be paid by check or money order made payable to the Minnesota Barber Board.

#### BARBER SCHOOL INFORMATION

Name of Barber School Attended	Start Date:
	End Date:
Address of Barber School	Graduation Date:
City, State and Zip Code	Hours Completed

# LICENSING HISTORY

All applicants for registration in the State of Minnesota must answer the following questions. If you answer yes to any of these questions, you must provide the additional documentation as listed.

Have you ever held a barber certificate/license in another State or Country?	0	Yes
If yes, list the certificate/license type and the State/Country in which you were certified/licensed:	0	No
<ul> <li>2. Has any professional or occupational license, certification, registration, or permit held by you been fined, suspended, revoked, refused or denied in this or any other state, by the federal government, or any other jurisdiction?</li> <li>If yes, you must attach all of the following: <ul> <li>A written statement signed and dated by the applicant identifying the type of license, certificate, registration or permit and an explanation of each incident including the jurisdiction.</li> <li>A copy of the official document which establishes the resolution</li> </ul> </li> </ul>	0	Yes No
or final judgment.  3. Have you been notified by the Commissioner of Revenue, pursuant to Minnesota Statute 270C.72 that you currently owe the State of		
Minnesota any delinquent taxes?	0	Yes
If yes, attach a signed, dated explanation including payment plan or resolution	0	No
RECIPROCITY QUESTIONS  1. State or country of current or most recent barber license:  2. Type of license:		
3. License number:		
4. License issue date:		
5. Expiration date:		
Did you take an examination to obtain your barber license?  □ Yes □ No		
Have you ever held a barber license in any state or country not already listed? $\Box Yes  \Box No$		
If Yes where?		

### **Barber Responsibilities**

#### **Registration and Display of Certificates**

Per MN Statute 154.14: Every licensed barber shall display their license certificate or permit, with a 2 X 2-inch head shoulder photograph of the barber that meets the same standards as required for a United States passport, in a conspicuous place adjacent to or near the chair where work is performed.

#### Renewal

Barber registrations expire each year on December 31st. Failure to renew on or prior to that date will result in additional fees to reinstate the registration.

### **Communicable Disease**

Pursuant to MN Statute 154.161 subd 4(7) practicing as a barber while having an infectious or contagious disease may be grounds to refuse to renew, suspend, temporarily suspend, or revoke the application, certificate of registration, or shop registration card.

#### **Name Change**

If you have a change of name, please notify the board in writing and include a photocopy of the legal document that changed your name (marriage certificate, divorce decree, court order, etc.)

#### **Address Change**

An address change can be completed over the telephone, by fax, in person or by e-mail. It is your responsibility to inform the Board so as to not delay receipt of Board communications.

#### **Barber Laws and Rules**

Copies of the Minnesota Barber Laws and Rules may be purchased from the Minnesota Bookstore located at 660 Olive Street, St. Paul, MN, 651-297-3000 or found at: www.leg.state.mn.us.

# Minnesota Barber Examination may be required.

# CERTIFICATION OF APPLICANT

provided within is true and correct.			
Signature of Applicant		Date	
Subscribed and sworn before me this	day of	, 20	Notary Public
	County:		_
	My Commi	ission Expires:	

I certify that I have read and understand the information provided above and that the information I have