Department of Commerce, Community, and Economic Development Division of Corporations, Business and Professional Licensing

FOR DIVISION USE ONLY

Board of Barbers and Hairdressers

PO Box 110806, Juneau, AK 99811

Website: ProfessionalLicense.Alaska.Gov/BoardOfBarbersHairdressers

Barbar	, Non-Chemical	Barbar	Hairdrossar	Hair Braider	or Esthetician
Dai bei	, Non-Chemical	Dai Dei ,	, nairuresser,	, naii braiuer,	, or estiletician

License Renewal (September 1, 2025 – August 31, 2027)

- Your license lapses after August 31, 2025. There is no grace period it is illegal to work if your license has lapsed.
- Faxed or emailed applications will not be accepted.
- Make checks and money orders payable to the State of Alaska or use the attached credit card payment form.
- Plan on a 4–6-week processing time for correct and complete renewal applications.
- Once the renewal is processed, your license will be available for printing via the MY LICENSE self-service portal.

PART I Payment of Fees					
Renewal Fees:	Biennial License Renewal (For licenses first issued on or before August 31, 2024)	\$180.00			
Renewal Fees:	Prorated License Renewal (For licenses first issued on or after September 1, 2024)	\$ 90.00			
PART II Personal Information					
License Type:	☐ Barber ☐ Hairdresser ☐ Hair Braider ☐ Esthetician ☐ Non-Chemical E	Barber			
Full Legal Name: Name change:	Alaska License Number:				
If you have had a legal name change since your last license was issued, you must complete a <u>Change of Name</u> form.					
Mailing Address: Address change:	P.O. Box or Street City State	Zip			
Contact Phone:	Date of Birth:				
EMAIL AGREEMENT: Providing an email address authorizes the division to send you a web authorization code to register with the MY LICENSE self-service portal. If you have already registered with MY LICENSE, no action is needed. If you did not receive a code or the code you received has expired, contact the division. Once registered you may opt-in to receive all official correspondence electronically. Your account can be accessed at any time.					
Email Address:					
SOCIAL SECURITY NUMBER: AS 08.01.100 requires you to provide your United States Social Security Number. It is considered confidential information and will not be publicly disclosed; it may be used to verify inter-state licensure.					
PART III Alaska Law					
I hereby certify I have reviewed, understand and will abide by the statutes and regulations applicable to my profession (AS 08.13 and 12 AAC 09).					

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Date Signed:

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Signature	Page
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Applicant Signature:

Applicant Name:				
Alaska License Number:				
PART IV Agreeme	ent			
, , , , , , , , , , , , , , , , , , , ,	erson herein named and subscribing to this application. I for full content thereof. I declare all of the information contained he e and correct.	•	•	
falsification or misrepresen	on or misrepresentation of any item or response in this ap cation of documents to support this application, is sufficient gro ration, certificate, or permit to practice in the state of Alaska.	ounds for denyi	•	
I further understand it is a Class A misdemeanor under Alaska Statute 11.56.210 to falsify an application and commit the crime of unsworn falsification.				

General Information

APPLICATION PROCESSING:

The average processing time varies by program. When the application is complete and correct, all supporting documents have been received and all fees have been paid, the license may be issued. Start the process far enough in advance to allow for processing time. Applications are reviewed in order of receipt in our office, and walk-in customers should not expect immediate review.

LICENSE TERM:

Licenses are issued for a two-year period and expire on August 31 of odd-numbered years, regardless of the date of issuance, except licenses issued within 90 days of the expiration date which are issued to the next biennial expiration date. One renewal notice will be sent via email or mail at least 30 days before license expiration to the last known email or mailing address of record. Failure to receive a renewal notice does not relieve a licensee from the responsibility of renewing a license on time.

CHANGES TO LEGAL NAMES, EMAIL ADDRESSES AND/OR MAILING ADDRESSES:

It is the licensee's responsibility to notify the division of any changes to legal names, email addresses and/or mailing addresses. The email or mailing address of record will be used to send all official notifications. The name appearing on the license must be your current legal name. The name change notification form is available on the division's website. Changes to email and/or mailing addresses can be submitted through MY LICENSE. (12 AAC 02.900)

SOCIAL SECURITY NUMBERS:

A U.S. Social Security Number must be on file with the division before a professional license is renewed. If you do not have a U.S. Social Security Number, complete the Request for Exemption from Social Security Number Requirement form (#08-4372) located at *ProfessionalLicense.Alaska.Gov*, and include required supporting documents as noted on the form. (AS 08.01.100)

PUBLIC INFORMATION:

All information on the application will be available as public record, unless required to be kept confidential by state or federal law.

ABANDONED APPLICATIONS:

An application is considered abandoned when 12 months have elapsed since correspondence was last received from or on behalf of the applicant. An abandoned application is denied without prejudice. At the time of abandonment, the division will send notification to the last known email or mailing address of the applicant, who then has 30 days to submit a written request for a refund of biennial license and other fees paid, if applicable. The application fee will not be refunded. If no request for a refund is received within that timeframe, no refund will be issued, and all fees will be forfeited. (12 AAC 02.910)

PAYMENT OF CHILD SUPPORT:

If the Alaska Child Support Enforcement Division has determined that you are in arrears on child support, you may be issued a nonrenewable temporary license valid for 150 days. Contact Child Support Services at (907) 269-6900 to resolve payment issues.

STATUTES AND REGULATIONS:

The complete set of statutes and regulations for this program are available by written request or online at the division's website: *ProfessionalLicense.Alaska.Gov*. Centralized statutes and regulations also apply to all professional licenses; those are also available on the division's website. To receive notifications of proposed regulation changes, send a request with your name, email, and the program you want to be updated on to the regulation specialist at the following email: *RegulationsAndPublicComment@Alaska.Gov*. Courtesy notifications of proposed program regulations changes will also be sent to the email address on record.

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All 3 fields MUST be completed.

This section will be destroyed after the payment is processed.

State of Alaska PO Box 110806, Juneau, AK 99811 Phone: (907) 465-2550

Credit Card Payment Form

2. Expiration Date:

3. Security Code:

All major credit cards are accepted.	For security purposes,	do not email credit	card information.	Include this credit ca	ard payment

form with your application.		
Name of Applicant or Licensee:		
Profession Type (e.g., Acupuncture):	License Number (if applicab	ole):
I wish to make payment by credit ca	rd for the following (check all that apply):	AMOUNT
Application Fee:		
License or Renewal Fee:		
Other (fine, exam, etc.):		
1.		
2.		
	TOTAL:	
Name (as shown on credit card):		
Mailing Address:		
Phone Number:	Email (Optional):	
Signature of Credit Card Holder:		
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CREDIT CARD INFO: You	r payment cannot be processed unless all fiel	ds are completed.
1. Credit Card Number:		