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

Board of Barbers and Hairdressers
PO Box 110806, Juneau, AK 99811
Phone: (907) 465-2550
Email: *BoardOfBarbersHairdressers@Alaska.Gov*
Website: *ProfessionalLicense.Alaska.Gov/BoardOfBarbersHairdressers*

Hairdresser License Application Instructions

AS 08.13.070. License required. A person may not (2) practice barbering, hairdressing, hair braiding, manicuring, esthetics, body piercing, tattooing, or permanent cosmetic coloring except in a shop or school licensed under this chapter unless exempted under AS 08.13.160(d) or permitted under AS 08.13.160(e).

Minimum hour requirements for licensure:
1,650 hours of training in an approved school or 2,000 hours of training in an apprenticeship program approved by the board. Proof of passing a proficiency test administered by a school or instructor if training obtained in an apprenticeship program.

LICENSURE BY EXAMINATION

The written examination is scheduled through Prov. Approved candidates will be notified by this office and Prov that they are ready to schedule their examination. Exam fees will be paid directly to Prov. Candidate bulletin can be found on the board's website at: *ProfessionalLicense.Alaska.Gov/BoardOfBarbersHairdressers.*

NIC website: *https://nictesting.org/*
Prov website: *https://provexam.com/*

An applicant who fails the written examination three times or more will be required to complete additional hours of training. See 12 AAC 09.075(f).

The following must be received by the division 30 days before the examination date:

1. APPLICATION
A completed application, signed and notarized (#08-5011, pages 1-4).

2. FEES
Fees made payable to "State of Alaska."

Nonrefundable Application Fee:	$150.00
License Fee:	$180.00
Total Fees Due:	$330.00

Note: The license fee may be submitted now, or upon passing the examination. The written examination fee should be paid directly to Prov: *https://provexam.com/*.

3. VERIFICATION OF TRAINING
If training was completed in Alaska, you **do not** need to submit the Verification of Training form (#08-5011b).

If training was completed outside of Alaska, you must contact your school or instructor, if apprenticeship, or state board to request official training documentation/transcripts be submitted directly to this office by the issuing authority (School, Instructor, State Board).

TEMPORARY LICENSE BY EXAMINATION

The board may issue a temporary license to practice hairdressing to an applicant who has applied and is qualified to take the examination. The temporary license allows an applicant to practice under the supervision of a person who is currently licensed in the field of practice for which the applicant is applying (if the applicant is scheduled for an examination or is awaiting examination results).

Note: Temporary licenses are valid for 120 days and are nonrenewable. An individual may not receive more than one temporary license for each area of practice.

The following must be received by the division before your application for Temporary License can be reviewed:

1. APPLICATION
A completed application, signed and notarized (#08-5011, pages 1-4).

2. FEES
Fees made payable to "State of Alaska."

Nonrefundable Application Fee:	$150.00
License Fee:	$100.00
Total Fees Due:	$250.00

3. STATEMENT OF RESPONSIBILITY
A Statement of Responsibility form (#08-5011a) completed by the individual for whom you will be working.

LICENSURE BY WAIVER OF EXAMINATION

The following must be received by the division before your application for Licensure by Waiver of Examination can be reviewed:

1. APPLICATION
A completed application, signed and notarized (#08-5011, pages 1-4).

2. FEES
Fees made payable to "State of Alaska."

Nonrefundable Application Fee:	$150.00
License Fee:	$180.00
Total Fees Due:	$330.00

3. VERIFICATION OF TRAINING
A completed Verification of Training, Examination and Licensure form (#08-5011b) sent directly from the state board where you are currently licensed. Your out-of-state license must be current when your Alaska license is issued. A copy of your license is not acceptable.

You must have passed a written and practical/proficiency examination in another state where you have been licensed or are currently licensed. If you did not pass a written and practical/proficiency examination, you will be required to do so in Alaska before receiving your license.

4. VERIFICATION OF WORK EXPERIENCE
An individual who has less than the required 1,650 hours of hairdresser training may submit proof of full-time work experience averaging at least 32 hours per week (using form #08-5011c). Depending upon the number of hours of training an applicant may have, either one year or two years of full-time work experience will be required, in accordance with 12 AAC 09.095(a)(3).

An individual who does not have the required number of hours or sufficient work experience as a hairdresser may obtain the additional hours by attendance at an approved school or an approved apprenticeship program.

TEMPORARY PERMIT BY WAIVER OF EXAMINATION

An applicant holding a current valid license from a board of barbering/hairdressing in another state may be granted a temporary permit.

Note: The permit is valid for a maximum of six months or until the board either issues a permanent license or rejects the application.

The following must be received by the division before your application for Temporary Permit can be reviewed:

1. APPLICATION

A completed application, signed and notarized (#08-5011, pages 1-4).

2. FEES

Fees made payable to "State of Alaska."

Nonrefundable Application Fee:	$150.00
Temporary Permit Fee:	$100.00
Permanent License Fee:	$180.00
Total Fees Due:	$430.00

3. VERIFICATION OF CURRENT LICENSE

A notarized copy of a current license from another state is required. Your out-of-state license must be current when Alaska issues your permanent license. If your license lapses before Alaska issues your permanent license, you will be required to renew your out-of-state license.

BAH Information

If you wish to practice skin care in the State of Alaska, you must be licensed as an esthetician. The Board of Barbers and Hairdressers also issue licenses for the following categories: Instructor, School, Shop Owner, Student Permits (School or Apprentice), Manicuring, Body Piercing, Tattooing, Permanent Cosmetic Coloring, Barbering, Hairdressing, and Hair Braiding.

If you own a Shop or are an Independent Contractor, you must apply for a shop owner license issued by the board. A state business license is also required. Contact the Business License section at (907) 465-2550 or online at *BusinessLicense.Alaska.Gov.*

SPECIAL ACCOMMODATIONS FOR EXAMINATION:
Programs under the jurisdiction of the Division of Corporations, Business and Professional Licensing are administered in accordance with the Americans with Disabilities Act. If you require a special accommodation when taking the licensing examination, you must contact Prov directly at: *https://provexam.com/*.

MANICURIST INFORMATION:
To perform Manicuring, an individual must hold either a manicurist license, a manicurist with advanced endorsement, or hairdresser license.

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.

DENIAL OF APPLICATION:
The denial of an application for licensure may be reported to any person, professional licensing board, federal, state, or local governmental agency, or other entity making a relevant inquiry or as may be required by law.

CHANGES TO LEGAL NAMES, EMAIL ADDRESSES AND/OR MAILING ADDRESSES:
It is the applicant'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)

CERTIFIED TRUE COPIES:
If any of the required documents will be issued under a former name, indicate on the application and submit marriage license and/or court documents that are notarized as a "certified true copy of the original document". To obtain a certified true copy, you must present the notary with the original document along with the photocopy. You must write, "I certify this is a true copy of the original document" and sign your name. The notary will compare the original document with the copy and then notarize your signature.

SOCIAL SECURITY NUMBERS:
A U.S. Social Security Number must be on file with the division before a professional license is issued. If you do not have a U.S. Social Security Number, complete the Request for Exemption from Social Security Number Requirement form located at *ProfessionalLicense.Alaska.Gov*, and include required supporting documents as noted on the form. (AS 08.01.060)

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)

STALE DOCUMENTS:
Application forms, authorizations and verifications older than 12 months from the date the document was received by the division will be considered stale; the document must be resubmitted as appropriate before the application will be considered by the division or a licensing board. Application documents include the application documents and verifications of licensure from other licensing jurisdictions. (12 AAC 02.915)

BUSINESS LICENSES:
The status of a professional license will directly impact the status of an associated business license. Renewal applications for business licenses are mailed separately. A professional license does not bypass the need for a business license; if a business license is required, it must be obtained after an initial professional license is issued. For more information about business licenses, visit *BusinessLicense.Alaska.Gov.*

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.

Definitions: AS 08.13.220

I. **"Barbering"** means shaving, trimming, or cutting, styling, curling, permanent waving, bleaching, coloring, cleansing, or chemically straightening the beard or hair of a living person for a fee and for cosmetic purposes;

II. **"Non-chemical barbering"** means shaving, trimming, cutting, styling, or curling the beard or hair of a living person for a fee and for cosmetic purposes;

III. **"Hairdressing"** means performing, for a fee, the following services for cosmetic purposes: (a) trimming or cutting the beard of a living person; and (b) arranging, styling, dressing, curling, temporary waving, permanent waving, cutting, singeing, bleaching, coloring, cleansing, conditioning, or similar work on the hair of a living person;

IV. **"Hair braiding"** means braiding natural hair, natural fibers, synthetic fibers, and hair extensions, trimming hair extensions for braiding purposes, and attaching natural and synthetic hair by braiding for cosmetic purposes and for a fee; "hair braiding" does not include styling wigs or making wigs;

V. **"Esthetics"** means the use of the hands, appliances, cosmetic preparations, antiseptics, or lotions in massaging, cleansing, stimulating, or similar work on the scalp, face or neck, including skin care, make-up, and temporary removal of superfluous hair, for cosmetic purposes for a fee;

VI. **"Manicuring"** means, for a fee, to cut, trim, polish, color, tint, or cleanse a natural or artificial nail; affix material by artificial means to a natural nail for the addition to or extension of the natural nail; cleanse, treat, or beautify the hands or feet for cosmetic purposes; or otherwise treat the nails of the hand or foot;

VII. **“Limited esthetics”** means to perform for a fee for cosmetic purposes; temporary removal of superfluous hair on the face or neck, including eyebrow arching by use of wax; or application of makeup or false eyelashes;*

VIII. **"Tattooing"** means the process by which the skin is marked or colored to form indelible marks, figures, or decorative designs for nonmedical purposes by inserting or ingraining an indelible pigment into or onto the skin, microblading, or microneedling;

IX. **"Permanent cosmetic coloring"** means tattooing for the purpose of simulating hair or makeup, such as permanent eyeliner, lip color, eyebrows, and eyeshadow;

X. **"Body piercing"** means puncturing the body of a person by aid of needles or other instruments designed to be used to puncture the body for the purpose of inserting jewelry or other objects in or through the human body, except that, for purposes of this chapter, "body piercing" does not include puncturing the external part of the human ear.

**A person licensed as a hairdresser may practice manicuring and limited esthetics under the hairdresser license.*

THE STATE of ALASKA

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

BAH

FOR DIVISION USE ONLY

Board of Barbers and Hairdressers
PO Box 110806, Juneau, AK 99811
Website*: ProfessionalLicense.Alaska.Gov/BoardOfBarbersHairdressers*

Hairdresser License Application

PART I Application Type

Applying By:	☐ Examination ☐ Waiver of Examination

PART II Written Exam Language

Language:	☐ English ☐ Korean ☐ Spanish ☐ Vietnamese

PART III Payment of Fees

Required Fees: (Examination)	☐ Nonrefundable Application Fee	**$150.00**
	☐ License Fee	**$180.00***
	☐ Temporary License Fee (*If applicable*)	**$100.00****
Required Fees: (Waiver of Examination)	☐ Nonrefundable Application Fee	**$150.00**
	☐ License Fee	**$180.00*****
	- OR -	
	☐ License and Temporary Permit Fee (*If applicable*)	**$280.00**

**If applying by examination,* the license fee may be submitted after being notified of passing the exam.
***If applying by examination & for a temporary license,* the temporary license fee may be submitted after applying.
****If applying for a permanent license by waiver of examination*, the license fee may be submitted after the division receives verification you have passed a written and practical/proficiency examination in another state where you have been licensed or are currently licensed AND verification of required work hours.

PART IV Personal Information

Full Legal Name:			
Provide all other names used (maiden, nicknames, aliases). If any documentation will be received in a prior name, you must provide a certified true copy of the documentation showing proof of legal name change(s). ☐ Not Applicable ☐ Other Names Used: _____			
Mailing Address:	P.O. Box or Street City State Zip		
Contact Phone:		**Date of Birth:**	

PART IV Personal Information *(continued)*

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 do 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 08.01.060 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 V Hairdressing School(s)

Name of School	Address	Dates Attended	Total Hours

PART VI Apprenticeship(s)

Name of Instructor	Name of Shop	Dates Attended	Total Hours

PART VII Work Experience

Name of Shop	Address	Employment Start Date	Employment End Date

PART VIII Professional License(s)

List all states in which you currently hold, or have ever held, a license. *Submit additional pages if needed.*

State or Jurisdiction	License Number	License Category	Issue Date	Expiration Date

PART IX 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).

THE STATE of ALASKA

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

BAH

FOR DIVISION USE ONLY

Board of Barbers and Hairdressers
PO Box 110806, Juneau, AK 99811
Website*: ProfessionalLicense.Alaska.Gov/BoardOfBarbersHairdressers*

Notary Signature Page

Applicant Name:		
Alaska License Number (if known):		☐ *Application in Process*

PART X Notarized Signature

I hereby certify I am the person herein named and subscribing to this application. I further certify I have read the complete application, and I know the full content thereof. I declare all of the information contained herein, and evidence or other documents submitted herewith are true and correct.

I understand any falsification or misrepresentation of any item or response in this application, or any attachment hereto, or falsification or misrepresentation of documents to support this application, is sufficient grounds for denying, revoking, or otherwise disciplining a license, registration, certificate, or permit to practice in the state of Alaska.

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.

A person who makes a false statement on this application may be subject to civil and criminal penalties, including prosecution for perjury (AS 11.56.200 & AS 11.56.230).

Notary Stamp	**Applicant Printed Name:**			
	Applicant Signature:			
	Notary Public for State of:		**Subscribed and Sworn to Before me on this Day:**	
	Notary Signature:		**My Commission Expires:**	

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

Board of Barbers and Hairdressers
PO Box 110806, Juneau, AK 99811
Phone: (907) 465-2550
Email: *BoardOfBarbersHairdressers@Alaska.Gov*
Website: *ProfessionalLicense.Alaska.Gov/BoardOfBarbersHairdressers*

Statement of Responsibility

(To be used ONLY if applying for a temporary license while awaiting examination)

→ Applicant: Complete the identifying information below and forward a copy of this form to the individual for whom you will be working.

Applicant Name:	
Area of Practice:	

→ Supervisor: Complete this bottom part for the applicant identified above and return the form directly to the Alaska Board of Barbers and Hairdressers at the letterhead address.

☐ I certify I am currently licensed as a Hairdresser in Alaska.

Supervisor Name:			
AK License Number:			
Name of Shop:			
Shop License Number:	*This is NOT your business license number.*	**Phone Number:**	
Shop Mailing Address:	P.O. Box or Street / City / State / Zip		

Signature

I assume full responsibility for supervising the above-named examination applicant in the stated area of practice. The supervision will be conducted at the shop named above and will be held in compliance with the statutes and regulations set forth by the Board of Barbers and Hairdressers.

I understand the above-named examination applicant must work under my direct supervision and within my physical presence. I further understand the temporary license is valid for 120 days from the date of issue and is nonrenewable. If the applicant fails the examination and is not eligible to receive licensure within 120 days of the temporary license period, the applicant must cease practicing by the expiration date of the temporary license.

Supervisor Printed Name:			
Supervisor Signature:		**Date Signed:**	

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

Board of Barbers and Hairdressers
PO Box 110806, Juneau, AK 99811
Phone: (907) 465-2550
Email: *BoardOfBarbersHairdressers@Alaska.Gov*
Website: *ProfessionalLicense.Alaska.Gov/BoardOfBarbersHairdressers*

Verification of Training, Examination and Licensure

→ Applicant: Complete the identifying information below and forward a copy of this form to the state board in which you hold a current license. Some states require a fee for completion of license verification; you may wish to check with the state board prior to submitting this form for completion. If the state where you are currently licensed is not the state in which you received your training and/or examination, send a copy of this form to the state where you received your training and/or examination as well as the state where you are currently licensed.

Applicant Name:			
License Number:		**Date of Birth:**	

→ Licensing Agency or State Board: Complete this bottom part for the applicant identified above and return the form directly to the Alaska Board of Barbers and Hairdressers at the letterhead address.

Licensee Name:				**State or Jurisdiction:**	
Type of License Granted:				**Total Hours:**	
License Number:		**Issue Date:**		**Expiration Date:**	
Licensed By:	☐ Reciprocity/Endorsement ☐ Examination			**Date of Exam:**	
Written Exam Administered:	☐ Yes ☐ No	**Practical or Proficiency Exam Administered:**		☐ Yes ☐ No	
Name of Exam(s):				**Exam Score:**	
School Attended:					
Dates Attended:				**Hours:**	
Has there been any final disciplinary action taken against this licensee? (If yes, provide a copy of the disciplinary action document)				☐ Yes ☐ No	
List Derogatory Information, If Any:					
Board Seal	**Board Agency Name:**				
	Printed Name:			**Title:**	
	Signature:			**Date Signed:**	

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

Board of Barbers and Hairdressers
PO Box 110806, Juneau, AK 99811
Phone: (907) 465-2550
Email: *BoardOfBarbersHairdressers@Alaska.Gov*
Website: *ProfessionalLicense.Alaska.Gov/BoardOfBarbersHairdressers*

Verification of Work Experience

→ Applicant: Complete the identifying information below and forward a copy of this form to your present or former employer if you need to receive credit for work experience when applying for licensure as a hairdresser by waiver of examination in accordance with 12 AAC 09.095(a)(3).

If you were self-employed, an individual who has direct personal knowledge of your work experience hours while you were self-employed may sign this form certifying your work experience.

Applicant Name:			
Applicant Signature:		**Date Signed:**	

→ Employer: Complete this bottom part for the applicant identified above and return the form directly to the Alaska Board of Barbers and Hairdressers at the letterhead address.

Name of Shop Where Applicant Was Employed:					
Phone Number:					
Mailing Address:	P.O. Box or Street	City	State	Zip	
Dates of Employment:					
Average Number of Hours Worked Per Week:					
How are you associated with the applicant?					
By my signature below, I certify the above information is true and correct to the best of my knowledge.					
Notary Stamp	**Verifier Printed Name:**		**Title:**		
	Verifier Signature:		**Date Signed:**		
	Notary Public for State of:		**Subscribed and Sworn to Before me on this Day:**		
	Notary Signature:		**My Commission Expires:**		

THE STATE of ALASKA

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

FOR DIVISION USE ONLY

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

Credit Card Payment Form

All major credit cards are accepted. For security purposes, do not email credit card information. Include this credit card payment form with your application.

Name of Applicant or Licensee:			
Profession Type *(e.g., Acupuncture)*:		**License Number *(if applicable)*:**	
I wish to make payment by credit card for the following *(check all that apply):*			**AMOUNT**
☐ **Application Fee:**			
☐ **License or Renewal Fee:**			
☐ **Other *(fine, exam, etc.)*:**			
1.			
2.			
		TOTAL:	0

Name *(as shown on credit card)*:			
Mailing Address:			
Phone Number:		**Email *(Optional)*:**	
Signature of Credit Card Holder:	X		

CREDIT CARD INFO: Your payment cannot be processed unless all fields are completed.

1. Credit Card Number:		**All 3 fields MUST be completed.**
2. Expiration Date:		**This section will be destroyed after the payment is processed.**
3. Security Code:		