



THE STATE of ALASKA

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

BAH

FOR DIVISION USE ONLY

Barbers and Hairdressers Program

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NON-CHEMICAL BARBER STUDENT NOTICE OF TERMINATION OF TRAINING

(This form is to be used when a student has not completed their training)

12 AAC 09.130(e) requires that within 20 working days after termination of instruction of a student a school owner must notify the department, on a form provided by the department, of the termination. The termination report must include the date of the student's enrollment, the date of termination, the total number and types of operations performed by the student, and the total number of hours and types of training received by the student. The termination report is subject to audit and may be utilized to establish credit hours for transfer and reenrollment under 12 AAC 09.135.

Name of Student/Apprentice Student's Permit Number

Address of Student/Apprentice

Name of School or Shop Where Training Received

Date Enrolled: Date Terminated:

I hereby certify that the above-named student obtained the following Practical Operations in accordance with 12 AAC 09.161. The total number of operations performed is indicated below:

Table with 2 columns: Subject, Number of Practical Operations Performed. Rows include Wet hair styling and drying, and Thermal hair styling and drying.

Haircutting, including hair analysis and the use of the razors, scissors, electric clippers, and thinning shears, for wet and dry cutting..... _____

Scalp and hair treatments, including hair and scalp analysis, brushing, electric and manual scalp manipulation and other hair treatments _____

Subject **Number of Practical Operations Performed**

Beard trimming..... _____

Beard shaving _____

Theory Hours..... _____ hours

State Law (Statutes and Regulations) _____ hours

I further certify that the above-named student/apprentice received the following hours of training in accordance with 12 AAC 09.161:

Total Hours of Training Received: _____

I understand that this termination report is subject to audit and may be utilized to establish credit hours for transfer and reenrollment under 12 AAC 09.135.

Signature of Instructor or School Owner

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 20_____.

Notary Public

SEAL

My Commission Expires: _____