



# APPLICATION FOR BEAUTY CULTURE SCHOOL LICENSE

State Form 45654 (R8 / 11-17)

Approved by State Board of Accounts, 2017

**STATE BOARD OF COSMETOLOGY AND BARBER EXAMINERS**  
**PROFESSIONAL LICENSING AGENCY**  
 402 West Washington Street, Room W072  
 Indianapolis, Indiana 46204  
 Telephone: (317) 234-3031  
 E-mail: pla12@pla.IN.gov  
 www.pla.IN.gov

- INSTRUCTIONS:**
- The fee for this application is \$400.00, payable to the Indiana Professional Licensing Agency, in accordance with 820 IAC 7-1-1.
  - Completed application and fees should be mailed to the address listed in the upper right hand corner of this form.
  - All fees are non-refundable and non-transferable.
  - Please refer to the instructions on our website, [www.pla.in.gov](http://www.pla.in.gov), for the licensing requirements.
  - Pursuant to 820 IAC 2-1-4, this application shall be accompanied by the following documents:
    - The contract which is to be used between the beauty culture school and its students which must include the school's refund policy;
    - A copy of the beauty culture school's deed for the property where the cosmetology school is located or a lease for at least one (1) year showing that the premises are to be used as a cosmetology school;
    - A budget for the first year of operation of the cosmetology school;
    - A financial statement on a form provided by the board (see pages 2 and 3 of this form);
    - A floor plan of the beauty culture school of which shall show, in detail, the following:
      - the placement of students,
      - classroom entrances and exits,
      - space for waiting customers (indicating number of chairs),
      - separate student and public cloakroom spaces, and
      - two separate restrooms; and
    - A list of licensed instructors who will be teaching in the beauty culture school (including license numbers).
    - Fire Marshal Report

\* This agency is requesting disclosure of your Social Security Number in accordance with IC 4-1-8-1; disclosure is mandatory and this record cannot be processed without it.

### FOR OFFICE USE ONLY

Application fee	Date fee paid (month, day, year)	Receipt number
License number issued	Date license issued (month, day, year)	License obtained by

### DO NOT WRITE ABOVE THIS LINE

Course(s) you will be offering:     Cosmetology     Barbering     Manicuring     Esthetics     Electrology     Instructing

I. Name of school

---

II. Address of school (number and street, city, state, and ZIP code)

---

III. School telephone number (      )	IV. Federal Identification number	E-mail address
--	-----------------------------------	----------------

V. Name(s) and address(es) of cosmetology school owner(s):

Name of owner	Social Security number *
Address (number and street, city, state, and ZIP code)	E-mail address

Pursuant to IC 12-32-1-5 and IC 12-32-1-6, I swear under the penalty of perjury that: (Please select one of the following.)  
 I am a United States Citizen.       I am a qualified alien (as defined under 8 U.S.C. § 1641).

Name of owner	Social Security number *
Address (number and street, city, state, and ZIP code)	E-mail address

Pursuant to IC 12-32-1-5 and IC 12-32-1-6, I swear under the penalty of perjury that: (Please select one of the following.)  
 I am a United States Citizen.       I am a qualified alien (as defined under 8 U.S.C. § 1641).

Name of owner	Social Security number *
Address (number and street, city, state, and ZIP code)	E-mail address

Pursuant to IC 12-32-1-5 and IC 12-32-1-6, I swear under the penalty of perjury that: (Please select one of the following.)  
 I am a United States Citizen.       I am a qualified alien (as defined under 8 U.S.C. § 1641).

VI. Name(s) and address(es) of corporate officers of corporation (if applicable)

Name of corporate officer
Address (number and street, city, state, and ZIP code)
Name of corporate officer
Address (number and street, city, state, and ZIP code)
Name of corporate officer
Address (number and street, city, state, and ZIP code)

VII. Name(s) and address(es) of partners of partnership (if applicable)		
Name of partner		
Address (number and street, city, state, and ZIP code)		
Name of partner		
Address (number and street, city, state, and ZIP code)		
VIII. The school will be operated under the personal supervision of the licensed beauty culture instructor listed below:		
Name of instructor	License number	
Address (number and street, city, state, and ZIP code)		
IX. Affirmation		
<p>A. I, or owner(s), or officer(s), or partner(s), <input type="checkbox"/> have <input type="checkbox"/> have not committed an act that would be grounds for refusal to issue license under IC 25-8-14-1, (if an act or acts have been committed, please attach supporting documentation concerning same);</p> <p>B. I am the owner / officer / partner of the aforementioned school; and</p> <p>C. I have personally prepared the foregoing application and that the same is true to the best of my knowledge and belief.</p> <p>D. I understand that providing fraudulent information may be grounds for refusal to issue the license for which I am applying or for disciplinary action against the license which may be issued.</p>		
Signature of applicant	Printed name of applicant	Date signed (month, day, year)
<b>FINANCIAL STATEMENT IN SUPPORT OF APPLICATION FOR BEAUTY CULTURE SCHOOL LICENSE [Pursuant to 820 IAC 2-1-4(a)(5)]</b> <b>THIS FINANCIAL STATEMENT MUST BE COMPLETED BY A CERTIFIED PUBLIC ACCOUNTANT.</b>		
Name of school owner / officer / partner	Name of school	
School address (number and street, city, state, and ZIP code)		
<b>ASSETS, LIABILITIES AND EQUITIES OF BEAUTY CULTURE SCHOOL (See Financial Statement Explanation with corresponding number for each line number below.)</b>		
<b>A. ASSETS / LIABILITIES</b>		
<b>ASSETS</b>		
1. Cash in banks		\$
2. Negotiable investments		\$
3. Prepaid investments		\$
4. Merchandise		\$
5a. Accounts receivable (students)		\$
5b. Accounts receivable (other)		\$
6. Total current assets		\$
7. Equipment (cost)	\$	
Less depreciation	\$	
8. Land		\$
9. Building		\$
10. Other assets (ALL)		\$
11. TOTAL ASSETS	\$	
<b>LIABILITIES</b>		
12. Accounts payable		\$
13. Notes payable (one year)		\$
14. Other payables		\$
15. Unearned tuition		\$
16. Total current liabilities		\$
17. Long term debts		\$
18. Other liabilities		\$
19. Total liabilities		\$
20. Owner(s) capital		\$
21. Capital stock		\$
22. Paid-in surplus		\$
23. Retained earnings		\$
24. TOTAL LIABILITIES AND EQUITY	\$	
B. In the event any one of the two following exist from "A", a personal financial statement and guarantee could help the school meet the financial responsibility tests if its own financial statement does not meet them: 1. Line 16 is greater than line 6. 2. Line 19 is greater than Line 11.		

C. Detailed description of method used in earning tuition income:

-----

-----

-----

-----

D. I verify that the foregoing is true and correct to the best of my knowledge, information, and belief.

Signature of preparer	Printed name of preparer	Date signed ( <i>month, day, year</i> )
-----------------------	--------------------------	---

**FINANCIAL STATEMENT EXPLANATION**

**ASSETS:**

1. Cash in banks: firm corporation/partnership must show cash in all accounts (including savings accounts).
2. Negotiable investments: include any investments that could be converted to cash immediately or within one (1) year. If investments are stocks and/or bonds, attach schedule showing name of stocks and/or bonds and market value.
3. Prepaid expenses: include any monies paid for future expenses. Examples: insurance premiums, deposits, and service contracts paid for the following year.
4. Merchandise: include cost of merchandise on hand to be used for demonstration and instruction that could be sold.
- 5a. Accounts receivable: list all monies owed to the school by enrolled students by contingent contracts.
- 5b. Total of all other accounts receivable other than student contracts.
6. Total current assets: total of amounts shown under items (1) through (6).
7. Equipment: include fixed assets required to operate the school (examples include desks, tables, chairs, lighting, equipment, etc.) less depreciation.
8. Land: include land owned by the school.
9. Building: include building owned by the school less depreciation.
10. Other assets: include other assets owned by the school less depreciation.
11. Total assets: total of amounts shown under items (6) through (10).

**LIABILITIES:**

12. Accounts payable: list all monies the school owes to creditors payable within one (1) year. Examples: utility bills, rent, merchandise purchased on open accounts, service contracts, payroll, and sales taxes.
13. Notes payable: include all note payments due and payable within one (1) year.
14. Other payables: itemize any other amounts owned and payable within one (1) year.
15. Unearned tuition: represents tuition paid in advance by students and/or amounts shown as accounts receivable tuition. Complete section describing the method used to record earned tuition income.
16. Total current liabilities: total of amounts shown under items (12) through (15).
17. Long term debt: include all obligations owed by the school payable in more than one (1) year. Examples: long term loans, equipment leases, auto loans, owner(s) or officer(s) or partner(s) loans.
18. Other liabilities: include all other amounts owed by the school.
19. Total liabilities: total of amounts shown under terms (16) through (18).