



**Kansas Board of Cosmetology**  
714 SW Jackson Suite 100 Topeka, KS 66603  
Telephone: (785) 296-3155 Fax: (785) 296-3002  
Email: [Kboc@ks.gov](mailto:Kboc@ks.gov) Website: [www.kansas.gov/kboc](http://www.kansas.gov/kboc)

## INSTRUCTOR LICENSE APPLICATION

Please check one:

COSMETOLOGY INSTRUCTOR \_\_\_\_\_ ESTHETICS INSTRUCTOR \_\_\_\_\_ MANICURING INSTRUCTOR \_\_\_\_\_ ELECTROLOGY INSTRUCTOR \_\_\_\_\_

**Instructor Application Fee \$75.00**

*Check, money order or credit card information accepted payable to the Kansas Board of Cosmetology.*

1. Name: \_\_\_\_\_  
(Last) (First) (Middle)

2. Address: \_\_\_\_\_  
(City) (St) (Zip)

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

3. Date of Birth: \_\_\_\_\_ \*SS# \*\*\*-\*\*-\_\_\_\_\_  
\* Disclosure is mandatory for licensure and authorized by K.S.A. 74-148 and K.S.A. 74-139. It is used to verify identity and license individuals lawfully residing in the U.S. Upon request of the director of taxation, each such authority shall provide to the director of taxation a listing of all such applicants, along with such applicant's social security number and address.

4. I attended \_\_\_\_\_  
(Name of School)  
Address \_\_\_\_\_

for Instructor training from the \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_ to the \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_

and was issued a certificate of graduation on \_\_\_\_\_ 20 \_\_\_\_ upon completion of a course of \_\_\_\_\_ hours.

I declare under penalty of perjury under the laws of the State of Kansas that the information provided is true and correct:

\_\_\_\_\_  
(Printed name of school owner of instructor) (Email)

\_\_\_\_\_  
(Signature of school owner or instructor) (Date)

\_\_\_\_\_  
(Applicant Signature Required) (Date)

**Credit Card Payment \$75**  
1). Go to the Board website: [www.kansas.gov/kboc](http://www.kansas.gov/kboc)  
2). Select Payment Portal from the Top Menu Bar  
3). Transaction Item = Instructor Initial License Fee  
4). Record your Order ID # from your emailed receipt below  
Order ID # \_\_\_\_\_

**Check or Money Order Payment \$75**  
1). Complete this form  
2). Make Check or Money Order Payable to the Kansas Board of Cosmetology  
3). Mail form and payment to the Board office at the address provided above.