

## South Carolina Department of Labor, Licensing and Regulation

# **South Carolina Board of Cosmetology**

110 Centerview Dr. • Columbia • SC • 29210 P.O. Box 11329 • Columbia • SC 29211-1329 Phone: 803-896-4588 • BoardInfo@llr.sc.gov • Fax: 803-896-4484 llr.sc.gov/cosmo

#### 2025-2027 RENEWAL APPLICATION

### **Renewal Instructions/Requirements:**

• Check or money order only (no cash) in the amount of the biennial renewal fee made payable to LLR-Board of Cosmetology. (All fees are non-refundable. A returned check fee of up to \$30, or an amount specified by law, may be assessed on all returned funds.)

law, may be assessed on all returned lunds.)							
• License Renewal Fees (select each license	being renewed below	w):					
Active Status:	8	,					
☐ Cosmetologist (RC) \$52 ☐ Instructor, Registe	osmetologist (RC) \$52						
-				☐ Instructor, Nail Technician (INT) \$82			
Inactive Status:	( ), + -		,		, , , ,		
☐ Cosmetologist Inactive (RC INA) \$52	☐ Instructor, Register	red Cosmetolo	gist Inactive (IRC	INA) \$82			
☐ Esthetician Inactive (ES INA) \$52	_	☐ Instructor, Esthetician Inactive (IES INA) \$82					
☐ Nail Technician Inactive (NT INA) \$52	☐ Instructor, Nail Technician Inactive (INT INA) \$82						
After March 10th your license is lapsed as			(11 (1 11 (1 1) \$\pi \pi \pi				
If you have had a legal name change since y legal documentation with this renewal form	our initial licensure o	or since your					
LICENSEE INFORMATION							
Name:	Name: License No.:						
Since you were licensed, have you legally change							
If yes, please submit legal documentation support	•						
F 1.	I4 E' D'	. ' C.C '.	1 G N				
Email:	Last Five Di	gits of Socia	1 Security No.: 2	XXX-X -			
Home Address:	City:	<u> </u>	State:	Zip:			
Mailing Address:(If different than above	City:		State:	Zip:			
(If different than above	e)						
Home Phone:	Cell Phone:						
INACTIVE STATUS							
Do you wish to place your license(s) inactive?			ſ	□ Yes	□No		
	a but way mayat may tl	h a mamayyyal fo	aa ta mamain				
(If Yes, CE classes are not needed at this time							
inactive through March 10, 2027. You will not receive a license and <b>cannot</b> practice or render cosmetology/cosmetology-related services while the license is inactive. You are							
required to pay the renewal fee in order to ma							
		S	, ,				
CONTINUING EDUCATION (CE)							
Cosmetologists, Nail Technicians and Esthetician							
instruction during the preceding licensing period.	Instructors must sno	w satisfactor	y evidence of fo	our (4) cc	ontact		
hours geared toward teaching.							
1. <b>Initial Licensees</b> , those licensed between <b>Oc</b>		•					
not required to complete continuing education during the first licensing period. During the							
second licensing period and thereafter, the co	_	_					
Were you initially licensed by the Board bety	veen the period of <b>Oc</b>	ctoper 1, 202		□ <b>V</b>	□ N₁-		
<b>September 30, 2024?</b>			Į.	□ Yes	□ No		

2.	Have you completed the required number of continuing education hours prior to renewing your license?	□ Yes	□ No
	RSONAL HISTORY QUESTIONS swer the following questions. A detailed letter of explanation is required for "Yes" answers.		
1.	Since your initial application or since your last renewal of your license with the Board, have you been convicted, pled guilty, or pled nolo contendere (no contest) to a felony or to a non-felony crime?	□Yes	□ No
	If yes, you must include a full written explanation, criminal background report and court documents with your renewal application.		
2.	Since your initial application or since your last renewal of your license with the Board, have you had any written complaint, formal accusation, final order, disciplinary action or consent order filed against you by any person, jurisdiction or licensing board?	□Yes	□ No
3.	Since your initial application or since your last renewal of your license with the Board, has there been any change in the status of your lawful presence in the United States?	□ Yes	□ No
	If yes, attach an updated Verification of Lawful Presence form, found here.		
I E	TESTATION EREBY swear/affirm I have read all questions on this renewal application and have an urately and completely. I hereby acknowledge that failure to answer these questions truthful appletely shall constitute cause for the initiation of disciplinary action against my South Caroli	ly, accura	itely and
Sig	nature: Date:		

#### PRIVACY NOTICE

South Carolina law requires the agency to collect personal information which is only disseminated as required by law. The South Carolina Freedom of Information Act ensures that the public has a right to access appropriate records and information possessed by a government agency. Therefore, some personal information on your renewal application and other documents on file may be subject to public scrutiny or release. The Department collects and disseminates personal information in compliance with The South Carolina Freedom of Information Act, the South Carolina Family Privacy Protection Act and other applicable privacy laws and regulations. Additionally, the Department shares certain information on the application with other governmental agencies for various governmental purposes, including research and statistical purposes.