

Application for Admission

We strive to provide the highest quality educational opportunity for our students in a diverse learning environment. First Class Cosmetology School's Admissions Office seeks to enroll students whose preparation, both personal and professional, will attribute to the student's success in addition to our campus environment.

First Name: _____ Middle Initial: ____ Last: _____

Permanent Address: _____ City: _____ State: _____ Zip: _____

Date of Birth: _____ Phone: _____ Email: _____

Program Choice: Cosmetology Esthetics Manicuring 1000hr-Barbering 1500hr-Barbering
 Massage Therapy Requested start date: _____

Emergency Contact Name: _____ Emergency Contact's Phone: _____

Relationship to you: _____ Number of Enrollee's Dependents in Home, if any _____

Do you have reliable transportation to and from school? _____ Current Employer: _____

Do you plan to remain employed while in school? _____ Will work interfere with school hours? _____

EDUCATION

High School Attended: _____ Graduation Date: _____ GPA: _____

Certificate Received: Diploma ____ GED ____ Previous College/ University: _____

Dates Attended: _____ Area of Study: _____ Degree Earned: _____

Have you ever received Federal Financial Aid? _____

Have you been suspended or dismissed from any Cosmetology school or college for academic, attendance, or disciplinary reasons?
 Please explain: _____

Please check any of the following below that apply:

- Military Veteran
- A Citizen of the United States
- Lawful Permanent Resident Alien Registration Number _____
- Handicapped/ Special Needs
- IEP (Individualized Education Program)
- 504 Plan
- Felony Conviction
- Convicted of Possessing or Distributing Illegal Substances while receiving Federal Financial Aid
- Incarcerated in the last 5 years
- Registered Sex Offender
- Expelled from School/ University
- Homeless or at risk of homelessness
- Probation/ Parole

TELL US ABOUT YOURSELF

Tell us about any experiences, interests, personal skills, and/ or talents you will bring specifically to our campus that will enrich our student body.

Describe a situation where you were faced with significant adversity. How did you respond? What did you learn from this experience:

Why have you chosen Cosmetology/ Nail Technician/ Esthetics/Barbering/Massage Therapy?

Special circumstances or personal challenges that have had an impact on your previous academics to take into consideration as we evaluate your admission application.

What makes you a reliable student? Please explain:

School is a HUGE COMMITMENT. It takes approximately one year of full time studies to complete the Cosmetology Program. A good support system is essential. Please describe your support system:

Describe yourself in one word: _____

Please tell us why you are a good fit for First Class Cosmetology School:

ADMISSION POLICY

All prospective students must complete and return an Enrollment Application. All applications will be reviewed and approved by both the Campus and Admissions Directors. Incomplete applications will not be considered for review. Applications received from an applicant with a felony conviction will be further reviewed by Administration. Applying does not guarantee admission into the program.

FCCS reserves the right to approve or deny admission based on the information gathered from the admissions process. I certify that the above information is true and complete to the best of my knowledge. I understand that any information that is withheld or is inaccurate may affect my enrollment or financial aid status. I also understand that if I have applied for financial assistance, information concerning the amount of aid I may be offered may be released to other agencies that may also be considering me for assistance. I have received First Class Cosmetology School's Tuition Chart with program cost information. I understand if I choose not to attend; the Application and Registration fee are not refundable.

Print Name: _____

Signature: _____ Date: _____

Please indicate Payment Option (mark all that apply): Federal Pell Grant Federal Student loans
 Parent plus loans Payment in full Payment plan with school OTHER: _____

If submitting electronically, you are able to pay the application/registration FEE via CashApp or Venmo. Please forward completed application to angiem@fccsmail.com. Text 608-322-9926 if you have any questions.