

--	--	--	--	--	--	--	--	--	--

EXAM DATE _____



OKLAHOMA STATE BOARD OF COSMETOLOGY AND BARBERING
ADVISORY BOARD ON MASSAGE THERAPY
2401 NW 23rd Street, Suite 74, Oklahoma City, OK 73107-2453
Reciprocity Department 405.521.2441 • Oklahoma.gov/cosmo

J. KEVIN STITT
Governor

Leah Longest
Board Chair

THREADING TECHNICIAN APPLICATION

INSTRUCTIONS:

Submit \$55 exam fee (\$50 for exam, \$5 for State Rules and Regulations Book), payable by money order or cashier's check made payable to OSBCB. PERSONAL CHECKS ARE NOT ACCEPTED.

Name _____ Email _____

FOR EXAM PACKET AND WORK PERMIT. WILL NOT BE SHARED.

Home Address _____ Apt _____ City _____ State _____ ZIP _____

RESIDENCE ADDRESS REQUIRED BY LAW (§59-199.3-B-3). PO BOX IS ACCEPTABLE

Phone Number _____ Alternate Mail Address _____

Social Security Number _____ Date of Birth: Month _____ Day: _____ Year: _____



Date of Photo:

____ / ____ / ____

I solemnly swear that the foregoing statements are true and correct.

X _____
Signature of Applicant

Subscribed and sworn before me this _____ day of _____, 20 _____.

State of _____ County of _____

Commission # _____

My commission expires _____ Notary Public _____

