STATE BOARD OF BARBER EXAMINERS

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QUARTERLY HOUR REPORTS FOR STUDENTS

INSTRUCTIONS

- 1. All information must be typed or clearly handwritten.
- 2. All barber schools and shops that train student barbers are required to submit a quarterly hour report to the State Board of Barber Examiners by January 15, April 15, July 15 and October 15.
- 3. Each report must contain an alphabetical listing of all students who earned hours in that curriculum during the quarter. Computer print-outs are acceptable provided all student information as shown on the report is included, and provided the print-outs are on 8½" by 11" paper.
- If submitting computer print-outs, one Board report form must be included to be used as a cover sheet, properly signed and notarized.

School or Shop Name:		School or S	School or Shop License #				
School or Shop Address:							
QUARTER (check applicable block)							
Jan.,Feb.,Mar. YEAR:	Apr.,May,June YEAR:	July,Aug.,Sept. YEAR:	Oct.,Nov.,Dec. YEAR:				

TEACHER OR MANAGER BARBER NAMES AND LICENSE NUMBERS: Note: If you are including more than one Board report form or computer print outs, please provide each teacher's name and license number only once. Do not repeat names and license numbers on subsequent documents.

TEACHER or MANAGER BARBER NAMES	LICENSE NUMBERS	TEACHER OR MANAGER BARBER NAMES	LICENSE NUMBERS

Student Name	Social Security Number	Initial Date of Enrollment	Cosmetology crossover hours (if applicable)	Total Previous Hours	Hours Earned this Quarter	Total Hours Earned To- Date
Affidavit State of)				
County of)				
Before me the subscriber duly sworn according to the Department of State awith public records or in and correct to the best of statement made is subject suspension or revocation. Sworn to and subscriber duly subscriber according to the subscriber are subscriber as a subscriber according to the subscriber acc	law, does depose and and has not been alter formation pursuant to f my knowledge, info ct to the penalties of of my license or certi- ibed before me this	ed or otherwise r. 18 Pa. C.S.§491 ormation and beling Pa. C.S. §490 ficate.	nodified in any wa 1. Additionally, I ief, and that I am 14 relating to unsv	iy. I am aware certify that the of good moral	is in the original of the criminal pe statements in the character. I undon to authorities	enalties for tampering his application are true derstand that any false
day of			Cionales	Daubar Taa-1	on on Marca care	Paulaau
 Notary Public's Sign	ature		Signature –	Darber Teach	ner or Manager l	Darber
- 10001 / 1 00110 0 0161			License Nu	mber – Barbe	r Teacher or Ma	nager Barber