



Jefferson County Barber Commission  
716 Richard Arrington Jr. Blvd North, Suite 516, Birmingham Alabama 35203  
Phone: 205-325-5393 • Fax: 205-323-7178

## CERTIFIED BARBER APPRINTICE PROGRAM APPLICATION

### REQUIREMENTS

1. Fees must be paid by Money Order, Cash, Cashier's Check Only. No Personal Checks
2. Copy of Current Driver's License (Must be at least 18 years old)
3. Signed, Notarized Affidavit confirming work history and Sponsoring Barbershop/Salon Owner

**PLEASE PRINT ALL INFORMATION AND SIGN IN THE APPROPRIATE AREAS**

Apprentice Last Name                      First Name                      Initial                      Last (4) of your Social Security #

Address: Street                                      City                                      Zip                                      Date of Birth

E-mail Address                                      Cell Phone #                                      Other Phone #

**Apprentice Affidavit:** • I understand that the **fees for this program are non refundable.** • I must complete the required hours of training under the named sponsor within the allotted period and attend Commission Certified test prep classes. If I change sponsors I will return my apprentice permit for a new apprentice permit and pay **\$25** • I understand that I may have only two sponsor changes while training. • I understand that a daily, monthly and cumulative record of my earned hours must be kept and submitted to the Commission office by the 15<sup>th</sup> day of the month following the month in which they are earned. • I understand that hours not properly submitted will not be certified and may subject my sponsor to a fine • I understand that my sponsor and I are jointly responsible for sending my exam application to the Commission office within 120 days after my Apprentice training is completed. I understand that failure to schedule the exam may subject my sponsor to a fine. **I Certify that I do not hold a current license in this field in another state or jurisdiction.**

**BY MY SIGNATURE I CERTIFY UNDER PENELTY OF PRODECUTION THAT I AM EITHER A CITIZEN OF THE UNITED STATES OR LEGALLY PRESENT IN THE UNITED STATES AND AUTHORIZED TO WORK.**

\_\_\_\_\_  
Signature of Apprentice

\_\_\_\_\_  
Date

Sponsor's Last Name                      First Name                      License Number/Expiration Date                      Last (4) of Social Security #

Address: Street                                      City                                      Zip                                      Phone #

**Sponsor Affidavit:** ● I agree to sponsor the apprentice named above in the practice of barbering, based on the Commission approved standards, within the allotted period, not to exceed 8 hours in one day in the named barbershop. ● I understand that I may sponsor only one apprentice at a time, and must maintain a valid personal license while training said apprentice. ● I understand that I must keep a record of daily, monthly and cumulative hours and submit hours to the Commission office by the 15<sup>th</sup> day of the month following the month in which hours are earned. ● I understand that hours not submitted as required may subject me and the salon named to a fine. I understand that if the apprentice should stop training **I AM RESPONSIBLE** for returning the apprentice permit along with the final report of earned hours to the Commission office.

\_\_\_\_\_  
Signature of Sponsor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Shop/Salon Name

\_\_\_\_\_  
Phone #

\_\_\_\_\_  
License #

\_\_\_\_\_  
Shop/Salon Address :

\_\_\_\_\_  
City

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Name of Shop/Owner

\_\_\_\_\_  
Last (4) of Social Security #

**Shop/Salon Owner's Affidavit:** ● I certify that the named salon has adequate facilities, supplies and instructional materials to train the apprentice named above in all aspects for the practice of Barbering.

\_\_\_\_\_  
Signature of Shop/Salon Owner

\_\_\_\_\_  
Date