



North Carolina Board of Barber and Electrolysis Examiners

7001 Mail Service Center
Raleigh, North Carolina 27699-7000
Office: (919) 814-0640 | Email: electrolysis@nc.gov | bbee.nc.gov

2024 Out-of-State School Certification Renewal

Postmark Deadline: 12/31/2023

Dear Applicant,

Thank you for your renewal for certification as an **Electrology** or **Laser Hair Removal School**. This form contains relevant information about how to renew a certification in North Carolina.

The requirements for renewal are pursuant to the statutes, rules, and regulations set forth by the NC General Assembly and the NC Board of Barber and Electrolysis Examiners. Failure to renew a school certification within 90 days of the expiration date will result in automatic forfeiture. Once forfeited, a school must complete the application process again in order to obtain certification. Please read the rules and instructions prior to completing.

It is the applicant's responsibility to inform the board of name and/or address changes. Please submit such changes in writing to the address listed above or via email.

If you have any questions, please contact the board at the information listed above. We look forward to renewing your certification in North Carolina.

Instructions for Completing PDF form

- The form is an interactive PDF. This means you can click directly onto a field and enter the required information. If you hover over the field with your cursor, a detail of the required information will be displayed.
- Please enter all information and SAVE the PDF file to your computer. There are two options for submitting the form:
 - print the saved document, sign, and send a scanned copy to the board email: electrolysis@nc.gov
 - or, print the saved document, sign, and mail to the board at:
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NORTH CAROLINA BOARD OF BARBER ELECTROLYSIS EXAMINERS

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FAILURE TO RENEW CERTIFICATION WITHIN 90 DAYS OF EXPIRATION DATE WILL RESULT IN AUTOMATIC FORFEITURE OF CERTIFICATION

Out-of-State School Certification Renewal:	\$100.00	Late Renewal Fee:	\$50.00
Total Amount Submitted*:			

Renewal of Certification as:

ELECTROLOGY SCHOOL

LASER HAIR REMOVAL SCHOOL

Date: _____

Certification# _____

School Name: _____

School Address: _____

City/State/Zip: _____ School Phone#: _____

School Email: _____ School Fax#: _____

Owner/Contact Name: _____

Mailing Address: _____

(if different than above school address)

City/State/Zip: _____ Owner Phone #: _____

Owner/Contact Email: _____

Has the school been involved in a government investigation or has any legal action been taken against the school during the past year? Yes No

If yes, attach an explanation to the renewal and provide a copy of the court judgment.

Signature _____ Date _____

*Returned Check Fee: \$25.00