



THE STATE
of **ALASKA**

Department of Commerce, Community, and Economic Development
Division of Corporations, Business and Professional Licensing

BAH

FOR DIVISION USE ONLY

Board of Barbers and Hairdressers

PO Box 110806, Juneau, AK 99811

Phone: (907) 465-2550

Email: BoardOfBarbersHairdressers@Alaska.Gov

Website: ProfessionalLicense.Alaska.Gov/BoardOfBarbersHairdressers

Barber and Hairdresser Student/Apprentice

Affidavit of Completed Training

This form is to be used when a student/apprentice has completed their training.

12 AAC 09.130(f) and 12 AAC 09.190(k) require that within five working days after completion by a student/apprentice of a course of study, the school owner or apprentice instructor shall submit to the board an affidavit showing the total number of operations, and the total number of hours of training and theoretical instruction completed by the student/apprentice, and the date of completion of the course. This affidavit will serve as certification by the school or apprentice instructor that the student/apprentice meets eligibility requirements necessary for examination for licensure. **Please return the completed form directly to the Alaska Board of Barbers and Hairdressers at the letterhead address.**

Note: To be considered for the examination, the application, quarterly reports, Affidavit of Training and fees must be complete and received in the division by the required examination deadline for which the applicant wishes to be scheduled. See 12 AAC 09.005 and AS 08.13.080. School owners: you must follow 12 AAC 09.130 for the submission of reports. Apprentice Instructors: you must follow 12 AAC 09.190 for the submission of reports.

PART I Student/Apprentice Information

Student/Apprentice Name:		Student/Apprentice Permit Number:	
Mailing Address:	P.O. Box or Street	City	State Zip
School or Shop Name:			
Date Enrolled:		Date Completed:	

PART II Practical Operations

Subject	Number of Practical Operations Performed
Wet hair styling and drying, including hair analysis, shampooing, fingerwaving, pin curling and comb outs.	
Thermal hair styling and drying, including hair analysis, straightening, waving, curling with hot combs and hot curling irons, and blower styling.	
Permanent waving, including hair analysis and chemical waving.	
Chemical straightening, including hair analysis and the use of sodium hydroxide and other base solutions, in accordance with 12 AAC 09.160(c).	
Haircutting, including hair analysis and the use of the razor, scissors electric clippers, and thinning shears, for wet and dry cutting.	

PART II Practical Operations (continued)

Subject	Number of Practical Operations Performed
Haircoloring and bleaching, including hair analysis, predisposition tests, safety precautions, formula mixing, tinting, bleaching, and the use of dye removers, but not including color rinses.	
Scalp and hair treatments, including hair and scalp analysis, brushing, electric and manual scalp manipulation and other hair treatments.	
Beard trimming (for barber and hairdresser curriculum).	
Beard shaving (for barber curriculum).	
Eyebrow arching and hair removal, including the use of wax, manual or electric tweezers and depilatories for the removal of superfluous hair.	
Makeup, including skin analysis, complete and corrective makeup, and the application of false eyelashes.	
Manicure.	

PART III Theory Hours & State Law

Subject	Number of Hours
Theory Hours.	
State Law (Statutes and Regulations).	

PART IV Total Hours

Total Hours of Training Received:	
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PART V Proficiency Exam

Date Proficiency Examination Passed:	
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PART VI Notarized Signature

I hereby certify that the above-named student/apprentice obtained the aforementioned Practical Operations listed in accordance with 12 AAC 09.160. The total number of operations performed is indicated above. I further certify that the aforementioned student/apprentice received the above hours of training.

This affidavit serves as certification by the school or instructor that the student/apprentice meets training requirements necessary for examination for licensure as required by 12 AAC 09.130(f) or 12 AAC 09.190(k).

Notary Stamp	Instructor or School Owner Name:			
	Instructor or School Owner Signature:			
	Notary Public for State of:		Subscribed and Sworn to Before me on this Day:	
	Notary Signature:		My Commission Expires:	