

# ADMISSION APPLICATION

Beauty of All Race's Academy  
 1615 N Hampton Road #100  
 DeSoto, TX 75115  
 +01 (214) 502-0887 | [info@thebaracademy.org](mailto:info@thebaracademy.org) | [www.thebaracademy.org](http://www.thebaracademy.org)



## PERSONAL INFORMATION

Name: \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Last Name First Name M.I.

Mailing Address: \_\_\_\_\_  
Street Number City State Zip Code

Permanent Address: \_\_\_\_\_  
Street Number City State Zip Code

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Gender: Male Female

Emergency Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 \_\_\_\_\_  
Phone Number Street Number City State Zip Code

Have you ever been convicted of a felony? Yes No

If yes, explain: \_\_\_\_\_

Which best describes your application status? New Applicant Transfer

If transfer, from where? \_\_\_\_\_

How many hours do you currently have? \_\_\_\_\_

Which program are you interested in? Full Time Part Time

Do you have reliable transportation? Yes No Do you work? Yes No

If yes, where? \_\_\_\_\_

If you reside outside of Texas, are you planning on getting licensed in: Texas Other

List the last high school you attended and your status when you left (i.e. Grad, GED, Withdrew).  
 List all other educational institutions you have or are attending.

Name of institution, City, State	From (mo./yr.)	To (mo./yr.)	Diploma/GED/Degree

Have you been suspended or dismissed from any cosmetology school or college for academic, attendance or disciplinary reasons?      Yes      No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

To provide you the best education, please let us know if you have an IEP or Special Education plan so we can make accommodations for your State Board Exam.      Yes      No

## Employment and Military History

List your employment experience (including military service) for the last 12 months.

Employer	Street Address	City, State, Zip	From (mo. & yr.)	To (mo. & yr.)
Employer	Street Address	City, State, Zip	From (mo. & yr.)	To (mo. & yr.)
Employer	Street Address	City, State, Zip	From (mo. & yr.)	To (mo. & yr.)

Answer the following questions in 3 or 4 sentences.

1. Why will you be a great student at our school? \_\_\_\_\_  
\_\_\_\_\_

2. What obstacles might prevent you from achieving excellent attendance and excellent academic performance? \_\_\_\_\_  
\_\_\_\_\_

3. How did you hear about the Beauty of All Races' Academy? \_\_\_\_\_  
\_\_\_\_\_

4. What traits do you have that will help you succeed in this industry? \_\_\_\_\_  
\_\_\_\_\_

5. What are your long-term career goals? \_\_\_\_\_  
\_\_\_\_\_

6. Why did you choose Beauty of All Races'? \_\_\_\_\_  
\_\_\_\_\_

## Admission Policy

- All prospective students must complete an Admissions Application and return it to the campus location of their choice.
- All applications will be reviewed and approved by the campus Admissions Representative and campus Manager.
- Incomplete applications will not be considered for review.
- Applications received from an applicant with a felony conviction will be further reviewed by the schools' owner, directors staff, and campus Admissions Representative and Manager.
- Submitting an application does not guarantee admission.
- Prospective students will be notified by phone of approval or denial of admission.
- In the event a prospective student cannot be reached via phone, a letter will be mailed to the address provided on the Admissions Application.
- Beauty of All Race's Academy, LLC. reserves the right to approve or deny admission based on information gathered from the Admissions Application, during conversations with prospective students or friends and family members of prospective students (on the phone or in person), letters written by or on the behalf of a prospective student, or any other form of communication.
- Beauty of All Race's Academy, LLC. teaches all courses in English only. The Texas State Board of Cosmetology administers the licensing examination in English only. If English is not the primary language of a prospective student, they will be required to take the Admissions Exam and must pass the exam with a minimum of 75%.

I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE, THE INFORMATION GIVEN IN THIS APPLICATION IS TRUE. I UNDERSTAND THAT ANY OMISSION OR MISREPRESENTATION OF FACTS WILL BE CAUSE FOR REFUSAL OF ADMISSION, CANCELLATION OF APPLICATION, OR DISMISSAL FROM THE BAR ACADEMY IF LATER DISCOVERED. I FURTHER UNDERSTAND THAT, IF I AM APPROVED AND ACCEPTED INTO THE PROGRAM, IT IS MY RESPONSIBILITY TO ARRANGE FOR ALL ADMISSION CREDENTIALS (DIPLOMA, OFFICIAL TRANSCRIPTS, DOWN PAYMENT, ETC.) TO BE RECEIVED BY THE ADMISSIONS OFFICE AT THE TIME OF MY ENROLLMENT.

\_\_\_\_\_  
Signature of the Chairman

\_\_\_\_\_  
Signature of the Applicant