



### Cosmetology Program Pre-Admissions Application Checklist

Dear Prospective Student,

Thank you for your interest in our Cosmetology Program. To ensure a smooth application process, please complete all required forms and documents. Incomplete applications will not be accepted.

Below is a checklist to guide you through the pre-admission application process:

#### 1. Cosmetology Pre-Admission Application

- Complete the Cosmetology Pre-Admission Application form.
- Ensure all fields are filled out accurately and completely.

#### 2. Cosmetology Program Interview Questions

- Answer all interview questions thoughtfully and honestly.
- Provide detailed responses to help us understand your motivations and goals.

#### 3. Cosmetology Program Liability Release

- Review the Cosmetology Program Liability Release form.
- Sign and date the document as instructed.

#### 4. Broadcast & Photo Release

- Carefully read the Broadcast & Photo Release form.
- Sign and date the document, granting consent as indicated.

#### 5. State-Issued ID

- Include a clear copy of your state-issued ID (e.g., driver's license or passport).
- Ensure that the ID is current and legible.

Please submit all required documents together in one complete package to the Cosmetology Office. Incomplete applications or missing documents will not be considered.

Once your application is complete, our team will review it and contact you to schedule an interview if necessary. We appreciate your interest in our Cosmetology Program and look forward to reviewing your application.

If you have any questions or need assistance, please contact us at: [cosmetologyce@collin.edu](mailto:cosmetologyce@collin.edu)

Sincerely,  
Collin College Cosmetology Program



**Cosmetology Program Pre-Admissions Application**

Thank you for your interest in the Collin College Cosmetology Program. Please complete this form in its entirety. Submission of this application indicates intent to apply and does not guarantee admission into any program or course.

**Personal Information**

Full Legal Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender (Optional): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Program of Interest**

- 1,000 Clock-Hour Cosmetology Operator Certificate Program
- 1,000 Clock-Hour Cosmetology Operator Certificate Program with Associate of Applied Science Degree (AAS)
- Advanced Cosmetology and Makeup Continued Education Courses

**Educational Background**

Highest Level of Education Completed:

- High School Diploma
- GED
- Some College
- Associate's Degree
- Bachelor's Degree
- Other: \_\_\_\_\_

Name of Most Recent Institution Attended: \_\_\_\_\_

**Relevant Certifications/Licenses (if applicable):**

\_\_\_\_\_  
\_\_\_\_\_

**Professional Experience (If Applicable)**

Please describe relevant work experience in cosmetology, barbering, salon services, beauty retail, healthcare, or related fields:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Licensure Information**

Do you currently hold an active cosmetology or specialty license?  Yes  No

Do you hold an active barber, esthetician, or medical provider license?  Yes  No

If yes, specify license type, issuing state, and license number (if applicable):

\_\_\_\_\_



**Statement of Intent**

Please describe your reasons for pursuing the Cosmetology Program and your professional goals:

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**How Did You Hear About Our Program?**

- Collin College Website
- Social Media
- Referral
- College Fair / Community Event
- Workforce / Employer
- Other: \_\_\_\_\_

**Applicant Acknowledgment**

By submitting this Pre-Admissions Application, I acknowledge that this form expresses interest in the Collin College Cosmetology Program and does not guarantee acceptance. Additional documentation and Texas Department of Licensing and Regulation (TDLR) requirements may apply prior to admission.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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Program Director Signature: \_\_\_\_\_

Date Received: \_\_\_\_\_

Notes: \_\_\_\_\_

Please submit this Pre-Admissions Application and any required documents to: [cosmetologyce@collin.edu](mailto:cosmetologyce@collin.edu)



Cosmetology Program Entrance Interview

Student Information

Full Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Student ID: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_  
Program Start Date: \_\_\_\_\_ Program End Date: \_\_\_\_\_

Please answer the following questions as part of your entrance interview:

**1. Why are you interested in enrolling in the Cosmetology Program?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**2. What specific goals or aspirations do you have in cosmetology?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3. Have you completed any prior education or training related to cosmetology or a related field? If yes, please provide details.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**4. What personal strengths will support your success in a cosmetology career, and what areas will you need to intentionally develop?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**5. Are there any personal or external factors affecting your ability to attend classes regularly and meet program requirements? If yes, please explain.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**6. Are you familiar with the program's code of conduct and policies? Do you have any questions or concerns regarding these policies?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**7. Is there anything else you would like to share or discuss during this entrance interview?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For School Use Only**

Please retain a copy of this Entrance Interview Form for your records. Contact the program office if you have any additional questions or need further information.

**Cosmetology Program Liability Release**

I, \_\_\_\_\_, understand and acknowledge that as part of the required coursework in the **Cosmetology Program** at Collin College, I will be participating in hands-on training of cosmetology services and procedures on fellow students and/or clients under the guidance of industry-experienced licensed instructors.

I am aware that these hands-on training sessions are an integral part of the learning experience and are essential to my cosmetology education.

I understand the following:

1. All services and procedures will be performed solely for educational purposes and conducted in a controlled and supervised environment.
2. Licensed instructors will provide guidance and oversight during all training sessions to ensure the safety and proper execution of cosmetology services and procedures.
3. Despite the precautions and supervision provided by the college and its instructors, there are inherent risks associated with cosmetology services and procedures, which may include, but are not limited to: skin irritation, allergic reactions, cuts, burns, chemical sensitivities, or other temporary or minor discomforts.
4. While every effort will be made to ensure the safety of all participants, accidents and unforeseen events may occur.

I hereby release Collin College, its faculty, staff, instructors, and agents from any liability for any injuries or bodily harm I may sustain while participating in hands-on training as part of the Cosmetology Program. I understand that the college is not responsible for any injuries, illnesses, or adverse reactions that may result from cosmetology services and procedures performed during training.

Additionally, I acknowledge that it is strongly recommended for me, as a cosmetology student, to obtain professional liability insurance through a reputable insurance provider to protect myself against potential liability claims related to my future professional practice in the field of cosmetology.

I have read and understood this Liability Release Form and voluntarily accept the risks of participating in hands-on training as part of the Cosmetology Program. I understand the importance of following all safety guidelines, sanitation requirements, and instructions provided by the college and its instructors.

Student's Full Name: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Director's Full Name: \_\_\_\_\_

Director's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For School Use Only**

Please retain a copy of this Liability Release Form for your records. If you have any questions or concerns regarding this form, please contact the college administration.



**Broadcast & Photo Release Form**

**Broadcast/Taping/Photography Date:** \_\_\_\_\_

**Location:** \_\_\_\_\_ **Event Name:** \_\_\_\_\_

**Broadcast and Photography Release Agreement**

The undersigned enters into this Agreement with **Collin County Community College District (hereafter “Collin College”)**. I understand that Collin College is producing video recordings and/or photographs and that my name, likeness, image, voice, appearance, and performance may be recorded and made part of that production (hereafter “Product”).

**1. Grant of Rights**

I grant Collin College and its designees the irrevocable right to use my name, likeness, image, voice, appearance, and performance as embodied in the Product. This grant includes, without limitation, the right to edit, mix, duplicate, and use or reuse the Product in whole or in part.

Collin College or its designees shall have complete ownership of the Product, including all copyright interests. I acknowledge that I have no ownership interest in the Product or its copyright.

**2. Use and Distribution**

I grant Collin College and its designees the right to broadcast, exhibit, publish, reproduce, distribute, and otherwise use the Product, in whole or in part, either alone or with other materials, for purposes including but not limited to:

- College websites and digital platforms
- Social media
- The World Wide Web
- Print publications
- Marketing and promotional materials
- Cable or non-commercial television
- Closed-circuit exhibition
- Video distribution
- Any other lawful educational or promotional purpose as determined by Collin College

This grant includes the right to use the Product for promoting or publicizing any of the above uses.

**3. Representations and Release**

I confirm that I have the legal right to enter into this Agreement and am not restricted by any commitments to third parties. I understand that Collin College has no financial obligation to me as a result of this Agreement.

I hereby grant all necessary permissions and waive any rights of inspection or approval of the finished Product. I expressly release and hold harmless Collin College and its trustees, officers, employees, agents, and designees from any and all claims, demands, damages, liabilities, costs, or expenses (known or unknown) arising from the use of the Product as described above.

The rights granted herein are perpetual and worldwide.

**4. Compensation**

I acknowledge that no fee or compensation is payable by Collin College for this appearance or for the use of the Product, and that I have no further claims related to its use.

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I have read and understand the terms of this Agreement and voluntarily agree to them.



Name (Printed): \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If participant is under 18 years of age:

Parent/Guardian Name (Printed & Signature): \_\_\_\_\_ Date: \_\_\_\_\_

**Cosmetology Program Functional Abilities / Core Performance Standards**

Please review the list of skills below carefully.

If you believe you are unable to meet any of the standards listed — even with corrective measures (e.g., eyeglasses, hearing aids, etc.) — please list those standards at the end of this document.

The Cosmetology Program complies with the Americans with Disabilities Act (ADA). Consistent with the ADA, this Functional Abilities/Core Performance Standards Worksheet provides a framework to relate functional ability categories and representative activities/attributes to any limitations or deficits in functional abilities.

These standards are used in combination with:

- The Texas Department of Licensing and Regulation (TDLR) scope of practice
- Industry job expectations
- Program curriculum requirements
- Safety standards for public salon environments

If a student is unable to meet the required Functional Abilities/Core Performance Standards, the Cosmetology Program, in consultation with Collin College's Student Support Services (ACCESS Office), will determine on an individual basis whether reasonable accommodations can be made to allow the student to meet essential program requirements.

**Note:** The "Skills tied to" sections are examples and not a complete list.

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### **1. Gross Motor Ability**

Must be able to:

- Move safely within salon and classroom spaces
- Stand and maintain balance for extended periods
- Reach above shoulders
- Reach below waist
- Reach outward horizontally

**Skills tied to:**

Perform haircuts, chemical services, styling, manicures, pedicures, and facial services while standing. Move around styling chairs, shampoo bowls, dispensary areas, and classroom stations safely.

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### **2. Fine Motor Ability**

Must be able to:

- Pick up and manipulate small objects
- Grasp and control shears, razors, combs, brushes
- Twist and operate tools and product containers
- Write legibly
- Type and enter client data
- Maintain proper sanitation and infection control

**Skills tied to:**

Precision cutting, foil placement, perm rod wrapping, acrylic application, lash application, brow shaping, detailed nail art, and proper tool disinfection.

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### 3. Physical Endurance

Must be able to:

- Stand for 4–8 hour lab/salon shifts
- Perform repetitive hand and arm movements
- Maintain pace consistent with salon productivity
- Sustain focus during client services

#### Skills tied to:

Blow-drying, flat ironing, braiding, chemical applications, repetitive haircutting motions, manicures, and facials.

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### 4. Physical Strength

Must be able to:

- Lift and carry up to 25 pounds
- Push or move salon equipment (e.g., styling chairs, carts)
- Use upper body strength
- Maintain grip strength for tools

#### Skills tied to:

Adjust styling chairs, move product boxes, carry mannequin heads, handle professional dryers and equipment.

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### 5. Mobility

Must be able to:

- Bend
- Twist
- Stoop/squat
- Walk
- Move quickly if necessary

#### Skills tied to:

Shampooing clients, retrieving supplies, adjusting client positioning, responding quickly to spills or safety concerns.

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### 6. Hearing

Must be able to:

- Hear normal speaking voices
- Hear client requests and concerns
- Hear timers and safety alarms
- Communicate in a salon environment with background noise

#### Skills tied to:

Consultations, service adjustments, responding to instructor feedback, and maintaining client safety during chemical services.

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### 7. Visual Ability

Must be able to:

- Distinguish color and color intensity
- See detail at close range
- Assess symmetry and precision
- Read product labels and instructions



**Skills tied to:**

Hair color formulation, highlighting, balayage, haircut precision, nail detailing, makeup application, and reading chemical processing instructions.

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**8. Tactile Ability**

Must be able to:

- Detect texture differences
- Assess hair density and porosity
- Evaluate skin condition

**Skills tied to:**

Determining appropriate product selection, adjusting cutting techniques, and performing facials or scalp treatments.

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**9. Smell**

Must be able to:

- Detect chemical odors
- Identify burning smells
- Recognize noxious fumes

**Skills tied to:**

Monitoring chemical services (e.g., perms, relaxers, color), identifying overheating tools, and maintaining salon safety.

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**10. Reading**

Must be able to:

- Read and interpret service instructions
- Read product labels and safety data
- Understand written assignments and state regulations

**Skills tied to:**

Following manufacturer instructions, completing theory work, and complying with TDLR sanitation rules.

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**11. Arithmetic**

Must be able to:

- Perform basic math (add, subtract, multiply, divide)
- Calculate percentages
- Measure product accurately
- Track timing for chemical processing
- Record service data

**Skills tied to:**

Color formulation ratios, developer strength calculations, service timing, retail transactions, and client recordkeeping.

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**12. Emotional Stability**

Must be able to:

- Maintain professionalism



- Accept constructive feedback
- Adapt to schedule changes
- Manage stress in busy salon environments
- Maintain composure with dissatisfied clients

**Skills tied to:**

Handling client concerns, managing time effectively, balancing multiple services, and maintaining professional boundaries.

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### **13. Analytical Thinking**

Must be able to:

- Evaluate hair and skin conditions
- Process consultation information
- Problem solve service challenges
- Prioritize tasks

**Skills tied to:**

Corrective color decisions, haircut adjustments, adapting services to client needs, and recommending appropriate products.

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### **14. Critical Thinking Skills**

Must be able to:

- Identify cause-and-effect relationships
- Sequence procedures properly
- Integrate theory and practical skills

**Skills tied to:**

Determining chemical compatibility, preventing damage, and ensuring safe service execution.

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### **15. Interpersonal Skills**

Must be able to:

- Establish rapport with clients
- Respect diverse backgrounds and preferences
- Work collaboratively with classmates and instructors
- Manage conflict professionally

**Skills tied to:**

Client consultations, teamwork on clinic floor, and maintaining a positive salon atmosphere.

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### **16. Communication Skills**

Must be able to:

- Conduct consultations
- Explain procedures clearly
- Provide aftercare instructions
- Document services accurately
- Communicate effectively with instructors and clients

**Skills tied to:**

Service recommendations, retail suggestions, client education, and professional documentation.

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**Student Acknowledgment**

1. Please list any standards above that you feel you may not be able to meet, even with correction (e.g., glasses, hearing aids).

(Use reverse if necessary.)

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2. Do you have any limitations or concerns that may require accommodation?

If yes, please list.

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**3. ACCESS Office Information**

ACCESS (Accommodations at Collin County for Equal Support Services) provides reasonable accommodations for students with documented disabilities. Students are encouraged to meet with an ACCESS advisor as early as possible to determine eligibility and discuss accommodation options. Accommodation requests will be reviewed in collaboration with the Cosmetology Program to determine reasonableness and ability to meet essential program requirements.

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**Print Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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**For School Use Only**

Please retain a copy of this form for your records. Contact the program office if you have any additional questions or need further information.