



MISSISSIPPI STATE BOARD OF COSMETOLOGY AND BARBERING

DEMONSTRATOR PERMIT APPLICATION

This form is for individuals who are not licensees of the Board who will demonstrate* products or tools.

Instructions: This form must be completed and accompanied by the following attachments:

1. Two (2) passport style color photograph taken within the last ninety (90) days of application date;
2. Two (2) current forms of identification of which at least one (1) must be a government issued identification with photograph;
3. Color copy of all licenses held to practice a profession regulated by this Board in any other state or US Territory;
4. A copy of the applicant's resume; and
5. Non-refundable \$10.00 application fee payable by check or money order.

Return to MSBCB, PO Box 55689, Jackson, MS 39296-5689

Name: (First, Middle, Last)

Physical Address:

Mailing Address:

Phone:

E-Mail:

DOB: ____/____/____

Social Security Number: _____

License Held (both current and former):

State/US Territory	License Type	License Number	Issue Date	Active/Expired

List the name and address for the company for which you will demonstrate:

List all methods and/or products you will demonstrate:

List all locations in which you will demonstrate:

I certify, under penalty of perjury, that the foregoing is true and correct to the best of my knowledge.

Signature

Date

*“Demonstrate” means to perform a one-time service on a consumer, without compensation, to show how the product or tool is used or to prove its value or effectiveness, with the intent that the consumer may later purchase and apply the product himself, without the help of a licensee or product instructor, and the purchase price of the product charged to the consumer is no more than its average retail price.