



# MISSISSIPPI STATE BOARD OF COSMETOLOGY AND BARBERING INSTRUCTOR LICENSE RENEWAL FORM

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**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. Proof of having successfully completed twelve (12) hours of continuing education at a Board approved course(s);
3. Certificate of completion of CE on Human Trafficking\*\*;
4. Certificate of completion of CE on Domestic Violence\*; and
5. Non-refundable \$80.00 fee payable by check or money order\*\*.

\*Must be submitted on or before July 1, 2029.

\*\*If you are 70 years old or older, there is no fee for your license. Please provide proof of age.

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

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**Name: (First, Middle, Last)**

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**Physical Address:**

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**Mailing Address:**

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**Phone:**

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**E-Mail:**

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**DOB:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Social Security Number:** \_\_\_\_\_

**MSBCB License Number:** \_\_\_\_\_

**MSBCB Expiration Date:** \_\_\_\_\_

**Name of School where you are employed:** (if employed)

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**Have you ever been convicted of a felony?**  Yes  No

If yes, please complete a Fresh Start Act Consideration Request.

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

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Signature

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Date