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## STATE OF NEW HAMPSHIRE OFFICE OF PROFESSIONAL LICENSURE AND CERTIFICATION DIVISION OF LICENSING AND BOARD ADMINISTRATION

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## BOARD OF BARBERING, COSMETOLOGY & ESTHETICS APPRENTICESHIP HOUR SHEET

Sho	p name:						
			PLEASE CIRCLI	E TYPE OF APPRE	NTICESHIP		
BARBER		COSMETOLOGY		ESTHETICS	MANICURIST		MASTER BARBE
	<b>❖</b> A <b>❖</b> A	Manicuring appre	entice must compl ntice must comple	oprentice must cor ete 600 hours ove te 1,200 hours ov s over a twelve-mo	r a five-month per er an eight-month	iod.	en-month period.
of the uctor a		A written test to a sign the be	hat has been co	rrected by instrurm each month.	ictor must be att By signing the	ached to each	in the Board office b hour sheet. The stating that the
		MON	TH:	YE	AR:	_	
		Below p	ut the total num	ber of hours con	pleted for that a	lay.	
	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	6 <sup>th</sup>	7 <sup>th</sup>	8 <sup>th</sup>
	10 <sup>th</sup>	11 <sup>th</sup>	12 <sup>th</sup>	13 <sup>th</sup>	14 <sup>th</sup>	15 <sup>th</sup>	16 <sup>th</sup>
	18 <sup>th</sup>	19 <sup>th</sup>	20 <sup>th</sup>	<b>21</b> <sup>st</sup>	22 <sup>nd</sup>	23 <sup>rd</sup>	24 <sup>th</sup>
l	26 <sup>th</sup>	27 <sup>th</sup>	28 <sup>th</sup>	29 <sup>th</sup>	30 <sup>th</sup>	31 <sup>st</sup>	
	PREVIOUS GRA						
ONCE	YOU HAVE CON	IPLETED THE HO		FOR APPRENTICI ST HOUR SHEET		T SEND IN APP	PRENTICE LICENSE W
A	pprentice signa	ture:				_ Date:	<u>.</u>
	structor signat					Date:	