



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

Apprentice name: _____

Shop name: _____

PLEASE CIRCLE TYPE OF APPRENTICESHIP

BARBER

COSMETOLOGY

ESTHETICS

MANICURIST

MASTER BARBER

- ❖ A Master Barber and Cosmetology apprentice must complete 3,000 hours over an eighteen-month period.
- ❖ A Manicuring apprentice must complete 600 hours over a five-month period.
- ❖ An Esthetics apprentice must complete 1,200 hours over an eight-month period.
- ❖ A Barber must complete 1,600 hours over a twelve-month period.

The months are documented by monthly hours received by this office. This hour sheet must be received in the Board office by the 15th of the following month. A written test that has been corrected by instructor must be attached to each hour sheet. The instructor and apprentice must sign the bottom of this form each month. By signing the form you are stating that the apprentice hours of training are correct. ****Keep a copy for your records.****

MONTH: _____ **YEAR:** _____

Below put the total number of hours completed for that day.

1 st	2 nd	3 rd	4 th	5 th	6 th	7 th	8 th
9 th	10 th	11 th	12 th	13 th	14 th	15 th	16 th
17 th	18 th	19 th	20 th	21 st	22 nd	23 rd	24 th
25 th	26 th	27 th	28 th	29 th	30 th	31 st	

PREVIOUS GRAND TOTAL: _____ **+ THIS MONTH'S TOTAL:** _____ **= GRAND TOTAL:** _____

*****ONCE YOU HAVE COMPLETED THE HOURS REQUIRED FOR APPRENTICESHIP YOU MUST SEND IN APPRENTICE LICENSE WITH THE LAST HOUR SHEET*****

Apprentice signature: _____

Date: _____

Instructor signature: _____

Date: _____