

## COSMETOLOGY INSTRUCTOR TRAINEE

To be eligible for an Arkansas Cosmetology Instructor License, the Arkansas Department of Health requires 600 hours of training beyond the 1,500 hours required for an Arkansas Cosmetology License.

The instructor trainee(s) shall be under the direct supervision of a full-time licensed instructor at all times. Instructor trainees may attend on a part-time basis provided the curriculum is observed.

### **The Application Process**

To be considered for admissions to the Cosmetology Instructor's Trainee program, this application packet must be completed and submitted to Vicky Young. Applications for the Fall semester enrollment must be submitted by June 1<sup>st</sup>. Applications for the Spring semester enrollment must be submitted by October 15<sup>th</sup>. This packet may be scanned and emailed to [vyoung@eacc.edu](mailto:vyoung@eacc.edu), or delivered to the East Arkansas Community College Cosmetology Department.

It is the applicant's responsibility to ensure that the application is submitted by the due date. Please request an e-mail confirmation or call 870-633-4480 ext. 483. Applications received after the due date will not be processed.

All applications will be reviewed and selections determined by June 15<sup>th</sup> for the Fall semester and by November 1<sup>st</sup> for the Spring semester. A letter of notification will be sent to selected candidates.

If selected for the Instructor Trainee program you must complete the EACC application and provide a copy of all required documents listed below:

- Immunization record.
- Accuplacer or ACT Placement test scores.
- Valid Arkansas Cosmetology License.
- High school transcript or GED scores graduation date.
- State issued photo ID.
- Social Security card.
- \$20.00 money order for State Board Permit

To be considered as a candidate for the program, please email a resume, three letters of recommendation and a typed essay (no more than 400 words) stating why you would be a good candidate for the Cosmetology Instructor Trainee Program at East Arkansas Community College to [vyoung@eacc.edu](mailto:vyoung@eacc.edu).

East Arkansas Community College  
Cosmetology Trainee Program Application

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**COMPLETE ALL SECTIONS**

**Indicate your enrollment preference:** Check only one.

\_\_\_\_\_ Fall semester (Deadline is June 1<sup>st</sup>)

\_\_\_\_\_ Spring semester (Deadline is October 15<sup>th</sup>)

**Application Checklist**

Incomplete applications will not be processed.

\_\_\_\_\_ Resume include a Cover Letter

\_\_\_\_\_ Three letters of recommendation

\_\_\_\_\_ Essay

\_\_\_\_\_ Complete Instructor's Trainee application

**Contact Information**

Name: \_\_\_\_\_

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

Birthdate \_\_\_/\_\_\_/\_\_\_      \_\_\_ Male \_\_\_ Female \_\_\_ Prefer not to answer

E-Mail \_\_\_\_\_

Phone Numbers: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Name and date of previously attended Cosmetology Program.

\_\_\_\_\_

Director's Name: \_\_\_\_\_ Ph. Number \_\_\_\_\_

**I affirm that all information supplied is complete and accurate. I understand that any misrepresentation of facts on this application could be cause for refusal of admission, cancellation of admission or suspension from college.**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_