

## 2016 Renewal of License(s) in the Cosmetology Arts and Sciences Board

License No	
Last Name, First Name	
Address	
City, State, Zip Code	
E-mail address	
Phone 1	
Phone 2	
*SSN	

**Privacy Act Notice: Disclosure of your Social Security Number on this renewal application is required by 42 U.S.C. § 666(a)(13) and Iowa Code § 252J.8(1). The number will be used in connection with the collection of child support obligations and as an internal means to accurately identify licensees, and may be shared with taxing authorities as allowed by law including Iowa Code § 421.18.**

### **Step One - Check the license(s) are you renewing. Enter each license number.**

License Practice Discipline	License #	Renewal fee with a postmark date on or before March 31	Renewal fee with postmark date April 1 – April 30
<input type="checkbox"/> Cosmetology		\$60.00	\$120.00
<input type="checkbox"/> Electrology		\$60.00	\$120.00
<input type="checkbox"/> Esthetics		\$60.00	\$120.00
<input type="checkbox"/> Instructor		\$60.00	\$120.00
<input type="checkbox"/> Manicure		\$60.00	\$120.00
<input type="checkbox"/> Nail technology		\$60.00	\$120.00

### **Step Two - What is the renewal fee and when is it due?**

- The renewal fee is \$60 per license(s). Check or money order must be payable to the Iowa Board of Cosmetology.
  - To avoid the late fee, submit a completed, accurate renewal application and renewal fee(s) before the license expiration date of March 31st. The board office strongly suggests the application and fee(s) be postmarked on or before March 1st.
  - A \$60 **late fee**, per license, plus the \$60.00 renewal fee, per license is required on all applications postmarked in the grace period. “**Grace period**” means the 30-day period following expiration of a license when the license is still considered to be active. In order to renew a license during the grace period, a licensee is required to pay the \$60.00 late fee.
  - The most recent postmark will determine whether the renewal application is late. This is true even if the application was initially postmarked prior to the license expiration date.
  - Renewal applications postmarked after the “**Grace period**” will not be processed. The license will automatically be placed on inactive status.
- Inactive License
- A licensee who fails to renew the license by the end of the grace period has an inactive license. A licensee whose license is inactive continues to hold the privilege of licensure in Iowa, but may not practice cosmetology arts and sciences in Iowa until the license is reactivated.
  - The application for reactivation of an Iowa license must be completed and approved to regain active license status:  
<http://idph.iowa.gov/Licensure/Iowa-Board-of-Cosmetology-Arts-and-Sciences/Licensure/Reactivation>

#### Processing

- Allow four weeks to process the paper renewal. Once approved, a new wallet card will be sent to you.
- To receive a paper copy of the current Iowa Law and Administrative Rules include an additional \$5.00. To view the current Iowa Law and Administrative Rules online go to: <http://idph.iowa.gov/Licensure/Iowa-Board-of-Cosmetology-Arts-and-Sciences/Laws-and-Rules>

### **Step Three - The Following Six Questions Must Be Answered.**

If you answer “Yes” to any question below, (1) attach a signed letter of explanation providing the details of the incident, (2) attach a copy of any court ordered evaluations, showing completion and recommendations, and (3) attach a copy of all official court documents regarding your conviction/malpractice suit, including final disposition and/or settlement. You must answer “Yes” even when a conviction or judgment has been deferred or expunged from your record. **SINCE 04/01/2014 HAVE YOU:**

Yes	No	Been convicted, found guilty of, or entered a plea of guilty or no contest to a felony or misdemeanor crime (other than minor traffic violations with fines under \$500)?
Yes	No	Had any judgments or settlements paid on your behalf as a result of a malpractice suit or claim filed against you?
Yes	No	Been investigated by a licensing, registration, or certification authority or organization? If the investigation or action was instituted by this licensing board you may answer “NO” to this question.
Yes	No	Been disciplined or sanctioned by any other licensing, registration, or certification authority or organization related to your professional practice? If this licensing board took the disciplinary action, you may answer “NO” to this question.
Yes	No	Developed a medical condition which in any way impairs or limits your ability to practice your profession with reasonable skill and safety? (If you are currently a participant in the Impaired Practitioner Review Committee, you may answer “NO” to this question.)
Yes	No	Been engaged in illegal or improper use of drugs or other chemical mood altering substances? (If you are currently a participant in the Impaired Practitioner Review Committee, you may answer “NO” to this question.)

**⇒ If you have completed steps 1, 2, and 3 above continue on side two & complete steps 4, & 5.**

**Step Four** – The Following Six Continuing Education Questions **Must** Be Answered

- Continuing education requirements must be completed prior to renewing the license(s).
- Continuing education hours must be completed 4/1/2014 through 3/31/2016 **if** this is your third or more renewal.
- Do not send copies or original continuing education certificates with this renewal.
- You may be selected for the post renewal continuing education audit. If selected for the audit, you will be required to provide documentation showing compliance with your continuing education license renewal requirements.
- The continuing education rules are available on the bureau’s website:  
<http://idph.iowa.gov/Licensure/Iowa-Board-of-Cosmetology-Arts-and-Sciences/Continuing-Education>

Yes	No	This is my first renewal after initial licensure; continuing education is not required.
Yes	No	<b>Renewing One License:</b> I have completed the required 8 continuing education hours of which includes 4 hours specific to the practice discipline and 2 hours in the content area of Iowa cosmetology law and rules and sanitation. Note: If you are reporting continuing education for the first time you may report hours earned from the date of your initial licensure.
Yes	No	<b>Renewing Multiple Licenses</b> -I have completed 4 continuing education hours specific to each license practice discipline plus an additional 2 hours in the content area of Iowa cosmetology law and rules and sanitation. Note: If you are reporting continuing education for the first time, you may report hours earned from the date of your initial licensure for that specific license.
Yes	No	I am <b>exempt</b> from the continuing education requirements because I am licensed and reside in another state or district. I have met all requirements of that state or district for practice
Yes	No	I am <b>exempt</b> from the continuing education requirements because I have been granted an extension of time to fulfill the continuing education requirements <b>or</b> I have been granted an exemption by the board (due to a physical or mental disability or illness). My doctor and I have completed the ‘Application for Continuing Education Extension/Exemption for Disability or Illness. The application has been mailed to the board office and has been approved by the Board. I have or am in the process of completing the requirements of my exemption.
Yes	No	I am <b>exempt</b> from the continuing education requirements because I served honorably on active duty in the military service during all or part of this continuing education biennium; 4/1/2014 – 3/31/2016.

**Step Five** - Please Read and Sign.

I certify that I have carefully read the questions on this application and have answered them completely and truthfully. I declare under penalty of perjury that my answers, and all other statements or information submitted by me in this application process, are true and correct. If it is determined at any time that I have provided misleading or false information on or in support of this application, I understand that my license may be subject to disciplinary action and criminal prosecution.

I also understand that this application is a public record in accordance with Iowa Code chapter 22 and that application information is public information, subject to the exceptions contained in Iowa law. Finally, in submitting this application, I consent to any reasonable inquiry, including a post-renewal audit that may be necessary to verify the information I have provided on, or in conjunction with, this application.

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 Licensee sign here

\_\_\_\_\_  
 Date