

Deadline for Submission: _____



Phagans' Beauty College (Phagans' Cosmetology Colleges)
 Phagans' Central Oregon Beauty College (Phagans' Cosmetology Colleges)
 Phagans' Grants Pass College of Beauty (Phagans' Cosmetology Colleges)
 Phagans' Medford Beauty School (Phagans' Cosmetology Colleges)
 Phagans' School of Beauty (Phagans' Cosmetology Colleges)

Admissions Packet

Hello and thank you for your interest in attending our school! We want to help get you started so you can be considered for enrollment. Please make certain that you complete all forms in this packet and collect copies of all necessary documents to submit to the Admissions Office. *Due to State and Federal regulations we have very specific documentation requirements that need to be submitted. Please *see pages 4-5 of our Student Catalog and Handbook for reference.*

Clearly Print Your Full Name _____

Best Phone Number _____

Program Applying For _____

*ENROLLMENT DOCUMENTS TO SUBMIT:

ADMISSIONS ROAD MAP

Pre-Admission Workshop: ____/____ ____:____ am/pm

Persona/Financial Interview: ____/____ ____:____ am/pm

- Bring proof of education, age, identity and citizenship
- Bring your application (this helps answer questions before it's due)
- Bring your completed Estimated Budget Form from your application
- Have your FAFSA Completed
Or Bring in the necessary tax paper work

Final Visit: ____/____ ____:____ am/pm to ____:____ am/pm

- Enrollment Requirements Due
 - o proof of education, age, identity, citizenship
- Application Packet Due
- \$50.00 Application Fee (We do not accept cash payments)

Orientation: ____/____ ____:____ am/pm to ____:____ am/pm

- All Final Paperwork / Enrollment Requirements Due
- \$100.00 Enrollment Fee Due (We do not accept cash payments)

Done?	Due Date	Requirement	Resources / Why you may need it
		FAFSA to apply for Title IV Financial Aid	https://FAFSA.Ed.Gov/
		Application Packet Read Catalog/Handbook	http://www.phagans-schools.com/get-started/
		Proof of Age & Identity	Picture ID
		Proof of Identity	Social Security Card
		Education	Diploma / GED / Transcripts
		Proof of citizenship	Birth Certificate or US Passport or State Issued Real ID Act Driver's License
		Have you had a name change?	If your education has a different name than your ID or Social Security Card
		Do you want to attend Part Time?	Written reason why you will need to be part time, verification may be requested
		Have you had a Felony?	Call state board (HLO) 1-503-378-8667

Check-off the following after completion, collection and/or submission: *Please know that all Age, Identity, Citizenship and Education documents must be current/valid and the full names must match or be linkable together through other official documents that may be requested:*

- | | |
|--|--|
| <input type="checkbox"/> Application for Enrollment | <input type="checkbox"/> Proof of Education: HS Diploma, G.E.D., and/or High School Transcript with date of graduation |
| <input type="checkbox"/> Life Skills Essay | <input type="checkbox"/> Proof of Age: Driver's License, State ID Card or Birth Certificate |
| <input type="checkbox"/> Health & Safety Form | <input type="checkbox"/> Proof of Identity: Driver's License/Passport (photo) and copy of Social Security Card |
| <input type="checkbox"/> Estimated Budget Form | <input type="checkbox"/> Proof of Citizenship: Real ID Act State Driver's License and/or US Citizenship (or eligible non-citizen) docs |
| <input type="checkbox"/> College Visits: Personal & Financial Planning Interviews | |
| <input type="checkbox"/> Class Visitation & Complimentary Service (optional) | |
| <input type="checkbox"/> Pay Application Fee of \$50, via check, money order or credit card, this is non-refundable. | |

You will receive a response to your application within 10 business days from the deadline for submission date above. If you have any questions, please call any one of our admission representatives. We are here to assist you. We can be reached at the following numbers:

Bend 541.382.6171 ext. 2
Grants Pass 541.479.6678

Medford 541.772.6155
Corvallis 541.753.7770

Salem 503.363.6800



Application for Enrollment

Please **PRINT** clearly, all information must be legible. Fill out the following information completely, as it is necessary for our files, as well as those of the state and federal agencies.

Name: _____ Social Security # _____
First MI. Last

Previous Name(s): _____ Gender: Male __ Female __ Other __

Marital Status: Single ____ Married ____ Divorced ____ Widowed ____ Separated ____

Birth Date: Month _____ Day _____ Year _____ Place of Birth: City _____ State _____

Where are you residing/ whom are you living with: Parent ____ Self ____ Spouse ____ Friend ____ Relative ____

Permanent Address _____
City _____ State _____ Zip _____
Phone _____ Cell phone _____
Email: _____ Social Networking Page(s): _____

- Are you a U.S. Citizen? __Yes __No If no, what is your Alien Reg. # _____
- Are you an Oregon resident? __Yes __No How long have you lived in Oregon? _____
- Have you ever been convicted of a felony?: __Yes __No
 - o If Yes, it is your responsibility to discuss this with the admissions specialist as it may impact your ability to obtain a cosmetology license in the State of Oregon

Parent Information

Parent Name(s) _____
Address _____

Best Phone _____
Email _____

Spouse Information

Spouse Name _____
Address _____

Best Phone _____
Email _____

Personal Reference Information

Full Name _____
Best Phone _____
Email _____

Professional Reference Information

Full Name _____
Best Phone _____
Email _____

IN CASE OF EMERGENCY: who should we contact on your behalf?

Name _____ Best Phone _____

Recent/Current WORK HISTORY:

Employer _____ From _____ to _____ Phone _____
Employer _____ From _____ to _____ Phone _____

EDUCATION:

High School Diploma*: Yes or No If 'Yes': **Name of High School:** _____

** An online High School Diploma from a regionally accredited school or from a Oregon Dept of Education approved school may qualify. Please see the school admissions officer for details. An **Oregon Modified High School Diploma** will qualify. You will need to take and pass a GED test if you did not complete High School, or you have a Modified High School Diploma from another state, or an Oregon Extended High School Diploma or completed Home Schooling (if it wasn't provided by a regionally accredited online high school or authorized by the Oregon Dept of Education.)*

Date Received: _____ City, State of High School: _____ School Code: _____

GED Certificate: Yes or No Date taken: _____ Location: _____

Highest grade completed in High School: (Circle One) 9th 10th 11th 12th

ENROLLMENT INFORMATION:

When do you plan to enroll? _____

What course(s) are you interested in? (check all that apply)

Hair Design __ Barbering __ Esthetics __ Nail Technology __ Cadet Teacher __

POST SECONDARY EDUCATION:

Have you ever been enrolled in **Cosmetology College**? yes or no If yes, complete information below:

College Name _____

Street Address _____

City _____ State _____ Zip _____

Dates attended: from _____ to _____

How many **hours** did you complete? _____ *provide a transcript

Have you ever been enrolled in another type of **Trade School**? yes or no If yes, complete information below:

College Name _____

Street Address _____

City _____ State _____ Zip _____

Dates attended: from _____ to _____

Did you obtain a certificate or license? yes or no If yes, what type? _____

Have you ever been enrolled in **Community College**? yes or no If yes, complete information below:

College Name _____

Street Address _____

City _____ State _____ Zip _____

Dates attended: from _____ to _____

Did you obtain a degree? yes or no If yes, what was your major? _____

Have you ever been enrolled in a **University**? yes or no If yes, complete information below:

College Name _____

Street Address _____

City _____ State _____ Zip _____

Dates attended: from _____ to _____

Did you obtain a degree? yes or no If yes, what was your major? _____

I declare that the information reported on this form to be true, accurate and complete:

SIGNATURE _____

DATE _____



Essay & Life Skills Questionnaire

Write **one** essay. You may use additional paper if necessary. Please choose from the list of topics provided:

- What created the initial interest for you to consider a career in cosmetology?
- What steps have you taken to understand this industry and how long ago did you start the process?
- What are your goals and expectations once you graduate from Phagans?

Essay #1:

Life Skills Questionnaire: Please complete the following:

1. What plan have you implemented to secure yourself financially so that you can attend Phagans'?

2. How well do you respond to constructive feedback? Are you able to grow from constructive criticism?

3. We pride ourselves on fostering a culture that embraces our core values of respect, integrity, pursuit of knowledge, rapport and communication. On a scale of 1-5, how would you rate your skill set on these core values skills: 1 is not at all, 5 all the time:

I behave in a respectful manner even when I am frustrated: 1 2 3 4 5

I tend to do the right thing, even when no one is watching: 1 2 3 4 5

I make an effort to understand other points of view,
even though they may differ from mine: 1 2 3 4 5

I understand mistakes are opportunities for growth when learning: 1 2 3 4 5

I think before I speak, I take the feelings of others into consideration: 1 2 3 4 5

Applicant Name: _____ Date: _____

Health & Safety Form

Print Full Name: _____ Date of Birth: ____-____-____
First MI. Last

Physical Demands of the Cosmetology Industry:

A cosmetologist must have good hand eye coordination and be able to stand for long periods of time with limited leg movement. Nail Technologists and Estheticians require good finger dexterity and coordination, as well as have the ability to sit for long periods of time. All cosmetology professionals must be able to work long hours while building a clientele, enjoy working with the public and be able to follow directions. Developing the skills necessary to operate their own business is a crucial element in establishing a successful career. There are numerous physical and mental conditions that may limit the ability of an individual to overcome the demands of the industry. It is recommended that all persons consult with a physician in order to properly assess their mental and physical motivation, stamina and endurance prior to pursuing a career in the field of cosmetology. (The US Department of Labor states, "Good health and stamina are important because these workers are on their feet for most of their shift. Because prolonged exposure to some hair and nail chemicals may cause irritation, special care is taken to use protective clothing, such as plastic gloves or aprons. Most full-time barbers, cosmetologists, and other personal appearance workers put in a 40-hour week, but longer hours are common in this occupation, especially among self-employed workers. Work schedules may include evenings and weekends, when beauty salons and barbershops are busiest. Barbers and cosmetologists generally are busiest on weekends and during lunch and evening hours, therefore they arrange to take breaks during less popular times.")

Health Status: Do you have any medical conditions you would like to inform us of? Yes No

Medical Conditions:

List Medications taken for treatment:

Pregnancy: Are you pregnant? Yes No (If yes, you must fill out Pregnancy Release Form)

Vaccinations: Are all required inoculations (shots) current? Yes No

Students are highly encouraged to keep all vaccinations current. However, the school does not require proof of vaccinations for enrollment.

Reasonable Accommodation: Are you requesting any reasonable accommodation? Yes No

If Yes, please review the Reasonable Accommodation Plan Procedure, request form available in the administrative office.

Medical Emergency Contact:

Name of Physician: _____ Phone: _____

In case of a Medical Emergency, whom should we contact?

Name: _____ Phone: _____ Relation: _____

I understand that if any of the above information changes during my enrollment period I am responsible for notifying the Admissions Department and updating this form.

Applicant signature: _____ Date: _____



Estimated Budget Form

Print Full Name: _____ Desired Program: _____

Before enrolling in college, you need to analyze and budget for all expenses that you will incur during your enrollment period. The two main questions you need to answer are:

- How are you going to monetarily support yourself while you are enrolled at Phagans'?
- How are you going to pay for your education?

Expected Income Amount(s): Monthly

- Self \$ _____
- Parents \$ _____
- Spouse \$ _____
- Friend \$ _____
- Work/Job \$ _____
- Other \$ _____ (you may lose your unemployment benefits if you enroll in college)

Total Income: \$ _____

Expected Expense Amount(s): Monthly

- Housing \$ _____ (Rent /Mortgage, Property Taxes, Insurance)
- Utilities \$ _____ (Gas, Electric, Water, Phone, Garbage, Cable)
- Clothing \$ _____ (Purchases, Laundry, Dry Cleaning)
- Food \$ _____ (Groceries, Restaurants)
- Transportation \$ _____ (Auto/Bus, Insurance, Gas, Maintenance)
- Child Care \$ _____ (Daycare provider, Parents, Friends, School)
- Health Care \$ _____ (Medical Insurance, Prescriptions)
- Misc. \$ _____ (Personal Care, Entertainment, Other)
- Debt Pymts. \$ _____ (Credit card, Garnishment, Alimony, Child Support)
- College Pymts. \$ _____ (Amount you will be paying per month to college)
- Savings \$ _____

Total Expenses: \$ _____

Complete this section with the Financial Aid Administrator

Estimated Total Program Costs: \$ _____ .00 (Tuition, kits, books, uniform, manual)

Estimated Self Payments \$ _____ .00

Estimated Title IV* Grant Aid \$ _____ .00 (Pell Grants, SEOG)

Estimated Other Aid \$ _____ .00 (Scholarships, etc)

Estimated **Total non-debt Payments/Aid:** \$ _____ .00

*If your total program costs exceed your total non-debt payments/aid you may need to borrow money to attend college. It is not recommended that you borrow more than you need to pay for schooling costs. All funds, including Title IV Aid goes first towards paying for tuition, kits, books, and uniforms (ie direct college costs). A loan is money you pay back with interest over time. It is important that you research average wages in your area so that your debt to income payments are not more than you can afford. See 'Wages & Income' for cosmetology occupations at www.qualityinfo.org

Applicant signature: _____ Date: _____