



National Coalition of Estheticians,  
Manufacturers/Distributors & Associations



**VERIFICATION OF NCEA CERTIFIED STATUS**  
**PRINT IN BLOCK LETTERS**

<b>NCEA CERTIFIED PROFESSIONAL NAME:</b>		
<b>CERTIFICATION ID NUMBER:</b>		<b>EXP. DATE:</b>

Company Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_  
 Zip \_\_\_\_\_ + 4 \_\_\_\_\_ Country: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Tel Day: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_



**CANDIDATE STATEMENT:**

I, \_\_\_\_\_, achieved the NCEA Certified Credential on \_\_\_\_/\_\_\_\_/\_\_\_\_ with an expiration date of \_\_\_\_/\_\_\_\_/\_\_\_\_. I am requesting verification of my National Esthetician Certification for the state/company of \_\_\_\_\_.

**Candidate Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**NCEA Office – Please return this completed verification form to:**

Contact Person: \_\_\_\_\_  
 Full Name of Board/Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_ + 4 \_\_\_\_\_  
 Tel: Day: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

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**DO NOT WRITE BELOW THIS LINE – For NCEA Certified office use only**

**I HEREBY CERTIFY, that the above individual has completed the Candidate Requirements as set forth by the NCEA, and achieved a passing score on the National Esthetician Certification Examination.**

(seal)

**Susanne S. Warfield – Executive Director**  
 201-670-4100 • info@NCEACertified.org

## INSTRUCTIONS TO NCEA CERTIFIED PROFESSIONAL

Complete the Verification of Certification Form with your contact information and that of the state regulatory board/company that you are applying to.

NCEA will verify your NCEA Certified credential status, and return this notarized document directly to the state regulatory board/company via regular mail. If another method is required, please specify.

**BE ACCURATE, BE NEAT.** We cannot be responsible for errors due to illegible handwriting.

### VERIFICATION OF CERTIFICATION FEE:

**\$25.00**      Checks only made payable to NCEA Certified

### MAIL YOUR COMPLETED FORM TO:

**NCEA Certified  
Att: Verification of Certification  
484 Spring Avenue  
Ridgewood, NJ 07450-4624**

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484 Spring Avenue • Ridgewood, NJ • 07450  
201-670-4100 • [Info@NCEACertified.org](mailto:Info@NCEACertified.org) • [www.NCEACertified.org](http://www.NCEACertified.org)