



**<<EASED CANDIDATE APPLICATION >>**

**PRINT CLEARLY IN BLOCK LETTERS**

**CANDIDATE NAME:**

Company: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip \_\_\_\_\_ + 4 \_\_\_\_\_

Email: \_\_\_\_\_

Cell: (\_\_\_\_\_) \_\_\_\_\_



*"The NCEA Certified credential is awarded to those who have met the advanced training standards equivalent to a Master Esthetician license. Attaining the National Esthetician Certification is the highest credential in the United States—raising the standards of our profession beyond entry-level licensure. The NCEA Certified credential signifies the value and credibility for consumers in determining the expertise and training of an Esthetician." –<https://NCEACertified.org>*

**1. Candidate must have one of the following: \*ATTACH COPY OF DRIVERS LICENSE**

- a) Current ESTHETICIAN LICENSE (attach **notarized** copy)
- b) Current COSMETOLOGY LICENSE (attach **notarized** copy)
- c) LICENSED PROFESSIONAL (attach **notarized** copy)
- d) OTHER PROFESSIONAL with **Employer Recommendation**

\*Take Holographic Decal from shrinkwrap of Purchase.



2. Current **ONLINE** CPR/AED/First Aid Certification. (attach copy)

3. Current NCEA Individual Membership Certificate. (attach copy)

4. Current Proof of Insurance Certificate.\* (attach copy)

*\* Not currently working with clients? Attach **Statement of Professional Insurance***

5. Two (2) **passport**-size **professional** photos. **Print your full name on back of both photos.**

6. Knowledge Reviews (tear out of Training Manual and attach – **DO NOT TRIM EDGES**)

7. **Check made payable to NCEA Certified in the amount of \$175.00\*.**

\*Not Applicable if you are using **LOAN** or Payment Option 2 or Option 3  
See **STEP 1 – NCEACertified.org**

**CANDIDATE AUTHORIZATION STATEMENT:**

I authorize a review and verification of the enclosed documentation. I understand that I will receive my Authorization to Test (ATT) email, **only** if my records are complete.

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

**MAIL TO:** NCEA Records Verification, 484 Spring Avenue, Ridgewood, NJ 07450-4624