

**STATE OF NEBRASKA**

DIVISION OF PUBLIC HEALTH –Licensure Unit  
 P.O. Box 94986, Lincoln, Nebraska 68509-4986  
 Phone: 402-471-4359 E-Mail: inna.karpyuk@nebraska.gov

**FEE: \$30.00 (make payable to Licensure Unit)**

**REVIEW OF A CONTINUING  
 EDUCATION PROGRAM  
 COSMETOLOGY, ELECTROLOGY,  
 ESTHETICS, NAIL TECHNOLOGY**

<b>SECTION A – Applicant's Name and Address (Please <u>print</u> your name and full address)</b>		
First:	Middle:	Last:
Address:		
City:	State:	Zip

Program Category (check all that apply):

- Cosmetology
- Electrology
- Esthetics
- Nail Technology
- Instructor (must be a separate application)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Telephone Number: \_\_\_\_\_  
 (E-mail is for us to correspond with you, not for public purposes)

- Check the appropriate response(s):
- I am a licensee attending the program
  - I am the presenter of the program
  - I am the provider of the program

<b>SECTION B – Sponsor/Provider Information</b>			
1	Name of Sponsor/Provider:	Name:	
2	Address:	Street/PO/Route:	
		City:	State: Zip:

<b>SECTION C – Program Information</b>	
1	Name of Program:
2	Objective:  Describe how this program relates to the definition of the profession requested (specify objectives for each category requested)
3	Number of Clock Hours Requested for Approval (does <b>NOT</b> include time for breaks and meals):
4	Location of Program:
5	Date(s) of Program:

**BOARD DECISION:**

Approved \_\_\_\_\_ hours credit

Denied, Reason: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Signature of Reviewer) (Date)

**SECTION D – Program Agenda**

A copy of the program **agenda must be attached** to this request that includes the following information:

- Name of program
- Number of hours requested
- Start and end times of each subject
- Start and end time of all breaks and lunch/dinner
- Date(s) of program

**SECTION E - Method of Program Attendance Verification**

**Attach** a sample copy of the documentation the provider issues to licensees as **proof of attendance** at the program. This must include:

- Program name and number;
- Name of the participant and his/her license number;
- Provider's name;
- Date the program began and ended;
- Location, (City and State) of program;
- Number of hours for which the program was approved; and
- Category in which the program was classified.

Describe the record keeping process the provider uses to verify attendance by the licensees. (Records must be kept at least 3 years):

**SECTION F - Program Monitoring: Indicate the method for monitoring and verifying attendance**

- Sign-in/out sheet
- Monitor at the door
- Other, Explain: \_\_\_\_\_

**SECTION G – Presenter/Instructor Information**

**Presenter/Instructor #1:** (List below name, education, experience and/or training **that qualifies the individual to present this program**)

First/Middle/Last Name:			
License Information	License #:	Profession:	Guest Artist #:
	State of Licensure:		

**EDUCATION - Name of Educational Institutions:**

**EXPERIENCE - Type and Nature of Experience:**

**TRAINING - Name of Training Entities:**

**Presenter/Instructor #2:** (List below name, education, experience and/or training **that qualifies the individual to present this program**)

First/Middle/Last Name:			
License Information	License #:	Profession:	Guest Artist #:
	State of Licensure:		
<b>EDUCATION</b> - Name of Educational Institutions:			
<b>EXPERIENCE</b> - Type and Nature of Experience:			
<b>TRAINING</b> - Name of Training Entities:			

NOTE: This application may take 45 days to process from the date of receipt of this application. Please submit your application in a timely manner.

**Instructor, the 4 hours of mandatory continuing education must relate to teaching methodology.**

**Cosmetology, the 4 hours of mandatory continuing education must relate to the definition of cosmetology.** Cosmetology means the practice of performing for compensation:

1. Any or all of the acts of arranging, dressing, curling, waving, cleansing, cutting, bleaching, coloring, styling, or similar work upon the hair, wig, wiglet, or hairpiece of any person, by any means, with hands or a mechanical or electrical apparatus or appliance;
2. Esthetics;
3. Nail technology; and
4. Other similar practices upon the hair, scalp, face, neck, arms, hands, feet, or nails of any person when performed for the purpose of beautifying or enhancing physical appearance or the teaching of any practice specified in this section for occupational purposes.

**Electrology, the 4 hours of mandatory continuing education must relate to the definition of electrology.** Electrology means the art and practice relating to the removal of hair from normal skin of the human body by electrolysis.

**Esthetics, the 4 hours of mandatory continuing education must relate to the definition of esthetics.** Esthetics means the practice for compensation of using an electrical or mechanical apparatus or appliance or applying and using cosmetic preparations, antiseptics, chemicals, tonics, lotions, creams, or other similar products upon the skin for personal beauty care.

**Nail Technology, the 4 hours of mandatory continuing education must relate to the definition of nail technology.** Nail Technology means:

1. Attaching, applying, fitting, shaping, or adjusting artificial nails using acrylic, resin, fabric, or gel application systems,
2. Sanitizing of the nail bed by brushing on or spraying material in preparation for attaching, fitting, shaping, or adjusting artificial nails using acrylic, resin, fabric, or gel application systems,
3. Cutting, filing, buffing, shaping, trimming, polishing, coloring, tinting, cleansing, reshaping, or other cosmetic acts on the nails of a person when done in conjunction with the activities described in subdivisions (1) and (2) of this section,
4. The ability to detect infection, fungus, or nail disorders that contraindicate the application of artificial nails, and
5. Cleansing, stimulating, manipulating, exercising, or similar acts on the hands or feet of any person when done in conjunction with the activities described in subdivisions (1) and (2) of this section.

Nail technology does not include cutting nail beds, corns, or calluses or medical treatment involving the feet, hands, or nails.

**Advertisement of Approvals.** After the Board has granted its written approval of the application the provider may use the following statement: "This program is approved for \_\_\_ hours of continuing competency in the category of \_\_\_\_\_ by the Nebraska Board of Cosmetology Examiners."

In accordance with the division's records retention schedule, continuing education application materials will be disposed of after 30 days of the date of the approval letter.