

This form may be completed online, printed and mailed to the address listed below.



**STATE OF NEBRASKA**  
 Department of Health and Human Services  
 Regulation and Licensure - Credentialing Division  
 P.O. Box 94986 - Lincoln, Nebraska 68509-4986  
 Telephone #: 402-471-2399 (Susan Chocholousek)

**Examination Test Format Request**  
**Cosmetology, Electrology, Esthetician  
 Instructor, or Nail Technician**

(Please print or type)

**1. Check the license category below:**

- |  |   |
|--|---|
| <input type="checkbox"/> Cosmetologist   | <input type="checkbox"/> Cosmetology Instructor     |
| <input type="checkbox"/> Electrologist   | <input type="checkbox"/> Electrology Instructor     |
| <input type="checkbox"/> Esthetician     | <input type="checkbox"/> Esthetic Instructor        |
| <input type="checkbox"/> Nail Technician | <input type="checkbox"/> Nail Technology Instructor |

**2. Complete the following information:**

a.	Name:	First:	Middle/MI:	Last:
b.	Address:	Street/PO/Route:		
		City:	State:	Zip:
c.	Social Security Number:		d. Telephone Number (optional):	

**3. Indicate below your testing preference.**

**COMPUTER-BASED TESTING:**

Upon receipt of the Department's examination authorization letter, I understand that I must schedule my test date/site with LaserGrade and also pay \$70 directly to LaserGrade. (Do not send this fee to the Credentialing Division)

**PENCIL/PAPER TESTING:**

The applicant must enclose \$15.00 for the examination  
 Make payment to "Credentialing Division".

Indicate which date you wish to test:

	Examination Date 2005	Deadline
<input type="checkbox"/>	January 10	December 25, 2004
<input type="checkbox"/>	March 14	February 26
<input type="checkbox"/>	May 9	April 23

	Examination Date 2005	Deadline
<input type="checkbox"/>	July 11	June 25
<input type="checkbox"/>	September 12	August 27
<input type="checkbox"/>	November 14	October 29

This form and fee must be submitted (postmarked) by the examination deadline date for the pencil/paper test.

**4. All applicants must sign and date below.**

Applicant Signature	Date