



**VIRGIN ISLANDS BOARD OF BARBERS,  
BEAUTICIANS AND MANICURISTS**  
Department of Licensing and Consumer Affairs  
3000 Golden Rock Shopping Center, Suite 9  
Christiansted, VI 00820-4311  
(340) 773-2226  
(340) 713-8308 (Fax)  
[www.dlca.gov.vi](http://www.dlca.gov.vi)

Attach 3  
2x2 photos of  
Applicant here

## APPLICATION FOR EXAMINATION

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**Part I** In accordance with the provisions of Chapter 17, Title 27, Virgin Islands Code, which regulates the practice of Barbers, Beauticians and Manicurists in the U.S. Virgin Islands, I hereby apply for the following license to perform professional services in the U.S. Virgin Islands. Any person who practices or acts as a Barber, Beautician, Esthetician, Hair Braider or Manicurist without a valid license is in violation of Title 27VIC § 460, shall be liable to a fine not to exceed \$500.00 for each violation.

**TYPE OF LICENSE REQUESTED:**

- Apprentice     
  Temporary & Examination     
  Examination Only

**LEVEL OF LICENSURE REQUESTED: Please check one (1) of the following:**

- Barber     
  Beautician     
  Esthetician     
  Hair Braider     
  Manicurist

*\*Temporary license are not allowed for Esthetician and Hair Braider*

**Part II**

1. Full Name \_\_\_\_\_  
   First  Middle  Last
2. Mailing Address \_\_\_\_\_
3. Home Telephone (    ) \_\_\_\_\_
4. Business Telephone (    ) \_\_\_\_\_
5. Birth Date \_\_\_\_\_
6. Birth Place \_\_\_\_\_
7. Citizenship \_\_\_\_\_
8. Naturalized: (    ) yes       (    ) no
9. Social Security Number \_\_\_\_\_
- 9a. Email Address: \_\_\_\_\_
10. Virgin Islands Resident (    ) yes   (    ) no   If yes, how long? \_\_\_\_\_

11. Name of Shop where applicant will be employed \_\_\_\_\_  
 Employer's Name \_\_\_\_\_  
 Employer's Address \_\_\_\_\_
12. Are you currently licensed in another state? ( ) yes ( ) no  
 If yes, please indicate the state: \_\_\_\_\_
13. Has your license ever been revoked? ( ) yes ( ) no  
 If yes, please explain: \_\_\_\_\_  
 \_\_\_\_\_
14. Have you ever been censured for unprofessional conduct? ( ) yes ( ) no  
 If yes, please explain: \_\_\_\_\_  
 \_\_\_\_\_
15. Have you ever been convicted of a felony? ( ) yes ( ) no  
 If yes, please explain: \_\_\_\_\_  
 \_\_\_\_\_

**Part III To be completed by applicants applying for a temporary license or examination only.**

16. **REFERENCES:** Please provide two (2) professional references from licensed professionals in the respective field and one (1) character reference in the space provided below. Please note that the reference letters must correspond with the names listed below and should be persons other than Board Members and relatives of the applicant.

Name	Address	Telephone Number
1.		
2.		
3.		

**Part IV**

17. **Education:** (Please list in chronological order, beginning with most recent)

Name and Address of Institution	Attendance From      To	Technical Course	Graduation	Degree Received

18. **TRAINING AND EXPERIENCE:** (Please list in chronological order your professional training & practical experience) Use additional sheets if necessary, following the same format or attach resume.

From      To	Name, Address and Phone # of Employer	Name of Immediate Supervisor	Job Title Job Description

**Part V**

**AFFIDAVIT  
(Must be completed by all applicants)**

State of \_\_\_\_\_

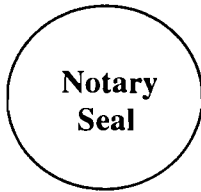
Territory of \_\_\_\_\_

Country of \_\_\_\_\_

I, \_\_\_\_\_, being duly sworn, depose and say that I am the person who executed the foregoing instrument; that I have read the same and know the contents thereof; that the matters stated therein are true to my knowledge; that I have not suppressed any information that might affect this application; and that I have read and understand this affidavit.

\_\_\_\_\_  
Applicant's Signature

Sworn and Subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.



\_\_\_\_\_  
Notary Public

My Commission expires on \_\_\_\_\_

Do not write below this line:

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**BOARD DISPOSITION:**

Application Approved:     YES             NO             PENDING

\_\_\_\_\_  
**Signature, Chairman of the Board**

**Date:** \_\_\_\_\_

\_\_\_\_\_  
**Member**

\_\_\_\_\_  
**Member**

\_\_\_\_\_  
**Member**

\_\_\_\_\_  
**Member**

\_\_\_\_\_  
**Member**

\_\_\_\_\_  
**Member**



## **VIRGIN ISLANDS BOARD OF BARBERS, BEAUTICIANS AND MANICURISTS**

### **LICENSING REQUIREMENTS**

**PURPOSE OF LICENSURE:** To set standards of qualifications, education, training and experience for persons engaged in the fields of Barbering, Cosmetology, Esthetics, Hair braiding and Manicuring. To promote high standards of professional performance for those persons working in the profession. To ensure that everyone engaged in work in the profession is duly licensed.

**PERIOD OF LICENSURE:** All permanent licenses are issued on an annual basis. Temporary Licenses are issued for three (3) months.

**EXAMINATION:** All persons interested in becoming a licensed Cosmetologist, Barber, Manicurist or Esthetician in the Virgin Islands are required to sit a written and practical examination. The examination is administered in February, July, and October of each year. The examination fee is \$200.00 for the theory and \$100.00 for the practical.

#### **APPLICATION PROCESS:**

#### **REQUIREMENTS FOR TEMPORARY AND PERMANENT LICENSES:**

1. Completed and notarized application, which may be obtained from the Office of Boards and Commissions at the Department of Licensing and Consumer Affairs.
2. Three (3) 2x2 photographs of applicant.
3. Two (2) professional references.
4. One (1) character reference.
5. Official school transcript identifying number of hours completed in respective field.
6. Valid Health Card.
7. Verification of License from another state.
8. Non-refundable application fee of \$50.00.
9. Payment of Required Fee.

#### **REQUIREMENTS FOR AN APPRENTICE LICENSE:**

1. Completed and notarized application, which may be obtained from the Office of Boards and Commissions at the Department of Licensing and Consumer Affairs.
2. Three (3) 2x2 photographs of applicant.
3. Valid V.I. Health Card.
4. Non-refundable application fee of \$50.00
5. Letter from a licensed cosmetologist, barber or manicurist whose direction, supervision and training apprentice will be working under in the respective field.
6. Payment of required license fee.

**REQUIRED HOURS:** The following hours are required for permanent licensure in the respective fields.

<b>COSMETOLOGY</b>	<b>1500 HOURS</b>
<b>BARBER</b>	<b>500 HOURS</b>
<b>MANICURIST</b>	<b>500 HOURS</b>
<b>ESTHETICIAN</b>	<b>600 HOURS</b>
<b>HAIR BRAIDING</b>	<b>250 HOURS</b>

**RENEWAL OF LICENSE:**

In order to renew both a professional and/or a business license, the licensee must visit the Department of Licensing and Consumer Affairs' (DLCA) website, [www.dlca.vi.gov](http://www.dlca.vi.gov), and provide the following:

1. Apply at DLCA's website, [www.dlca.vi.gov](http://www.dlca.vi.gov), and register or login. Input or verify the required information, choose your payment option, and obtain a reference "control" number.
2. Electronic Tax Approval from the V.I. Bureau of Internal Revenue.
3. Payment of required License fees.

**License Fees:**

**REQUIRED LICENSE FEES:**

<b>APPLICATION FEE</b>	<i>Non-refundable</i>	<b>\$50.00</b>
<b>BEAUTICIAN</b>		<b>\$ 65.00</b>
<b>BARBER</b>		<b>\$ 65.00</b>
<b>MANICURIST</b>		<b>\$ 97.50</b>
<b>ESTHETICIAN</b>		<b>\$130.00</b>
<b>HAIR BRAIDING</b>		<b>\$130.00</b>
<b>APPRENTICE</b>		<b>\$ 39.00</b>
<b>TEMPORARY LICENSE</b>		<b>\$ 13.00</b>
<b>BEAUTY SALON</b>		<b>\$ 97.50</b>
<b>BARBER SHOP</b>		<b>\$ 97.50</b>
<b>MANICURIST SALON</b>		<b>\$130.00</b>
<b>INITIAL SHOP LICENSE</b>		<b>\$195.00</b>
<b>COSMETOLOGY SCHOOL</b>		<b>\$260.00</b>

**WEBSITE:**

[www.dlca.vi.gov](http://www.dlca.vi.gov)

## MAILING ADDRESSES

**ATTENTION: NATHALIE HODGE**                      **Email: [nathalie.hodge@dlca.vi.gov](mailto:nathalie.hodge@dlca.vi.gov)**  
**ASSISTANT COMMISSIONER**  
**BOARDS AND COMMISSIONS**

### ST. CROIX

V.I. Board of Barbers, Beauticians and Manicurists  
Department of Licensing and Consumer Affairs  
3000 Golden Rock Shopping Center, Suite 9  
Christiansted, VI 00820-4311  
(340) 713-DLCA(3522) phone  
(340) 718-6908 fax

### ST. THOMAS

V.I. Board of Barbers, Beauticians and Manicurists  
Department of Licensing and Consumer Affairs  
Property & Procurement Bldg.  
No.1 Sub Base,  
St. Thomas, VI 00802  
(340) 714-DLCA(3522) phone  
(340) 776-8303 fax

### BOARD MEMBERS

Ada Brooks, Chairman  
Nora Williams, Vice-Chairman  
Gerian James  
Luz Luis  
Judith Hobson

### BOARDS AND COMMISSIONS ADMINISTRATIVE STAFF CONTACT INFORMATION:

**ST. CROIX:** Glorivee Santana [glorivee.santana@dlca.vi.gov](mailto:glorivee.santana@dlca.vi.gov) Ext. 3251  
Genitha Jean-Baptiste [genitha.jeanbaptiste@dlca.vi.gov](mailto:genitha.jeanbaptiste@dlca.vi.gov) Ext. 3252

**ST. THOMAS:** Karleen Jeffers [karleen.jeffers@dlca.vi.gov](mailto:karleen.jeffers@dlca.vi.gov) Ext. 4251  
Tiffany Grosvenor [tiffany.grosvenor@dlca.vi.gov](mailto:tiffany.grosvenor@dlca.vi.gov) Ext. 4252

*Revised 06/18 by the Office of Boards and Commissions*