

North Carolina Board of Cosmetic Art Examiners  
[nccosmo@nccosmeticarts.com](mailto:nccosmo@nccosmeticarts.com)  
919-736-6123  
[www.nccosmeticarts.com](http://www.nccosmeticarts.com)



**CONTINUING EDUCATION EXEMPTION FORM**  
**(20 Years' Experience Exemption)**

This exemption form must be completed and returned to the Board for approval and exemption from the CE requirement.

Current name \_\_\_\_\_

Past/Maiden name(s) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Email Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

**Exemption Requirements:**

A licensed cosmetologist in active practice with at least 20 consecutive years of experience as a cosmetologist.

License Number \_\_\_\_\_

Date of Birth \_\_\_\_\_

I, \_\_\_\_\_, certify that the information provided above on this form is true and correct, and as of the date below, I: (i) am a licensed cosmetologist; (ii) am in active practice as a cosmetologist; and (iii) have 20 or more **consecutive** years of experience as a cosmetologist (iv) am aware in the future I may be required to submit proof of my work experience.

This the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_. Signature \_\_\_\_\_

To upload this completed form directly to the Board follow these instructions:

Login at [www.nccosmeticarts.com](http://www.nccosmeticarts.com)

**Login Tips:**

- use only the numeric portion of your license number e.g. 123456)
- (The pin number for personal renewals is the last four digits of the licensee's social security number.)

Then click Individual Document Upload

For Board Use Only:

Approved	
Denied	
Date	
Initials	