

Instructor Application Form
The Washington County School of Esthetics

Student Information

Name: _____
Address: _____ Email: _____
City/State/Zip: _____ Phone: _____
Cell: _____
Birth Date: _____

How were you referred to the Washington County School of Esthetics? _____

Why do you want to become an Instructor? _____

150 Hour Instructor Program Please write down anticipated class start date: _____

Fees due:

- A nonrefundable Application fee of \$20 is due now to submit the application for review.
- An additional non-refundable Registration Fee of \$150 will hold your space in the next class session.
- \$500 is due 30 days before the anticipated start date and the completed course contract.
- The remaining balance of tuition is due on or before the first day of class.

I have received a copy of the Instructors Course Catalog and Refund Policy for the Instructor Course. Initial below:

Refund Policy

The Registration Fee of \$150 and the Application Fee of \$20 is nonrefundable. **An additional early withdrawal fee of \$150 applies to all refunds.**

No Refunds

For all students whose enrollments ends on or after your first day of class and prior to your graduation:

- You are required to repay any financial institution you owe money to and any unpaid balance or charges due because of the days/accrued while you were enrolled.
- **There are no refunds for enrollments in the Instructors course, that end on or after the first day of class and prior to your graduation.**
- If you are unable to attend class due to illness or other event, you may transfer to another class if class openings are available.

My signature implies that the information above is correct.

Applicant's Signature: _____ Date: _____

Interviewer/Instructor's Signature: _____ Date: _____

The Washington County School of Esthetics
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Slinger WI 53086
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