



Essence Institute Inc.

Application Form

Please Check:

_____ Hairstyling _____ Nail Technology _____ Esthetics _____ Make Up

Student's Name: _____

Address: _____

City: _____ **Province:** _____ **Postal Code:** _____

Home Phone: _____ **Work Phone:** _____ **SIN#:** _____

Email address: _____

Birth day: _____ **Male:** _____ **Female:** _____ **Age:** _____

Marital Status: _____ **Children:** _____

Education: (Highest Grade Completed): _____
(Minimum Requirement: Grade 12, Level 3, or GED)

Do you have any previous training or experience in Beauty Culture, Esthetics, Aromatherapy, etc.?

Do you have any allergies? _____

Is there anything else that the school should be made aware of? Please explain.

Next of Kin: _____

Next of Kin Address: _____

Next of Kin Home Phone: _____ **Business:** _____

Available Start Date: _____

How did you hear about Essence Institute Inc? _____

<p>FOR OFFICE USE ONLY</p> <p>Date Application Received: _____</p> <p>Comments _____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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