

Arkansas Department of Health  
 Body Art Section  
 4815 West Markham, Slot 8  
 Little Rock, AR 72205  
 501-682-2168

# Artist Trainer Application

The following is required:

- Must be licensed five (5) years in the specified field of body art in which you will offer training
- Must have worked in a body art establishment licensed by the Department for at least five (5) years
- Must have completed the required course under § 17-26-606
- Must be registered as an instructor for the specified field of body art
- Non-Refundable fee of \$100.00

First Name		Middle Name		Last Name		Social Security Number		
Address			City		State	Zip Code	Phone Number	
Date of Birth	Gender		Race					
	MALE	FEMALE	Black	White	Am. Indian	Hispanic	Asian	Alaskan Native
Trainer license number	<b>Email Address (REQUIRED – all correspondence sent from the Section regarding your examination will be sent via email)</b>							
Facility license number	Name of Facility							
Address of Facility								
Type of training provided								

By signing this application, I certify that the information provided above is true and accurate. Further, I understand that any false statements will be sufficient grounds for the Cosmetology Technical Advisory Committee to take disciplinary action.

Applicant's Signature	Today's Date
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