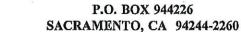
Consumer

03B-125 (Rev. 8/94)

# BOARD OF BARBERING AND COSMETOLOGY



INFORMATION: (916) 445-7061 (916) 445-7008



This information is required by provisions of the Barbering and Cosmetology Act and Rules and Regulations of the Board of Barbering and Cosmetology. All items are mandatory. Failure to provide any of the requested information may result in the application being rejected as incomplete. This information is used to determine qualifications for use of an interpreter or interpreter/model. The official responsible for information maintenance is the Executive Officer of the Board of Barbering and Cosmetology. This information may be transferred to another governmental agency, such as a law enforcement agency, if necessary for it to perform its duties. Each individual has the right to review the files or records maintained on him or her by this agency, unless the records are exempted by Section 1798.40 of the California Civil Code.

### REQUEST FOR USE OF AN INTERPRETER OR INTERPRETER/MODEL

(Pursuant to Section 931 of the Board's Rules and Regulations, Title 16, California Code of Regulations)

#### FORM G

# THIS FORM MUST BE COMPLETED BY THE APPLICANT ONLY

Applicant's Name	(First, Middle, Last)	a			2. Phone Number	
Y NATIVE LANGU	AGE IS:				-	
Residence Address	Number and Street	City	Sta	te	Zip Code	
I will be taking the fol	lowing parts of the examination:	Check One√	Practical	Writter	Both 🗆	-
Applicant's * Birth De	te (Month/Day/Year)	6. Soc	ial Security Num	ber (Optional		
I hereby state that I:					·	
Am unable to sp	peak, read or write the English langu	age (or Spanish, if appl	icable) at a 10th	grade level.		
use Understand it is	my own responsibility to obtain the	interpreter or interpret	er/model.			0.0
portions of the output of the follower of employees of	n use an interpreter only in the writt examination. nnot use a particular interpreter or i cleannot use an interpreter or interp wing: Students in any branch of Bar f any school of Barbering, Cosmetolo interpreter or interpreter/model MUS	nterpreter/model if they preter/model if they are bering, Cosmetology, o pgy or Electrology.	/ have acted in e under 15 years o or Electrology in	ither of these of age or if the this state or a	capacities within the past TW ey are currently or have been f any other state, apprentices, or	/O yea
May not be coa	ched by the interpreter or interpreter	/model during any part	of the examinat	on.		
understand that	t the Board may tape record the inte	rpreting of the written	part of the exam	nation.		
Interpreter's Name	(First, Middle, Last)	Check	(One ✓ Int	erpreter	Interpreter/Model	
Interpreter's * Birth D	ate (Mo/Day/Year)   10. Socia	al Security Number (O	otional)	11. Interp	reter's Phone Number	
2. Signature of th	ne Applicant	8 2			13. Date	
1.	NOTE: * Birth	Date is used only to d	stinguish the car	didates.		
Attach the following	items to the "Application for Examin	ation" FORM G	FORM H	TWO	IDENTICAL PHOTOS	
The state of the s		FOR OFFICE USE	ONLY	-		A CONTRACTOR AND ADDRESS OF THE PERSON NAMED IN COLUMN 1

# THIS FORM IS TO BE COMPLETED BY THE INTERPRETER OR INTERPRETER/MODEL

FORM H

(THIS FORM MUST BE ACCOMPANIED BY TWO IDENTICAL FRONT VIEW PHOTOS OF THE INTERPRETER OR INTERPRETER/MODEL, THE SIZE OF THE PHOTO SHOULD BE 1½" x 1½", AND SIGNED BY THE INTERPRETER OR INTERPRETER/MODEL)

THE SIZE OF THE PHOTO SHOULD BE 1/2 X 1/2, AND SIGNED BY THE INTER

	Interpreter's Name	(First, Middle,Last)		2.Birth Date* (N	□ Interpreter □ Interpreter/Model					
4.	Interpreter's Address	Number and Street City	State	Zlp Code	5. Check One√ □ Male □ Female					
	"I declare under penalty of perjury under the laws of the State of California that the following is true and correct."  I have not acted as an interpreter or interpreter/model in any examination given by the Board of Barbering and Cosmetology within the 2 years preceding the date of signature.  I am at least 15 years of age.  I am not or never have been any of the following:  a student in any school of barbering, cosmetology, or electrology.  a licensed apprentice, barber, cosmetologist, electrologist, cosmetology or barber instructor, junior operator, junior electrologist, electrology instructor, esthetician, or manicurist.  an owner or employee of any school of barbering, cosmetology or electrology.  I will not coach the applicant during any part of the examination.  I AM FLUENT IN ENGLISH AND THE NATIVE LANGUAGE OF THE APPLICANT  Understand that the Board may tape record the interpreting of the written part of the examination.									
6.	Signature of the in	terpreter or interpret	er/model		Date (Mo/Day/Year)					
7.	This form was complete	d and signed at the follow	ving address: (Number, Stree	t, City, State)						
03	3A-126 (Rev. 8/94)				Side No. 1					

# 

Name of interpreter Interpreter/Model:	App. No.	
Applicant Name	Exam Date	
Records Check	Exam Location	
Type of I.D.	TEST SCORES	•
Number I.D.	WRITTEN	
Birth Date	PRACTICAL	
	TOTAL	

#### IMPORTANT NOTICE:

This authorization must be presented along with the admission letter at the time of the examination. The services of an Interpreter or Interpreter/Model WILL NOT be allowed without this authorization AND valid government issued photographic I.D. The following will be accepted: (1) a photographic driver's license (California or out-of-state), (2) passport, (3) CURRENT photographic alien registration, or (4) California photographic I.D. card available from the Department of Motor Vehicles.

NOTE: \* Birth Date is used only to distinguish interpreters or interpreter/model

Side No. 2