

Academy di Firenze
149 West Main Street , Jerome, Idaho 83338 208-644-1546
APPLICATION FOR ENROLLMENT 2013

Last Name: _____ First Name: _____ M.I. _____

Address: _____
Physical Street Address City State Zip

Phone: _____ Alternate Phone: _____ Email: _____

Social Security #: _____ Date of Birth: _____ Place of Birth: _____

Name of Parent or guardian or spouse: _____

Address: _____
Street City State Zip

Are you a high school graduate? YES { } School's Name _____
If NO { } You must have schools transcripts showing you completed the 12th Grade or a GED.

Have you ever been enrolled in a Cosmetology College? Yes { } No { }

Name of School: _____

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Reason for leaving: _____

List all other schools you have attended: _____

Check the anticipated date for beginning school in 2012.

Circle Class Interested in: Cosmetology Nail Technology Esthetics Instructor Training

Jan 8 { } Feb 12 { } Mar 12 { } April 9 { } May 14 { } June 11 { }
July 9 { } Aug 13 { } Sept 10 { } Oct89 { } Nov 12 { } Dec 10 { }

* I have received a catalog from Academy di Firenze prior to signing my enrollment application.
Check One: _____ Yes _____ No

Signature of Student: _____ Date: _____

Complete the application and include the following:

*This should be turned into the school 5 days prior to class start date.

*Enrollment fee of \$100.00 (This will hold your place in the class as classes are limited)

*Student registration fee of \$20.00

Copy of high school diploma, or high school transcripts showing graduation of 12th grade, or copy of GED

Copy of birth certificate or copy of current driver's license

Two passport photos

*Catalog includes completion, licensure and job placement rates of the school as well as refunds and state required info.