

**NEW YORK**  
**I NSTITUTE of B EAUTY**

**Application for Enrollment**

*Congratulations on your decision to enter the dynamic, exciting and growing beauty industry. Please fill out the form below and include a deposit of \$100.00 to reserve your seat in one of our State Board courses. Please mail all deposits to our Corporate Headquarters, New York Institute of Beauty, 11 Oval Drive, Suite 180, Islandia, NY 11749.*

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Social Security#:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Course:** \_\_\_\_\_

**Please circle one:**

**1.) Suffolk County Campus**

11 Oval Drive, Suite 180  
Islandia, NY 11749  
**631-582-4737**

**2.) Nassau County Campus**

6800 Jericho Turnpike, Suite 211W  
Syosset, NY 11791  
**516-921-NYIB (6942)**

**Please circle one:**

1.) Full-time Day    2.) Part-time Day    3.) Part-time Eve

**Please circle one:**

1.) High School Graduate    2.) GED Equivalent

3.) Ability to Benefit Test - given at

NEW YORK I NSTITUTE of B EAUTY

**Preferred Start Date:** \_\_\_\_\_

**Total Cost of Chosen Course:** \_\_\_\_\_

*Licensed by New York State Education Department*