



# Minnesota Board of Cosmetologist Examiners

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## Course Completion Certificate

After reviewing and signing this Course Completion Certificate with your designated school manager or course provider, submit the original document with your licensure application to the BCE office. This form may not be altered after it is signed and notarized. Any portions of this certificate that are not applicable may be left blank. Any inaccurate information will result in a delay in licensure.

### Applicant Information

Name: \_\_\_\_\_  
 Birth Date: \_\_\_\_\_ SSN: \_\_\_\_\_

### School or Course Provider Information

Name: \_\_\_\_\_  
 Location: \_\_\_\_\_

### Course Information

Total Hours Completed: \_\_\_\_\_  
 Date Hours Completed: \_\_\_\_\_

- Course Type:  1550 hour Cosmetologist Training  155 hour Cosmetologist Refresher Course  
 600 hour Esthetician Training  60 hour Esthetician Refresher Course  
 350 hour Nail Technician Training  35 hour Nail Technician Refresher Course  
 Practical Skills Test Only

### Practical Skills Test Results

Hair Care Segment	Date Passed	Total Score	Passing Score
Shampoo & Layered Haircut			33/43
Styling with Curling Iron			14/18
Styling with Flat Iron			14/18
Styling with Styling Brush			14/18
Styling with Round Brush			14/18
Foil			13/17
Color Retouch			20/26
Virgin Relaxer			20/26
Permanent Wave			15/20

Skin Care Segment	Date Passed	Total Score	Passing Score
Eyebrow Wax			24/32
Facial			18/24
Makeup Application			16/21

Nail Care Segment	Date Passed	Total Score	Passing Score
Manicure			24/31
Artificial Nail Application			30/37

Name of Examiner: \_\_\_\_\_  
 If there were multiple, please list each and specify which sections each examined.

### Number of Services Completed

List exact number of services completed. This section is not required for refresher course students.

Service	Completed	Required
Shampooing		300
Scalp/Hair Conditioning		150
Hair Design Shaping		75
Chemical Hair Control <small>Includes 6 chemical relaxers</small>		60

Service	Completed	Required
Hair Coloring		50
Hair Styling		300
Facials and Makeup		60
Manicuring <small>Includes 10 artificial, of which 3 are sculptured.</small>		50

### Certification of Information

The student and Designated School Manager must provide notarized signatures below. If the course and Practical Skills Test were taken with a non-school provider, the course provider must sign instead of a Designated School Manager.

#### Student Certification

I certify, under penalty of MN 155A.33, Subd. 4-6, I have passed the Practical Skills Test with the scores above and all information provided on this form is true and accurate.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### Designated School Manager or Course Provider Certification

I certify, under penalty of MN 155A.33, Subd. 4-6, that the student listed on this form has passed the Practical Skills Test with the scores above and that all information shown on this form is true and accurate.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Notary Certification

This instrument was acknowledged before me on \_\_\_\_\_ by \_\_\_\_\_ and \_\_\_\_\_.  
(date) (printed name of student) (printed name of DSM or course provider)

Signature: \_\_\_\_\_ Commission Expiration: \_\_\_\_\_ Notary Seal: