



Michael L. Parson
Governor
State of Missouri

Sarah Ledgerwood, Interim Division Director
DIVISION OF PROFESSIONAL REGISTRATION

Missouri Department of
Commerce & Insurance
Chlora Lindley-Myers, Director

BOARD OF COSMETOLOGY AND BARBER EXAMINERS
3605 Missouri Boulevard P.O. Box 1062
Jefferson City, MO 65102-1335
573-751-1052
866-762-9432 Toll Free
573-751-8167 FAX
800-735-2966 TTY
800-735-2466 Voice Relay Missouri

Brittany Tomblinson
Executive Director
cosbar@pr.mo.gov
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SCHOOL'S RESPONSIBILITY

****ONCE APPROVED THE BOARD WILL SEND AN APPROVAL LETTER**

Distance Education: A formal instructional process in which the student and teacher are separated by physical distance and a variety of communication technologies are used to deliver instruction in theory to the student. Courses taught by distance education do not satisfy the requirements of the practical portion of the course curriculum.

- A school must properly account for the distance education hours granted and reported for each student.
- A school shall not engage in any act directly or indirectly that grants or approves student credit that is not accrued in accordance with Chapter 328 OR 329.
- A school must maintain all relevant documents that account for a student's accrued hours.
- A school must maintain the verification method used for tracking student attendance and time for distance education

Note:

*Distance Education hours are the only form of hours which can be completed without the presence of an instructor. If a student accrues hours by clock or credit, only the time system for distance education hours should be used to eliminate the possibility of duplicate credit for students.

*Distance Education is only approved during the duration of Executive Order 4 — Easing Regulatory Burdens During State of Emergency signed on March 18, 2020.

*The max hours approved during for Distance Education is twenty five (25) percent of the course hours.



STATE OF MISSOURI
 DIVISION OF PROFESSIONAL REGISTRATION
DISTANCE EDUCATION PROGRAM APPLICATION -
PURSUANT TO EXECUTIVE ORDER 20-04 (COVID-19)

BOARD OF COSMETOLOGY AND BARBER EXAMINERS
 P.O. BOX 1062
 JEFFERSON CITY, MO 65102
 (573) 751-1052

INSTRUCTIONS

PLEASE COMPLETE THE INFORMATION BELOW AND RETURN THIS FORM TO:

BOARD OF COSMETOLOGY AND BARBER EXAMINERS
 P.O. Box 1062
 Jefferson City, Missouri 65102
 573.751.8167 Fax
 cosbar@pr.mo.gov

NAME OF SCHOOL	SCHOOL LICENSE NUMBER
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SCHOOL ADDRESS

City State Zip Code

CONTACT PERSON FOR THE DISTANT LEARNING PROGRAM

CONTACT PERSONS NAME	PHONE NUMBER	EMAIL ADDRESS
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INDICATE WHAT COURSE(S) TO BE OFFERED BY SCHOOL THROUGH DISTANCE EDUCATION

<input type="checkbox"/>	Class CA - hairdressing and manicuring (MAX of 375 hours of 1500 hours)	<input type="checkbox"/>	Class CH - hairdresser (MAX of 375 hours of 1500 hours)
<input type="checkbox"/>	Class CA - hairdressing and manicuring (MAX of 305 hours of 1220 hours)	<input type="checkbox"/>	Barber (MAX of 250 hours of 1000 hours)
<input type="checkbox"/>	Class E - estheticians (MAX 188 hours of 750 hours)	<input type="checkbox"/>	Class MO - manicurist (MAX of 100 hours of 400 hours)
<input type="checkbox"/>	Cosmetology Instructor (MAX 150 hours of 600 hours)	<input type="checkbox"/>	Cross-over:
<input type="checkbox"/>	Currently Licensed Cosmetologist (MAX 12 hours of 45 hours)	<input type="checkbox"/>	Currently Licensed Baber (MAX 125 hours of 500 hours)

Submit the following for review:

- The type of Delivery Method which will be used
- The type of Technology or Program which will be used
- The type of method which will be used for tracking student attendance including hours completed
- Outline indicating the portion of course hours which will be completed by distance education hours

AUTHORIZATION AND RESPONSIBILITY STATEMENT

Upon signing this application I hereby authorize the Board of Cosmetology and Barber Examiners or their representative to verify this application and conduct a background investigation. Pursuant to Section 328.150 and 329.140 RSMo, all information contained herein is true and correct to the best of my knowledge and belief. As the holder of a school license issued by the Board of Cosmetology and Barber Examiners I acknowledge that I have read, fully understand, and agree to abide by Chapter 328 and 329 of the Revised Statutes of Missouri, and all Rules and Regulations promulgated therefrom.

PRINTED NAME OF OWNER	SIGNATURE OF OWNER	DATE SIGNED
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