

Application for the Education and Certification Programs as a Geo Palette Hair Color Artist/ Cosmotology Student Advocate



Date _____

PERSONAL INFORMATION

Name (first, middle, last) _____ Date of Birth _____

Mailing Address _____ City, State, Zip _____

Home Phone _____ Cell Phone _____ Sex M F

Email Address _____

Physical challenges and special needs _____

What got you started in hair? _____

Describe what the Geo Palette means to you.

COSMETOLOGY SCHOOL INFORMATION

Full time or night student? _____

When do you graduate? _____

Name of school _____

Address _____ City, State, Zip _____

Name and contact information of school director _____

Do you presently work in a salon? _____ Is it departmentalized? _____

Is your current salon departmentalized? _____

In what do you want to specialize? _____

What are your special interests and goals? _____

Where do you see yourself in five years? _____

SALON INDUSTRY EDUCATION/EXPERIENCE PERTAINING TO HAIR COLORING

What experience do you have with hair coloring? _____

What is the length of time? _____

What color lines are you familiar with? _____

What further professional education have you had in color theory, color usage, and hair coloring techniques? _____

The Geo Palette Academy and Geo Palette Salon
158 Carman Road, Dix Hills, NY 11746 / 956 Broadway, Woodmere, NY 11598
For more information, visit www.geopalette.com

516.374.1490

