

APPLICATION

204 North Penelope Street Suite F1 Belton, TX 76513 (254) 581-5995 | HAUTINSTITUTE@GMAIL.COM

Personal Information		
Full Name:		
Date of Birth:	Phone:	
Email:		
Address:		
City: State:	Zip:	Country:
Are you a U.S. Citizen? Yes No		
If no, are you an eligible citizen?		
What is your gender?		
Alien Registration Number:		
Driver's License Number:		State:
Age: Marital	Status:	
Emergency Contact		
Full Name:		
hone: Relationship:		
Education History		
What is your highest level of education? High School Transcript GED ATB College Other		
School Attended:		
Street Address:		
City: S	tate: 2	Zip Code:
When did you graduate?		



Education History		
Reference First and Last Name:		
Reference Phone Number:		
I have received, downloaded, or have printed out the Course Catalog.		
□ I verify that the above information is true and correct to the best of my knowledge. I also understand that if my application is accepted, I have adequate transportation, day care arrangements and I will complete my program. Providing false information will result in immediate termination.		
Education Preferences		
Which Advanced Course are you interested in?		
○ Spray Tan ○ Microneedling & Dermaplaning ○ intimate Bleaching		
How did you hear about Haut Institute of Esthetics?		
To finalize your application, please submit the following to hautinstitute@gmail.com		
 Birth Certificate ID or Driver's License Active Cosmetology or Esthetician License 		
Signature:		
Date:		
SEND COMPLETED APPLICATION TO: HAUTINSTITUTE@GMAIL.COM		
CAN BE DROPPED OFF IN PERSON: 204 NORTH PENELOPE STREET SUITE F 1 BELTON, TX 76513		

MONDAY THROUGH THURSDAY 9:00AM-9:00PM