

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:

Country:

Are you a U.S. Citizen? Yes No

If no, are you an eligible citizen? Yes No

What is your gender? Female Male Other Prefer not to answer

Alien Registration Number:

Driver's License Number:

State:

Age:

Marital Status:

Emergency Contact

Full Name:

Phone:

Relationship:

Education History

What is your highest level of education?

High School Transcript GED ATB College Other

School Attended:

Street Address:

City:

State:

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 course are you interested in?

- Esthetician Esthetician/Laser Lash Extensions

When would you like to start?

- May 5, 2025 June 2, 2025 June 30, 2025 July 28, 2025
 Aug. 25, 2025 Sept. 22, 2025 Oct. 20, 2025 Nov. 17, 2025

How did you hear about Haut Institute of Esthetics?

Signature: _____

SEND COMPLETED APPLICATION TO: HAUTINSTITUTE@GMAIL.COM

CAN BE DROPPED OFF IN PERSON:
204 NORTH PENELOPE STREET SUITE F 1 BELTON, TX 76513