

## REINSTATEMENT OF LAPSED LICENCE

*\* Fees associated with this reinstatement application are noted on page 3 herein and in accordance with the Cosmetology Act, 2012, c. 39 at Schedule B. Fees associated with the reinstatement of a lapsed licence are noted in the lapsed licence information package attached, as well as in the Cosmetology Act, 2012, c. 39.*

Name

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Address

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Telephone No.

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Email Address

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Licence reinstatement:

- Cosmetologist (Hairdressing)
- Cosmetologist (Esthetics)
- Nail Technology
- Make-up Artistry
- Body Hair Removal
- Other (Specific)

Licence No. \_\_\_\_\_

When did your licence expire?

Year: \_\_\_\_\_

Are you currently employed?

- Yes       No

If yes, provide location:

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***Please provide the following information:***

List your last five years' uninterrupted active work in a registered cosmetology or home salon establishment. Provide dates of employment, salon/spa name, location, and supervisor contact name.

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If your licence lapsed due to personal, health or medical related reasons, please indicate below (***all information is held in strict confidence***). Attached additional page if required.

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***CANS Office Use Only:***

Date Application Received: \_\_\_\_\_

Approved       Denied

Date Approved: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

<b><u>Description</u></b>	<b><u>Fee</u></b>	<b><u>Paid</u></b>
Application/Admin	\$55.00	<input type="checkbox"/>
Licence	75.00	<input type="checkbox"/> (Current Year)
Master Licence	80.00	<input type="checkbox"/> (Current Year)

Revised-2018