

## Kansas Board of Cosmetology

714 SW Jackson Suite 100 Topeka, KS 66603 Telephone: (785) 296-3155 Fax: (785) 296-3002 Email: Kboc@ks.gov Website: www.kansas.gov/kboc

## Verify your Kansas License/Training to Another State

Use this form when you are requesting proof of your Kansas license/training be sent to another state. You must include copies of your current U.S. government issued photo ID and social security card verifying your identity.

## The name on the ID and social security card must match exactly.

NAME:							
	Last	First	• • • • • • • • • • • • •	Middle			
ADDRESS:							
	Street		City	ST	Zip		
PHONE NUMBER:	()	E!	MAIL:				
					<u> </u>		
DATE OF BIRTH.		SOCIAL SECU	JRITY #:				
DATE OF BIRTH:	MM/DD/YYYY	* Disclosure is mandatory individuals lawfully residin taxation a lis	for licensure and authorized g in the U.S. Upon request c ting of all such applicants, al	by K.S.A. 74-148 and K.S.A. 74-139. of the director of taxation, each such a long with such applicant's social secur	It is used to verify identity and license uthority shall provide to the director of ity number and address.		
License Number(s)	: All licer	ses issued by the k					
		ining/Licensure Ro			0.7 -		
can be verified online at:							
	h				cation.htm		
	https://www.kansas.gov/kboc/License_Verification.htm						
	Verifications are only sent by email						
directly to the state you have requested.							
To have an Email verification sent to another State Licensing Agency:							
Provide the name of	the state(s).						
Provide the name of the state(s):							
To have an Email verification sent to another school please provide the School name, city, state and email below:							
		ner school please pro	vide the Sch	oor name, city, sta	ite and email below.		
 School Name	School City	School State	Schoo	I E-mail Address			
Military Service (Com	,						
	ovide a copy of your CAC car						
	ovide a copy of your CAC car						
Military Service Mei Separation Date:	mber (Provide your DD-214 a	and separation date below)					
	*Cosmetology Professio	ns Only There is no charr	ne for Body Art	or Tanning License V	erification Requests		
				-			
<u>Credit Card Payment \$20</u> 1). Go to the Board website: www.kansas.gov/kboc			Check or Money Order Payment \$20				
			1). Complete this form				
<ul><li>2). Select Payment Portal from the Top Menu Bar</li><li>3). Transaction Item = Board Verification Fee</li></ul>			2). Make Check or Money Order Payable to the Kansas				
/			Board of Cosmetology				
4). Record your Order ID # from your emailed receipt below			<ol> <li>Mail form and payment to the Board office at the address provided above.</li> </ol>				
Order ID #		ad	uless provided	u above.			
					1 <b>(</b> 17		
	rtificate or permit revoked, su onal or occupational license,						

state against any professional or occupational license, certificate or permit held by you; or has an application for any professional or occupational license, certificate or permit been denied by the State of Kansas or proper regulatory authority of another state, territory, District of Columbia or another country.

Yes \_\_\_\_ No \_\_\_\_

I declare under penalty of perjury under the laws of the State of Kansas that the information provided on this form is true and correct.

Signature Required:

Data	
Dale	

Last Revised 03/25/2024 If you have questions about this form please e-mail KBOC@ks.gov