

HEALTH LICENSING OFFICE Board of Cosmetology

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Natural Hair Care Qualification Committee Interest Form Applications will be accepted through December 22, 2023, at 12 p.m. (noon) Applications can be submitted by mailing them to the above address or by way of email to: brandon.chastain@oha.oregon.gov. Board / Council Name: Board of Cosmetology Subject Matter: Review the Natural Hair Care Training Module and Examination Proposed Meeting Dates and Times: February 6, and March 12, 2024 Applicant Availability Will you be available on the proposed meeting dates as specified above? Yes □ No If no, please specify which date(s) you will not be available: **Applicant Information** LAST NAME: FIRST NAME: MIDDLE INITIAL: MAILING ADDRESS: STATE: CITY: ZIP: **BUSINESS PHONE:** PERSONAL PHONE: EMAIL: BUSINESS OR ORGANIZATION AFFILATION (if applicable): YOUR TITLE (if applicable): YOUR LICENSE NUMBER (if applicable): LICENSE EXPIRATION DATE: What perspective do you represent? Why are you interested in serving on the committee?