



ALABAMA STATE BOARD OF COSMETOLOGY AND BARBERING  
P O Box 301750, Montgomery, AL 36130-1750  
Office Phone 334-242-1918 • Toll Free: 1-800-815-7453 • Fax: 334-242-1926  
[www.aboc.alabama.gov](http://www.aboc.alabama.gov)

Here attach 2" x 2" professional color passport photo. May be purchased at CVS, Walgreens or other businesses that provide passport photo services. **No selfies or snapshots or glamour shots accepted.**

**PERSONAL LICENSE RENEWAL  
2017-2019**

**RENEW ONLINE:** [www.aboc.alabama.gov](http://www.aboc.alabama.gov)

**REQUIREMENTS:**

1. COMPLETELY FILL OUT THIS APPLICATION

2. Fee: Active -- \$80 Fee      Shampoo Assistant - \$75 Fee

**ABSOLUTELY NO PERSONAL CHECKS ACCEPTED**

**\*\*Send Money Order, Cashier's/Certified Check or Shop Check ONLY\*\***

Payment will be returned if correct amount is not sent

3. One 2" x 2" professional passport photo (color, head-and-shoulders, full frontal view). This may be purchased at CVS, Walgreens or other businesses that provide passport photo services)

Name Changes require proof (copy of marriage/divorce certificate, updated driver's license or SS card)

*Application must be postmarked by last day of birth month; a \$50.00 late fee will be due if postmarked after this date.*  
**NOT RESPONSIBLE FOR MAIL DELIVERY.**

_____ (Please Print) Last name			_____ First name			_____ Initial		
_____ Address Street		_____ City		_____ State		_____ County		_____ Zip
_____ Mailing address if different from above								
_____ License number		_____ Type		_____ Exp Date		_____ Social Security Number		_____ Date of Birth
_____ (Area Code) Home Phone			_____ (Area Code) Work or Cell Phone			_____ E-mail address		

- No license is valid for a period of more than two years
- All personal licenses must be renewed by last day of birth month to avoid late charge of \$50.00

**BY MY SIGNATURE I CERTIFY UNDER PENALTY OF PROSECUTION THAT I AM EITHER A CITIZEN OF THE UNITED STATES OR LEGALLY PRESENT IN THE UNITED STATES AND AUTHORIZED TO WORK.**

\_\_\_\_\_  
Signature of Licensee

\_\_\_\_\_  
Date

<b>ABOC USE ONLY</b>			
Ck#	_____	Py Type	_____
Fee	_____	Lt Chg	_____
		Total	_____
ACT DATE	_____	By	_____
Note:	_____ _____ _____		