



BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY • GAVIN NEWSOM, GOVERNOR
 DEPARTMENT OF CONSUMER AFFAIRS • BOARD OF BARBERING AND COSMETOLOGY
 P.O. Box 944226, Sacramento, CA 94244-2260
 Phone : (916) 574-7574 Email: barbercosmo@dca.ca.gov
 Website: www.barbercosmo.ca.gov



EMPLOYER VERIFICATION

NOTIFICATION TO EMPLOYER—Probationers are required to inform his or her employer during the probation period of the discipline imposed by this Decision by providing the employer with a copy of the Decision and Order in this matter. The employer will inform the Board of Barbering and Cosmetology, in writing, that he or she is aware of the discipline. “Employer” refers to the holder of the establishment license where the Probationer practices.

SECTION A: RESPONDENT INFORMATION				
Case Number	License Number(s)			
Last Name(s)	First Name	M.I.		
SECTION B: EMPLOYER INFORMATION				
Business Name	Establishment License #	Establishment Phone #		
Address	City	State	Zip Code	
Date Probationer Began Employment	Employment Type <input type="checkbox"/> Employee <input type="checkbox"/> Booth Renter <input type="checkbox"/> Independent Contractor			
Employer Only: <i>I have received a complete copy of the Board Decision/Stipulation and Statement of Issues or Accusation in the disciplinary case referenced above.</i>				
Employer's Name _____				
Employer's Signature _____ Date _____				