

INTERPRETER OR INTERPRETER/MODEL INSTRUCTIONS

WHO CAN REQUEST AN INTERPRETER OR INTERPRETER/MODEL?

If an applicant has qualified for the barber, cosmetologist, manicurist, esthetician, or electrologist examination and cannot read, speak, or write in the English language at a 10th grade-level, the applicant may request authorization from the Board of Barbering and Cosmetology (Board) to use an interpreter or interpreter/model for most languages (please see below.) An interpreter may be requested for one or both parts of the examination for the barber, cosmetologist, esthetician and manicurist exams. An interpreter/model may be requested for one or both parts of the examination for the electrologist exams. **The Board does NOT provide interpreters or interpreter/models. Interpreter forms must be sent in with your exam application.**

KOREAN, SPANISH OR VIETNAMESE SPEAKING APPLICANTS:

The practical and written examinations for barbering, cosmetology, electrology, esthetician, and manicurist examinations are available in English, Spanish, Korean and Vietnamese and applicants **must** indicate their language preference on the application for examination or re-examination. An interpreter or interpreter/model may not be used if the examination is available in the applicant's native language.

WHO CANNOT ACT AS AN INTERPRETER OR INTERPRETER/MODEL?

- Persons less than 15 years of age.
- Persons who are current or former students in barbering, cosmetology, manicuring, esthetics, or electrology.
- Persons who have ever been licensed as an operator or an instructor in barbering, cosmetology, manicuring, esthetics, or electrology in this or any other state.
- Persons who are or have been enrolled in a barber apprentice or cosmetology apprentice training program.
- Persons who have been former junior operators or junior electrologists.
- Persons who are or have been owners or employees of any school of barbering, cosmetology or electrology.
- Persons who have acted as an interpreter or interpreter/model **within the past two years**, regardless of the examination type.

WHAT FORMS MUST BE COMPLETED TO USE AN INTERPRETER OR INTERPRETER/MODEL?

Both Board Forms G and H must be completed and sent to the Board with the application for examination and appropriate examination fees. An applicant CANNOT use an interpreter or interpreter/model if any of the following requirements are not fully met:

Applicant Requirements:

- Must fully complete and sign Form G and submit to the Board with the application for examination or no later than 30 days prior to the date of the examination. This form is to be completed by the applicant ONLY.
- Provide the interpreter or interpreter/model with Form H for their completion and signature.
- Verify the interpreter or interpreter/model included two copies of a 1 ½" by 1 ½" full face photograph with the interpreter or interpreter/model signature on the back is included with the completed Form H.
- **Submit Forms G and H and photographs with the application for examination.**

Interpreter Or Interpreter/Model Requirements:

- Must fully complete and sign Form H and return it to the applicant. **By completing and signing this form, the interpreter or interpreter/model is certifying under penalty of perjury under the laws of the State of California that he/she is fluent in both English and the native language of the applicant.**
- Provide the applicant with two copies of a 1 ½” by 1 ½” front view, FULL-FACE, photograph of the interpreter or interpreter/model and sign the back of the provided photograph.

Upon the Board’s evaluation and approval of the request to use an interpreter or interpreter/model, the Board will validate Form H by embossing the photograph with the Board’s seal. The Board will return Form H to the applicant with the **admission letter** to present to the exam facility on the day of the examination.

ON THE DAY OF THE EXAMINATION

At the examination facility, the applicant and the interpreter or interpreter/model **MUST**:

- Present the validated and authorized Form H along with the applicant’s examination admission letter.
- The applicant and the interpreter/model shall present one form of a current and valid government issued photographic identification. Acceptable forms of identification include:
 1. Current Driver’s License – any state
 2. State Identification Card – any state
 3. U.S. Military Identification
 4. Valid Passport – any country
 5. United States Immigration and Naturalization Issued Identification
 6. Certificate of United States Citizenship
 7. Permanent Resident Card

You will not be able to take the exam without valid ID’s for both the applicant and the interpreter.

IMPORTANT NOTES

- The Board may record the interpreting of the examination.
- Interpreters are not permitted to read the examination to the applicant in English. The interpreter must interpret the examination in the applicant’s native language.
- Disabled persons are entitled to have access to the examination activities in a manner that is equal to that offered non-disabled persons.
- Reasonable accommodations will be provided upon verification of medically confirmed disabilities. Applicants requiring reasonable accommodations under the Americans with Disabilities Act (ADA) may request accommodations by completing the Board’s Request for Reasonable Accommodation form (i.e., readers, ASL signers, etc.).
- Interpreters or interpreter/model may provide translation services **ONLY**. They may not help the applicant by explaining, coaching, demonstrating, or giving answers. If the Board determines that an interpreter or interpreter/model is providing answers during the examination or any other material assistance to the applicant other than translating, it shall disqualify the interpreter or interpreter/model and void the applicant’s examination.
- Persons who have acted as an interpreter or interpreter/model may not apply to the Board for a license in any category (i.e., barbering, cosmetology, manicuring, esthetics, or electrology) for which they provided interpreter or interpreter/model services for a period of one (1) year from the date of service.



APPLICATION TO USE AN INTERPRETER OR INTERPRETER/MODEL FORM G

Entity/File # (for official use only)

CHECK THE BOX FOR THE LICENSE TYPE YOU ARE APPLYING FOR:

BARBER COSMETOLOGIST ESTHETICIAN MANICURIST ELECTROLOGIST

SECTION A: APPLICANT INFORMATION

Social Security Number or Individual Taxpayer Identification Number □ □ □ - □ □ - □ □ □ □ □ □			Date of Birth (must be at least 17 years old) □ □ - □ □ - □ □ □ □ □ □ Month Day Year		
Last Name		First Name		Middle Name	
Street Address		City	State	Zip Code	
My Native Language Is:			Telephone Number □ □ □ - □ □ □ - □ □ □ □ □ □		

SECTION B: INTERPRETER OR INTERPRETER/MODEL INFORMATION

Last Name		First Name		Middle Name	
Date of Birth (must be at least 15 years old) □ □ - □ □ - □ □ □ □ □ □ Month Day Year			Telephone Number □ □ □ - □ □ □ - □ □ □ □ □ □		

Check one: Interpreter (Barber, Cosmetology, Esthetician or Manicurist) or Interpreter/Model (Electrology only)

SECTION C: APPLICANT CERTIFICATION

READ AND INITIAL EACH STATEMENT

I, the applicant, hereby state that:

- I am unable to speak, read, or write the English language at the 10th grade level.
- I understand it is my own responsibility to obtain the interpreter or interpreter/model.
- I understand I can use an interpreter only in the written part of the examination and that an interpreter/model may be used for both the written and practical portions of the examination and shall serve as the model (electrology only) for the practical examination.
- I understand I **cannot** use a particular interpreter or interpreter/model who has acted in either of these capacities within the past **two** years.
- I understand that I **cannot** use a particular interpreter or interpreter/model who is under 15 years of age or who is or has been a student in a barbering, cosmetology, or electrology school in this state or any state, an apprentice, a former junior operator or junior electrologist, or owner or employee of any school of barbering, cosmetology, or electrology.
- I understand the interpreter or interpreter/model **MUST BE FLUENT IN ENGLISH AND MY NATIVE LANGUAGE.**
- I **may not be coached** by the interpreter or interpreter/model during any part of the examination.
- I understand the Board may tape-record the interpreting of the examination.

I certify under penalty of perjury under the laws of the State of California that all statements furnished in connection with this application are true and accurate.

Signature of Applicant	Date
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DEPARTMENT OF CONSUMER AFFAIRS • BOARD OF BARBERING AND COSMETOLOGY
P.O. Box 944226, Sacramento, CA 94244-2260
Phone: (800) 952-5210 Email: barbercosmo@dca.ca.gov
Website: www.barbercosmo.ca.gov



INTERPRETER OR INTERPRETER/MODEL
FORM H

Entity/File # (for official use only)

SECTION A: INTERPRETER OR INTERPRETER/MODEL INFORMATION

Form section A containing fields for Last Name, First Name, Middle Name, Street Address, City, State, Zip Code, Date of Birth, and Telephone Number.

SECTION B: APPLICANT INFORMATION

Form section B containing fields for Last Name, First Name, Middle Name, a check box for Interpreter or Interpreter/Model, My Native Language Is, and Telephone Number.

SECTION C: INTERPRETER OR INTERPRETER/MODEL CERTIFICATION

READ AND INITIAL EACH STATEMENT

I, the interpreter or interpreter/model, hereby state that:

- List of statements for certification, including 'I have not acted as an interpreter...', 'I am at least 15 years of age.', 'I am not or never have been any of the following:', 'I will not coach the applicant...', 'I AM FLUENT IN ENGLISH...', 'I understand the Board may tape record...', and 'I have a valid government issued ID...'.

I certify under penalty of perjury under the laws of the State of California that all statements furnished in connection with this application are true and accurate.

Signature of Interpreter or Interpreter/Model and Date fields.

This Form H will be returned to the applicant once approved by the Board. The applicant and interpreter must present the authorized Form H, the exam admission letter, and valid identification to the exam site on the scheduled date.

FOR OFFICIAL BBC USE ONLY (DO NOT FILL OUT THIS SECTION)

Official Seal with Picture and Authorization to Use an Interpreter or Interpreter/Model fields.



INFORMATION COLLECTION, ACCESS AND DISCLOSURE

The Information Practices Act, Sec. 1798.17 Civil Code, requires the following information to be provided when collecting information from individuals.

AGENCY NAME:

Board of Barbering and Cosmetology

TITLE OF OFFICIAL RESPONSIBLE FOR INFORMATION MAINTENANCE:

Executive Officer

ADDRESS:

2420 Del Paso Road, Suite 100, Sacramento, CA 95834

INTERNET ADDRESS:

www.barbercosmo.ca.gov

TELEPHONE AND FAX NUMBERS:

(916) 574-7570 phone (916) 575-7281

AUTHORITY WHICH AUTHORIZES THE MAINTENANCE OF THE INFORMATION:

Sections 7300 to 7457, inclusive, comprising Chapter 10 Division 3, of the California Business and Professions Code.

CONSEQUENCES OF NOT PROVIDING ALL OR ANY PART OF THE REQUESTED INFORMATION:

It is mandatory that you provide all information requested. Omission of any item of requested information will result in the application being rejected as incomplete.

PRINCIPAL PURPOSE(S) FOR WHICH THE INFORMATION IS TO BE USED:

The information requested will be used to determine qualifications for licensure or certification to determine compliance with the group and corporate practice provisions of the law and to establish positive identification.

ANY KNOWN OR FORESEEABLE DISCLOSURES WHICH MAY BE MADE OF THE INFORMATION:

Your completed application becomes the property of the Board and will be used by authorized personnel to determine your eligibility for a license or certification. Information on your application may be transferred to other governmental or law enforcement agencies. Pursuant to the California Public Records Act (Gov. Code Section 6250 et seq.) and the Information Practices Act (Civ. Code Section 1798.61), the names and addresses of persons possessing a license or registration may be disclosed by the department unless otherwise specifically exempt from disclosure under the law. **Consequently, the personal name and address information entered on the attached form(s) may become public information subject to disclosure.**

SOCIAL SECURITY NUMBER (SSN) OR INDIVIDUAL TAXPAYER IDENTIFICATION NUMBER (ITIN) DISCLOSURE

Disclosure of your SSN or ITIN is mandatory. Section 30 of the Business and Professions Code and Public Law 94-455 [42 U.S.C.A. Section 405(c)(2)(C)] authorizes collection of your SSN or ITIN. Your SSN or ITIN will be used exclusively for tax enforcement purposes, for purposes of compliance with any judgment or order for family support in accordance with section 17520 of the Family Code, or for verification of licensure or examination and where licensure is reciprocal with the requesting state. If you fail to disclose your SSN or ITIN, you will be reported to the Franchise Tax Board, which may assess a \$100 penalty against you.

TAXPAYER INFORMATION

Effective July 1, 2012, the State Board of Equalization and the Franchise Tax Board may share taxpayer information with the board. You are obligated to pay your state tax obligation and your license may be suspended if the state tax obligation is not paid.