

DON ROBERTS SCHOOL OF HAIR DESIGN

152 EAST US ROUTE 30

SCHERERVILLE, INDIANA 46375

219-864-1600

[DRSCHOOL@SBCGLOBAL.NET](mailto:DRSCHOOL@SBCGLOBAL.NET)

[www.donrobertsschoolofhairdesign.edu](http://www.donrobertsschoolofhairdesign.edu)

**Application for Admissions**

Personal Information

Name \_\_\_\_\_ Phone Number \_\_\_\_/\_\_\_\_/\_\_\_\_

Emergency Contact Name/Relationship and Phone Number \_\_\_\_\_ / \_\_\_\_/\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_ Do you currently hold any license in the cosmetology field? \_\_\_\_ Yes \_\_\_\_ No

Program of Interest \_\_\_\_\_ Social Security Number \_\_\_\_/\_\_\_\_/\_\_\_\_ Cell Number \_\_\_\_/\_\_\_\_/\_\_\_\_

- High School Graduate \_\_\_\_ GED \_\_\_\_ College Graduate \_\_\_\_ Vocational Student \_\_\_\_
- Female \_\_\_\_ Male \_\_\_\_
- Single \_\_\_\_ Married \_\_\_\_ Divorced \_\_\_\_ Widowed \_\_\_\_ Number of Children/Dependents \_\_\_\_
- Asian \_\_\_\_ Black \_\_\_\_ Caucasian \_\_\_\_ Hispanic \_\_\_\_ Native American \_\_\_\_ Other/Identify \_\_\_\_\_

Financial Support

Would you like information on financial aid? \_\_\_\_ Yes \_\_\_\_ No **Continue with the following questions if you answered yes.**

What is your estimated current years' income? \$ \_\_\_\_\_ Have you filed a current FASFA? \_\_\_\_ Yes \_\_\_\_ No

Have you taken any schooling since high school \_\_\_\_ Yes \_\_\_\_ No Detail \_\_\_\_\_

Would you like information on any of the following?

- Grants \_\_\_\_
- Student Loans \_\_\_\_
- Private Scholarships Offered \_\_\_\_

Transparencies

Our Current Outcome rates Posted in 2021 for 2019.

- Completion 66%
- Licensure 100%
- Placement 70%

- ❖ Our campus has a NO tolerance policy.
- ❖ Conviction of a felony will NEGATE your ability to obtain a license in Indiana and Illinois.
- ❖ You must have a VALID social security number to sit for the licensing exam in Indiana and Illinois.

Consumer Information

On our web site/www.donrobertsspaschool.com you will find the following information.

- Student Handbook
- School Catalog
- Course Outlines
- Consumer Disclosure Statements
- Licensing Criteria
- Employment Information
- Annual Outcome Rates

I \_\_\_\_\_ acknowledge that I have been to the schools web site and have viewed all of the information detailed above. I also understand that I must attend an orientation prior to enrollment. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Enrollment Requirements

- Completed and Signed Enrollment Application
- Copy of Birth Certificate or Valid Passport
- Proof of GED or High School Completion/English Only/Valid Translation Required for those not in English
- Copy of Driver’s License/Government Issued ID/MUST match name on this application
- Copy of Social Security Card/MUST match name on this application
- Copy of Document(s) that verify ANY change of name

I \_\_\_\_\_ understand that I have submitted all of the documents required and attest to their accuracy. I acknowledge that the school has the right to query those documents, and may require an original transcript of that are of concern, as they may adversely affect my application for enrollment and/or licensure. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**ATTITUDE** is a little thing that will make a **BIG** difference in both your education and professional career. If today were graduation, describe your vision for employment and/or the perfect job for you. Share your vision.

Jan Stemmer,  
President

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Application Reviewed \_\_\_\_/\_\_\_\_/\_\_\_\_

Staff Notes

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