



THE OHIO STATE BOARD OF COSMETOLOGY

1929 Gateway Circle Grove City, Ohio 43123
Phone: (614) 466-3834 Fax: (614) 644-6880 www.cos.ohio.gov
JOHN R. KASICH, GOVERNOR
JAMES P. TRAKAS, EXECUTIVE DIRECTOR

CERTIFICATION OF LICENSE TO ANOTHER STATE

(This is an active PDF form click each line to complete the form)

Licensee should first contact the state board office in the state you wish to transfer in order to receive instructions and/or applications that may be required. All states require a Board Certification to verify licensure status.

Licensee Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact Number: (____) _____ - _____

Ohio State Board of Cosmetology Id Number: _____

Which state do you wish to have the certification sent: _____

Complete application and mail to the following address:

Ohio State Board of Cosmetology
Attention: Board Certification Requests
1929 Gateway Circle
Grove City, Ohio 43123

FEE \$50.00

Must be submitted in the form of check or money order made payable to
Treasurer, State of Ohio ***Cash will be returned***

For security purposes, certifications will not be sent to the individual licensee. Certifications will be mailed directly to the Board of Cosmetology indicated on the form. Certification requests are processed within 20 business days of their receipt.