Virginia Board for Barbers and Cosmetology

School Owners

Pursuant to the Board’s regulations pertaining to the practices of Barbering, Cosmetology, Nail Technology, Waxing, and Esthetics, each licensed school shall complete and maintain a self-inspection form. The self-inspection form will need to be updated on an annual basis, and kept on the premises of the school for 5 years, so that it may be requested and reviewed by the board at its discretion. Enclosed you will find the applicable regulation site for each of these professions.

The purpose of the program is to allow you the opportunity to assess your compliance with local, state, and federal policies, regulations, and standards governing health, sanitation, and safety, by completing the attached Self-Inspection Form. The self-inspection program is designed to complement, but not take the place of, our program of conducting inspections in conjunction with investigations into alleged violations of the Code of Virginia and the Board’s Regulations.

Should you have any questions pertaining to the information contained in the attached Self-Inspection Form, please feel free to contact us at (804) 367-8509.

We want to thank you for your compliance with this program, and for doing your part to protect the health, safety, and welfare of all the citizens of the Commonwealth.

SINCERELY,

BOARD FOR BARBERS AND COSMETOLOGY
The purpose of this program is to allow you the opportunity to assess your compliance with the Board's standards governing sanitation and safety, by completing this Self-Inspection Form. The self-inspection program is designed to complement, but not take the place of, our program of conducting inspections in conjunction with investigations into alleged violations of the Code of Virginia and the Board's Regulations. Compliance with these rules does not infer compliance with other requirements set forth by federal, state, and local laws, codes, ordinances, and regulations as they apply to business operation, physical construction and maintenance, safety, and public health.

1. Shop/Salon Name

2. Mailing Address (PO Box accepted)

3. Street Address (PO Box not accepted) ☐ Check here if Street Address is the same as the Mailing Address listed above.

4. Virginia License Number ___________________________ Expiration Date ________________

5. Location License Posted ____________________________

6. Owner/Manager ____________________________

7. If Owner/Manager is a practitioner, provide license number(s): ____________________________

8. Please check or provide the appropriate response: (Y=Yes, N=No, NA=Not Applicable)

   a. The license bears the same name and address as the business?

   b. Licenses and certificates are posted in reception area?

   c. Is the facility sufficiently ventilated to exhaust hazardous or objectionable airborne chemicals, and allow the free flow of air?

   d. Does this school also have a shop or salon license?

      If so, how many chairs are for non-student use? ________________

   e. Which of the following courses are taught at this school?

      Barbering ☐ Y ☐ N ☐ NA

      Cosmetology ☐ Y ☐ N ☐ NA

      Nail Care ☐ Y ☐ N ☐ NA

      Wax Care ☐ Y ☐ N ☐ NA
Esthetics (Skin Care) □ Y □ N □ NA
If other, please specify: ____________________________

9. How many hours of safety and sanitation are taught as part of each program this school offers?

10. **Sanitation**
   a. Do your students wash their hands with antibacterial soap prior to providing services to each customer? □ Y □ N □ NA
   b. Are floors free of hair, nail, and other waste materials? □ Y □ N □ NA
   c. Is the floor surface a washable surface other than carpet? □ Y □ N □ NA
   d. Are soiled and/or used cloth materials stored in containers made of cleanable materials and separate from those which are clean or pre-sanitized? □ Y □ N □ NA
   e. Is the waiting area clean and does it have a trash can available for customers? □ Y □ N □ NA
   f. Is there a fully functional bathroom in the facility, with a working toilet and sink that is available for student and client use? □ Y □ N □ NA
   g. Are tools, implements, linens, and multi-use articles cleaned, sanitized, and/or sterilized after use upon each client? □ Y □ N □ NA
   h. Are service chairs, nail care tables, sinks/shampoo bowls, facial and waxing tables, dryers and dryer chairs, apparatus for waxing and facials, tanning beds, and other objects which touch the client sanitized and/or sterilized after each use? □ Y □ N □ NA
   i. Does each student in the facility have access to a wet disinfectant unit large enough whereby objects to be disinfected may be completely immersed? □ Y □ N □ NA
   j. Are all pre-sanitized tools and implements, linens and equipment stored for use in a sanitary enclosed or covered receptacle? □ Y □ N □ NA
   k. Is the facility free of insects, rodents, birds, or any type of animals? □ Y □ N □ NA

11. **Safety**
   a. Does this facility have a "Certificate of Occupancy" from the local building official, zoning board, or health department? □ Y □ N □ NA
   b. Does this facility have on its premises any cosmetic product that has been banned by the U.S. Food and Drug Administration? □ Y □ N □ NA
   c. Does this facility have a blood/bodily fluid cleanup kit in the work area? □ Y □ N □ NA
   d. Are heat producing appliances and equipment placed so as to prevent accidental injury and fires? □ Y □ N □ NA
   e. Are all work areas free of clutter, trash, and other items that may pose a hazard? □ Y □ N □ NA
   f. Are all bottles and containers properly labeled? □ Y □ N □ NA
g. Is this facility used for any purpose other than hair, nail, waxing, or esthetics services? If yes, please explain.

☐ Y  ☐ N  ☐ NA

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12. Name of Owner/Instructor/Principal Completing this Form: ________________________________

Signature of Owner/Instructor/Principal Completing this Form: ________________________________

Date Completed: ____________________

THIS FORM SHALL BE KEPT AND MAINTAINED ON THE PREMISES OF THE SCHOOL.
DO NOT RETURN THIS FORM TO THE BOARD FOR BARBERS AND COSMETOLOGY.