



**Professional Grooming Credential  
Education Eligibility Statement**  
(refer to PGC Candidate Handbook for specific forms required)

Candidate's Name: \_\_\_\_\_  
(Last) (First) (Middle Initial)

Candidate's Address: \_\_\_\_\_  
(Street Address/PO Box, City, State, Zip)

\_\_\_\_\_  
(Email Address)

\_\_\_\_\_  
(Phone Number)

Candidate's Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(MM) (DD) (YYYY)

Last 4 digits of SS#: \_\_\_\_ \_ \_ \_

<b>Course Dates (mm/dd/yy)</b>	<b>Course Title</b>	<b>Course Type (eg: private, group class, retreat, vocational, training, handling)</b>	<b>Course length (e.g.: hours)</b>	<b>Course location (e.g.: show name, city/state, school name, city/state or online/virtual)</b>	<b>School or course grade/pass/fail</b>

I, the candidate, attest that I have attended the above-mentioned courses.

Candidate Printed Name: \_\_\_\_\_

Candidate Signature: \_\_\_\_\_ Date: \_\_\_\_\_