

wade gordon

HAIRDRESSING ACADEMY

CONFIDENTIAL QUESTIONNAIRE

Full Name: _____

WHAT NAME DO YOU PREFER TO GO BY: _____

Address: _____ City: _____ State: _____ Zip: _____

Cell: _____ E-Mail: _____

Social Security #: _____ Date of Birth: _____

Campus: ☐ Amarillo ☐ Lubbock ☐ Oklahoma

Area of Interest: ☐ Cosmetology ☐ Barber

☐ Esthetics (Evening Only at our Amarillo and Lubbock Location: Mon-Fri 5:30 PM – 9:00 PM)

Schedule: ☐ Mon-Fri 9am-4:30pm ☐ Mon-Fri 9am-3pm

☐ Mon, Tue, Wed 9am-5pm

Education: ☐ High School Diploma ☐ General Education Diploma

HS Name OR Name of GED Program: _____

Month/Year Graduated OR Obtained GED: _____

What Month/Year are you interested in starting school? _____

How did you hear about us? _____

Have you recently seen an ad for our school through social media? Y / N

TELL US ABOUT YOU:

Children: Y / N

US Citizen: Y / N

Do you have your own transportation: Y / N

How long have you been considering career training? _____

What has prevented you from pursuing this training? _____

What obstacles, if any, would prevent you from keeping your commitment to our academy/program?

Write a brief description on why you have chosen cosmetology and/or barber as a career choice:

I have received Wade Gordon Hairdressing Academy's Student Catalog and Wade Gordon Hairdressing Academy's 2025 Campus Safety and Security Survey on my tour of the facilities today.

Applicant Signature: _____ **Date:** _____