



Commonwealth of Massachusetts
Division of Professional Licensure
Board of Registration of Cosmetology and Barbering
 1000 Washington Street, Suite 710, Boston, MA 02118
<https://www.mass.gov/orgs/board-of-registration-of-cosmetology-and-barbering>
 617-727-9940

SELF-EMPLOYED AFFIDAVIT FOR OUT OF COUNTRY
APPLICANTS

Use this affidavit if you owned your own shop where you worked as a barber in another country for two years. This form must be completed and signed by the owner of the building where you operated your shop, and must be notarized in the country that you operated your shop in.

You must also submit documentation (e.g., tax records) that you owned and operated a shop.

I hereby certify that I am or was a property owner in the country of _____
Country

and that I owned the property located at _____
Street, City, Postal Code

and that _____ owned or operated a barber shop at this location
Applicant's Name

from _____ to _____
month/day/year month/day/year

ERASURES OR CHANGES IN DATES ARE NOT ACCEPTABLE

Subscribed and sworn before me this _____ day of _____

NOTARY SEAL

Name of Property Owner _____

Present Address: _____

This affidavit must be notarized
 in the country where signed.

City: _____

Signature of Owner: _____

Notary Public (Please Print) _____

Notary Public (Signature) _____