



Manicuring

The manicurist program specializes in the care, grooming and enhancement of the nails. It is designed to teach students the basic skills required for licensures from the Tennessee Board of Cosmetology. During the course students will be provided with knowledge in the sanitation of salons and equipment, anatomy, diseases and disorders of the nails and skin, manicuring and pedicuring procedures, nail artistry and artificial nail enhancements.

Program/Location	Length	Days	Time
Day Program/ Knoxville Main Campus	6 Months	Monday-Friday	8:00 am—2:30 pm
Night Program/Knoxville Main Campus	6 Months	Monday-Friday	3:30 pm—10:00 pm

Curriculum/Courses

MAN 0001	Worker Characteristic
MAN 1010	Orientation
MAN 1020	Sterile-Sanitize & Bacteriology
MAN 1030	Anatomy and Physiology
MAN 1040	State Law
MAN 1050	Salon Management
MAN 1060	Ethics
MAN 1070	Massaging
MAN 1080	Manicuring and Pedicuring
MAN 1090	Nail Care
MAN 1100	Nail Artistry
MAN 1110	Nail Wrap
MAN 1120	Sculptured Nails I
MAN 0002	Worker Characteristic
MAN 2010	Sculptured Nails II
MAN 2020	Nails Tips
MAN 2030	Gel Nails
MAN 2040	Nail Safety
MAN 2050	Product Knowledge-Usage
MAN 2060	EPA and OSHA Req

Completion Award

Required Hours

Manicurist	Certificate	600
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HOW TO APPLY

Packet must be complete and include each of the below items to be submitted.

- Complete the **Free Application For Federal Student Aid (FAFSA)** online – the website is www.fafsa.ed.gov and our school code is 004025.
- Complete **TCAT Knoxville Application for Enrollment** (Form is attached)
- Provide **official sealed educational transcripts** from your high school or equivalent.
 - A High School Equivalency (HSE) diploma transcript with a score of at least 450 with no score less than 410 in any area
 - A high school transcript with proof of completion of at least the 10th grade with 12 high school credits
 - If you are transferring hours from High School or another cosmetology program, you **MUST** turn in an **OFFICIAL COPY** of your **RECORD OF COMPLETION** from the Department of Commerce & Insurance to your instructor the first day of class.
- Provide one of the following for **proof of age**:
 - A copy of your Driver's License
 - A copy of your birth certificate
 - A high school transcript with the birth date listed
- Provide copy of **Social Security Card**
- Provide one of the following for a **recent photograph**.
 - A copy of your driver's license/Photo ID
 - A snapshot that has been signed, dated, and notarized



Manicuring
Knoxville Campus
Book, Tool, and Supply List

1st Trimester				
Tuition		Cost		Total
Tuition (432 Hours)*		\$1,169.00		
Technology Access Fee*		\$ 67.00		
Student Activity Fee*		\$ 10.00		
TOTAL				\$1,246.00
Books & Kits				
	ISBN	Cost	Required	
Pivot Point Salon Fundamentals Nails textbook	9780977996186	\$ 120.00	x	
Pivot Point Salon Fundamentals Nails exam prep	9780978976514	\$ 91.00	x	
Pivot Point Salon Fundamentals Nails study guide	9780977996193	\$ 95.00	x	
Manicuring Kit			x	
TOTAL				\$306.00
Supplies				
	Needed By	Cost	Required	
3 Black Dress Slacks (no jeans or athletic type)	First day of class	\$ 60.00	x	
3 White Short Sleeve Shirts (tee or collared)	First day of class	\$ 45.00	x	
3 Teal Snap or Zip Front Scrub Tops	First day of class	\$ 60.00	x	
Black Leather Professional Shoes	First day of class	\$ 45.00	x	
Notebook, Pencils, Pens, and Paper	First day of class	\$ 30.00	x	
Combination Lock	First day of class	\$ 6.00	x	
TOTAL				\$246.00
2nd Trimester				
Tuition		Cost		Total
Tuition (168 Hours)*		\$ 647.00		
Technology Access Fee*		\$ 67.00		
Student Activity Fee*		\$ 10.00		
TOTAL				\$724.00
Miscellaneous Cost				
		Cost	Required	
Sanitation Kit		\$ 20.00	x	
PSI Testing (2 tests at \$70 each)		\$ 140.00	x	
State License		\$ 50.00	x	
Graduation Supplies		\$ 40.00	x	
TOTAL				\$ 250.00
TOTAL PROGRAM COST				\$2,772.00

All Costs are Estimated and Subject to Change Without Notice Revised: 8/22/2017

*Denotes costs that can be covered by TN Promise and TN Reconnect



TENNESSEE COLLEGES OF APPLIED TECHNOLOGY

ENROLLMENT APPLICATION

Applicants must complete every item on this form, sign and date and return it to the College.

Personal Information	Full Legal Name _____ Last First Middle _____ Address _____ City _____ County _____ State _____ Zip _____ Email Address _____ - - / / Gender: <input type="checkbox"/> M <input type="checkbox"/> F Social Security _____ Date of Birth _____ Age _____ Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single Preferred Phone Number: _____ Race: Do you consider yourself to be Hispanic/Latino/Spanish origin? <input type="checkbox"/> Yes <input type="checkbox"/> No Select one or more of the following racial categories to best describe you: <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Black or African American Citizenship status: <input type="checkbox"/> US Citizen or US National <input type="checkbox"/> US Dual Citizen <input type="checkbox"/> US Permanent Resident or Refugee <input type="checkbox"/> Other US Forces Status: <input type="checkbox"/> Currently Serving <input type="checkbox"/> Previously Serving <input type="checkbox"/> Current Dependent <input type="checkbox"/> N/A ALL MALES 18 OR OLDER MUST be registered with Selective Service. Have you registered for Selective Service? <input type="checkbox"/> Not required to registered <input type="checkbox"/> Registered <input type="checkbox"/> Required to register, but not registered
Prior Education/ Training	Education (insert highest level of education completed): _____ Name of last high school attended: _____ High school graduation date (mm/yyyy): _____ GED Diploma Date _____ Are you seeking credit for prior education, training or work experience? <input type="checkbox"/> Yes <input type="checkbox"/> No
Program	Please review the campuses website and provide the program name choice for career training (Example: Administration Office Technology) _____ When will you be available to enroll in class? <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer Do you plan to apply for financial aid? <input type="checkbox"/> Yes <input type="checkbox"/> No

Signature of Applicant: _____ Date of Application: _____

The Tennessee Colleges of Applied Technology (TCATs) do not discriminate on the basis of race, color, religion, creed, ethnic or national origin, sex, sexual orientation, gender identity/expression, disability, age, status as a covered veteran, genetic information and any other category protected by federal or state civil rights law with respect to all employment, programs and activities sponsored by the TCATs.



OFFICE USE ONLY

ADMISSIONS REQUIREMENTS

FAFSA I will not be filing financial aid. I will be paying for my education. Students Initials: _____

SPECIAL ADMISSIONS REQUIREMENTS

Cosmetology:

Photo Proof of Age Copy of SS Card RT/LT Handed Manicuring Only
 Educational Transcripts

Dental Assisting, Medical Assisting, and Surgical Technology

HESI scores: Math 70 and Reading 70 | Compass scores: Math 30 and Reading 70

HESI | ACT | Compass Scores: _____ Math _____ Reading _____ (Date: _____)
 CPR Documentation (BLS for Healthcare Providers)
 Educational Transcripts Immunizations

Medical Office Information Technology

Educational Transcripts

Practical Nursing:

HESI required scores: Math 70 and Reading 70 | Compass scores: Math 50 and Reading 80

Notarized Declaration of Citizenship Copy of ID Used to Declare Citizenship
 CPR Documentation (BLS for Healthcare Providers)
 Educational Transcripts Immunizations
 HESI | ACT | Compass Scores: _____ Math _____ Reading _____ (Date: _____)

Truck Driving:

MVR DOT Physical Valid Driver's License
 U.S. Citizenship / Residency

Staff Signature: _____

Date: _____