

CERTIFIED LASER HAIR REMOVAL PROFESSIONAL® (CLHRP®) EXAMINATION APPLICATION

- ★ TEXAS APPLICANTS MUST PROVIDE A COPY OF YOUR STATE-ISSUED SENIOR LHR TECHNICIAN CERTIFICATE BEFORE EXAM SCORES CAN BE RELEASED!
- * ALL OTHER APPLICANTS MUST PROVIDE A COPY OF LASER HAIR REMOVAL TRAINING CERTIFICATE OR LETTER FROM PROVIDER VERIFYING TRAINING IN LASER HAIR REMOVAL!

GENERAL INFORMATION (Please write legibly.)			
Name:(This is how your name will appear on your	certificate should you n	ass the evam l	
Mailing Address:			_ Apt #:
City: State/Prov:	Zip/PC:	Country	<i>r</i> :
Day Telephone: ()			
Email (REQUIRED — PLEASE WRITE LEGIBLY):			
In what professional capacity do you practice laser hair removal?	☐ Physician☐ Esthetician	☐ Nurse ☐ Other:	☐ Electrologist
EXAM FEES			
☐ Current SCMHR Member (or joining at this time)(Subject to verification)			\$225.00
☐ Non-SCMHR Member			\$325.00
STUDY GUIDE (Optional)			
☐ CLHRP Study Guide (OPTIONAL)			\$125.00
EXAM CONFIRMATION/SCHEDULING			
You will receive a confirmation email from donotreply@provexam exam. You will be charged a separate \$85 proctoring fee when you email from SCMHR within 7 business days, please contact the SCI	schedule your exam	. If you do not	receive a confirmation
PAYMENT INFORMATION			
Check made payable to SCMHR (U.S. Funds only)Visa/Mastercard (Discover and Am Ex NOT accepted.)			otional)\$
Card #:			
Exp. Date: /			ptional)\$
Signature (REOUIRED):		IOIAL FEE	PAID\$

Refund Policy: Refunds for exam fees, minus a \$100 processing fee, are granted within 30 days of receipt of the application. Refunds are not granted after 30 days. No refunds are given for study guides or membership fees.