

SOUTH DAKOTA DEPARTMENT OF LABOR AND REGULATION
SOUTH DAKOTA BOARD OF BARBER EXAMINERS

217 West Missouri Avenue, Pierre SD 57501
Tel: 605.773.6193 barber@state.sd.us

FORM C

BARBER SCHOOL STATEMENT REGARDING TESTING ACCOMMODATIONS

Applicant Name : _____

The above named applicant received special testing accommodations during the administration of exams at this school for the following disability: _____

During the following periods:

The special testing accommodations provided are described as follows:

SIGNATURE

DATE

Title: _____

School: _____

Tel: (_____) _____ - _____