



# INTERIOR ACADEMY

school · spa · salon

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## ENROLLMENT QUESTIONNAIRE

NAME: \_\_\_\_\_

BIRTHDATE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PROGRAM: \_\_\_\_\_

INTAKE: \_\_\_\_\_

DATE: \_\_\_\_\_

HAND DOMINANCE: \_\_\_\_\_

SIN: \_\_\_\_\_

GENDER: \_\_\_\_\_

1. Explain in detail why you want to become a beauty industry professional?

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2. What have you been doing over the past year? (work, hobbies, travel, etc.)

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3. Explain your definition of a professional? (qualities, attitude, skills, etc.)

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4. Explain your definition of a team player?

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5. What do you personally feel you have to offer this program?

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6. What are your expectations of this program?

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7. What obstacles if any would prevent you from attending on a full-time basis, with perfect attendance?

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8. Why did you choose Interior Academy?

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9. How and where did you hear about Interior Academy? (website, paper, someone you know, etc.)

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10. Do you have friends or relatives in the beauty industry? If so, what advice did they give you as far as school?

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11. Do you have any acute allergies? YES or NO  
If so, please describe in detail:

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12. Do you have any learning disabilities that may affect your performance?

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13. Do you have any physical/mental medical conditions/issues or trauma that may affect your performance?

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14. Are you currently taking any medication, prescription or otherwise that may limit your ability to participate in the program?

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15. Will you have any objection to performing any of the services required in your program on a client based on their physical appearance, race, color, religion, gender, marital status, sexual orientation, age, or national origin? If yes, please explain in detail.

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16. Describe in detail an example where you were under tight deadlines or under pressure to perform:

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17. List three of your greatest strengths:

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2. 

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3. 

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18. What do you feel is your biggest weakness?

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19. Give examples of tangibles steps you have taken to overcome your weakness:

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20. Are you currently employed?      YES    NO

If yes, for how long? \_\_\_\_\_

Name of employer: \_\_\_\_\_

Do you intend to remain employed during the program? \_\_\_\_\_

21. Did you graduate high school?      YES    NO

If no, what was the last FULL grade you completed? \_\_\_\_\_

22. Will you be applying for financial aid?      YES    NO

If yes, please specify source: \_\_\_\_\_

23. Please describe in detail your financial plan to cover your tuition:

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24. What are your professional goals upon graduation from Interior Academy?

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