

COMPLIANCE REPORT FORM

In New Brunswick, any person working in the cosmetology industry must hold a valid license with the Cosmetology Association of New Brunswick ("CANB/ACNB"). A license with CANB/ACNB is evidence that the cosmetologist has completed the necessary requirements in infection control and possesses the necessary skills to perform cosmetology services in New Brunswick. A salon offering cosmetology services must also hold a permit with CANB/ACNB.

To use the following titles or engage in or offer cosmetology services, a person or salon must have a license / permit:

- Cosmetologist
- Master cosmetologist
- Mobile cosmetologist
- Aesthetician
- Certified cosmetologist instructor
- Hairstylist / hairdresser
- Technical cutting stylist
- Nail technician
- Make-up artist
- Eyelash technician / lash and brow technician
- Depilatory technician

Please use this Compliance Report Form to report:

- any person who is engaging in the practice of cosmetology without a license;
- any person who is holding themselves out as being entitled to practice cosmetology without a license; and
- any salon offering cosmetology services without a permit.

To ensure that CANB/ACNB can properly investigate the concern, all fields must be completed in full before submitting.

Your Information

Name: _____

Address: _____

Email Address: _____

Telephone Number: _____

Information about the individual you are reporting

Name of individual being reported: _____

Name of establishment, salon or school in which the individual practises:

Address of establishment, salon or school in which the individual practises:

Please describe the issue of unlicensed practice, including date(s) in which the unlicensed practice was observed:

If available, please provide any documents or materials demonstrating unlicensed practice (e.g. social media page, images, promotional flyers, etc.):

Any additional information you wish to provide:

Acknowledgment

The information given above and attached is true and accurate to the best of my knowledge. I understand, acknowledge, and realize the serious nature of filing such a report and recognize that CANB/ACNB may not be able to take action without my cooperation in providing additional information, if requested.

Signature: _____

Date: _____

Note: By entering my full name, I acknowledge and agree that it will have the same legal effect as a handwritten signature.