
**MONITORING INFORMATION
FROM COURT OR PROBATION/PAROLE OFFICER**

This form is required to be completed if you are currently incarcerated, on parole, probation, or under court supervision as a result of a felony. This form must be completed by a person in their official capacity as law enforcement personnel, parole, probation officer, or an official representative of the court who has knowledge of the circumstances surrounding the felony conviction.

1. Name of applicant: _____
2. How long have you known the applicant: _____
3. Has the applicant fully disclosed his/her criminal record to Barbering and Cosmetology Licensure? _____
4. Was the applicant the principal participant or an accessory? _____
5. Was the crime premeditated or spur of the moment? _____
6. Were there damages or injury to the victim(s)? If so, what type? _____

7. Did the applicant make restitution to the victim(s)? _____
8. What has the applicant done since the crime to become a law-abiding and productive member of society? _____

9. In your opinion, please explain whether the applicant poses a threat to the public's safety? _____

10. In your opinion, please discuss whether the applicant is fit for licensure? _____

Should you have any questions regarding this information feel free to contact the Office of Barber and Cosmetology licensure at 303-894-7800. Return this form with your *Licensure by Examination Application* to Pearson VUE at 3131 S. Vaughn Way, Suite 205, Aurora, CO 80014.

Official's Name

Date

Official's Title

Phone Number

Address

Email Address

City, State, and Zip Code