

C E N T R A L I A
BEAUTY COLLEGE

SAP APPROVAL: **YES** NO Week of: _____

Explanation:

Student is currently in compliance with her SAP averages and is open to engage in her externship for the period noted above.

Student Name: _____ Date _____

Student Signature: _____ Date _____

Admin Sign (Printed): Tara Foster Date _____

Administration Signature:  _____ Date _____

C E N T R A L I A
BEAUTY COLLEGE

Date	Time In & Out	Services Assisted In:	Services Observed:

Stylist Name (printed) _____

Stylist Signature _____