



Minnesota Board of Cosmetologist Examiners
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Board Meeting Agenda Request Form

To request to be placed on a Board meeting agenda, complete the sections of this form that are relevant to your request, attach any required documentation and submit all items to the BCE office. This form and all corresponding documentation must be received at the BCE office at least **30 days prior** to the next Board meeting date to be eligible for the meeting agenda. For a list of meeting dates and submission deadlines, visit the BCE website at www.bceboard.state.mn.us. Requests may be submitted via email, standard mail or fax.

Important: Meeting agendas are adopted and/or amended at the Board meetings. By submitting this form and a complete request, your request will likely be placed on the meeting agenda. However, the Board may decide to table the matter you have raised, request additional information from you or Board staff, or not take any action regarding the item. Additionally, the Board Chair retains discretion to decline a request to be placed on the agenda, such as when an individual, group, or organization has previously addressed the Board on the same matter, or when the Board has no jurisdiction over the matter.

Step 1: Disclose Personal Information

Name <i>First, last—Please print</i>	Address <i>Street, city, zip code</i>
Email Address	Phone Number
License or Application Status: <input type="checkbox"/> I am a license applicant <input type="checkbox"/> I have a BCE issued license <input type="checkbox"/> I am a community member <input type="checkbox"/> Other (please explain) <div style="display: flex; justify-content: space-around;"> <div>_____</div> <div>_____</div> </div> <div style="display: flex; justify-content: space-around;"> <div><i>Application Type</i></div> <div><i>License Type and Number</i></div> </div>	

Step 2: Select Type of Request

- ☐ I would like to make a general comment—see Section A
☐ I am requesting a rule waiver—see Section B
☐ I am requesting a rule variance—see Section C

After you select the type of your request, proceed to the corresponding section (A, B, or C) below. Each type of request has specific requirements.

If your request does not fall under the options within sections A-C, please contact the BCE office via email or telephone to verify that a Board meeting is the appropriate forum for your request to be heard.

◆ Section A: General Comment

General comments are limited to three minutes and the Board may or may not choose to engage in discussion on the topic at the Board meeting. Your attendance at the meeting is required in order for your topic to be addressed.

Requirements:

Prepare and attach the item(s) requested within this section, then proceed to Step 3.

☐ **Written Summary of Proposed Comment**

- Your written summary must describe the topic you wish to address and include your name and the date of the Board meeting you wish to attend.

☐ **Supporting Documentation** *(optional)*

- If you have any documentation (PowerPoint, chart, etc.) to support your comment, attach it to your summary.

◆ Section B: Rule Waiver

The Board has the authority to waive Minnesota cosmetology rules (Chapter 2105 and 2110) in the event of documented medical necessity or hardship. The Board *does not* have the authority to waive laws (including Chapter 155A) or court orders.

Requirements:

Prepare and submit the three items below.

Requests may not be added to the agenda until all items are received.

☐ Provide General Information

Topic of Request: <i>Ex: Salon Manager License Requirements</i>	
Rule Number(s) Requested to be Waived: <i>Rule Chapters 2105 or 2110 only</i> <i>Laws in Chapter 155A cannot be waived</i>	I will attend the Board Meeting: <input type="checkbox"/> No <input type="checkbox"/> Yes _____ <i>If yes, provide Board meeting date</i>

☐ Write a Statement

Your statement must:

- state the rule that you are requesting to have waived
- clearly describe your hardship and explain how it has interfered with you complying with the rule

☐ Submit Hardship Documentation

- You must submit documentation to support the claim of medical necessity or hardship that is described in your written statement.
- Examples of medical hardship documentation include but are not limited to: doctor's statements, doctor office or hospital visit history, surgery history, etc. Examples of financial hardship documentation include but are not limited to: a cost versus income analysis, outstanding bills, bank or credit card statements, etc.
- **Important:** Relevant supporting documentation is key to a successful request. Requests that are submitted without hardship documentation *will not* be added to the meeting agenda.

◆ Section C: Rule Variance

The Board may grant two types of rule variances.

☐ **Mandatory Variance:** The Board may grant a mandatory variance if they find that the application of the rule would not serve any of the purposes of the rule.

☐ **Discretionary Variance:** The Board may grant a discretionary variance if they find that application of the rule would result in injustice or hardship, if variance from the rule would be consistent with public interest and that it would not prejudice the substantial legal or economic rights of any person or entity.

Requirements:

Prepare and submit the two items below.

Requests may not be added to the agenda until both items have been received.

☐ Provide General Information

Topic of Request: <i>Ex: School student to instructor ratio</i>	
Variance Involves Rule Number(s) : <i>Rule Chapters 2105 or 2110 only</i> <i>Laws in Chapter 155A cannot be waived</i>	I will attend the Board Meeting: <input type="checkbox"/> No <input type="checkbox"/> Yes _____ <i>If yes, provide Board meeting date</i>

☐ Write a Statement

Your statement must address items A-G:

- A. Who are you? Provide your name and address or the name and address of your establishment and the license types that you hold, have held or have applied for.

Section C: Rule Variance Continued

- B. Which rule(s) are you requesting a variance of? Provide the rule number(s) a description of the rule(s).
- C. Why do you need a variance? Explain your need for a variance and specify how long you anticipate needing the variance.
- D. What has happened with your variance request? Summarize your interactions with the BCE concerning your variance request. Include any previous licensing or compliance issues that led to your request of a variance, and any past variance details (if applicable).
- E. What has the Board done in the past? Provide a history of any similar variances granted by the Board. BCE staff will assist in this step if you are unaware of any similar circumstances.
- F. Who would this variance affect? Provide the names and contact information of anyone that would be negatively affected if your variance request is granted.
- G. Sign your statement: Attest to the accuracy of the information provided within your written statement.

Step 3: Authorize Release of Information & Provide Signature

Please read this authorization and provide a signature below to allow the Board and Board staff to discuss your license or application in a public Board Meeting Setting.

Authorization to Discuss Information at Public Board Meeting

I wish to address the Minnesota Board of Cosmetologist Examiners ("Board") concerning my license or license application at a public Board meeting. I acknowledge that the Board may discuss any of my pertinent licensing history, as well as any of my pending application(s) and the information within. I understand that the discussion will occur during an open Board meeting where members of the public may be present.

I understand that under the Minnesota Government Data Practices Act, Minnesota Statutes Section 13.41, data other than my name and address submitted to the Board as part of my application for a license is classified as private data and would not normally be accessible to the public until the Board issues a license to me.

I hereby authorize the Board to discuss data within my pending license application and any issues related to the application at the Board meeting. I understand that members of the public may be present during the discussion between myself and the Board.

The purpose of this authorization is to provide information to assist the Board's review of my concerns regarding my application. I understand that I am not legally required to sign this form and am doing so on my own accord. I acknowledge that if I do not sign this form, the Board will not discuss my application data, or any data related to my application, at a Board meeting and that my application will be approved or denied based on solely the application and information submitted within.

This authorization expires one year after the date provided below.

I understand that I can revoke this authorization, but not retroactively as to discussions of application data with the Board that have already occurred, if I notify the Board in writing that I wish to revoke it, before the one year period expires.

I agree that I will not bring any legal claim or action against the Board alleging a violation of the Minnesota Government Data Practices Act or the Minnesota Open Meeting Law, or alleging any other violation of law, related to my appearance before the Board and the data presented to or discussed by the Board.

I acknowledge that I have read the above information pertaining to data practices. I have completed all required sections of this form and have attached the required corresponding documentation.

Printed Name	Signature	Date
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This form and any corresponding documentation must be received at the BCE office at least 30 days prior to the next Board meeting date to be eligible for the meeting agenda. If BCE staff do not confirm receipt of your request within one week of your submission, please call the BCE office.