

**Record of Work Experiences
Trade Qualifier or Pre-Apprenticeship Credits**

HAIRSTYLIST

Note to Apprenticeship Applicants

The work experiences on this form are for credit only and must have been performed prior to your registration as an apprentice.

Applicant Information

Name: _____			
<i>Surname</i>	<i>First</i>	<i>Initial</i>	
Address: _____ / _____ / _____ / _____			
<i>P. O. Box/Street</i>	<i>City/Town</i>	<i>Province</i>	<i>Postal Code</i>
Telephone: (____) _____		Cell: (____) _____	
Email address: _____			

Employer Information & Verification

<u>Note to Employer</u>			
By completing the section below you are confirming that the hours indicated for the applicant are specific to employment in the <u>Hairstylist Occupation.</u>			
Verified By: _____			
<i>Company Name</i>			
Address: _____ / _____ / _____ / _____			
<i>P. O. Box/Street</i>	<i>City/Town</i>	<i>Province</i>	<i>Postal Code</i>
Telephone: (____) _____	* CRA Business #: _____		
	<i>9 Digits</i>		
_____ <i>Employer or Representative Signature</i>	_____ <i>Employer or Representative (Print)</i>		
Date of applicant's employment from: _____ / _____ / _____ to: _____ / _____ / _____			
	<i>Month Day Year</i>		
Total Hours of Employment the applicant worked in the <u>Hairstylist Occupation:</u>			
_____ Hours			
* CRA - Canadian Revenue Agency			

Please check the appropriate box:

<p>Trade Qualifiers</p> <p><input type="checkbox"/></p>	<p>The <u>signature of the Journeyperson</u> following each of the required skills acknowledges the applicant has met the competencies in each of the skill areas according to the Industry Standard associated with this occupation.</p>
<p>Pre- Apprenticeship Credits</p> <p><input type="checkbox"/></p>	<p>The <u>signature of the Journeyperson</u> following each of the required skills acknowledges the applicant has performed in each of the skill areas appropriate for this occupation.</p>

- The Occupational Advisory Committee in the Hairstylist Occupation has identified the work experiences or skills listed below as those required for the occupation.
- Journeypersons must be certified in the occupation stated by this document. A Journeyperson in another occupation may sign certain sections if the skills are common to both occupations.

Skills Required For Certification	Journeyperson Signature	Verified By Applicant
HAIR CARE SERVICES AND PRODUCTS		
Consult with client on appropriate hair care services		
Analyse hair		
Recommend appropriate hair care retail products		
HAIRSTYLES		
Perform client consultation on different hairstyles		
Create and design hair styles utilizing a variety of tools, implements and techniques		
HAIRCUTS		
Consult, analyse, determine, recommend and perform appropriate cuts for male clients using clippers		
Consult, analyse, determine, recommend and perform appropriate cuts for male clients using razors.		
Consult, analyse, determine, recommend and perform appropriate cuts for male clients using shears		
Consult, analyse, determine, recommend and perform appropriate cuts for male clients using texturing shears		
Consult, analyse, determine, recommend, and perform appropriate cuts for female clients using clippers		
Consult, analyse, determine, recommend, and perform appropriate cuts for female clients using razors		

Skills Required For Certification	Journey person Signature	Verified By Applicant
Consult, analyse, determine, recommend, and perform appropriate cuts for female clients using shears		
Consult, analyse, determine, recommend, and perform appropriate cuts for female clients using texturing shears		
PERMANENT WAVES		
Consult with client		
Perform analysis on clients hair and scalp		
Select appropriate permanent wave based on analysis		
Perform permanent waves utilizing basic techniques		
Perform permanent waves utilizing advanced techniques		
HAIR COLORING		
Perform client consultation		
Analyse client hair and scalp		
Perform patch test		
Perform hair coloring services using a variety of colouring techniques and products		
BASIC AESTHETICS		
Consult with the client on aesthetic services		
Recommend to the client aesthetic services		
Analyse the client for service requested		
Perform aesthetic services		
FINISH		
Apply styling aid		
Dry hair according to style		

Note to Journeypersons

- Journeypersons who have applied their signatures to the skills required for the certification section of this document must complete the following sections.
- The Institutional and Industrial Education Division, for the purpose of verification, may contact Journeypersons who have applied their signatures to skills for applicants.

Journeyperson Supervisor Verification

Name: _____
Surname *First* *Initial*

Address: _____ / _____ / _____ / _____
P. O. Box/Street *City/Town* *Province* *Postal Code*

Telephone: (____) _____ Cell phone: (____) _____

Email address: _____

Certificate Number: _____ and/or I.P. Number: _____

Name (signature): _____

Journeyperson Supervisor Verification

Name: _____
Surname *First* *Initial*

Address: _____ / _____ / _____ / _____
P. O. Box/Street *City/Town* *Province* *Postal Code*

Telephone: (____) _____ Cell phone: (____) _____

e-mail: _____

Certificate Number: _____ and/or I.P. Number: _____

Name (signature): _____

For Office Use Only

Credit: _____

Approved by: _____ Date: _____

month / day / year

Note To Trade Qualifier Applicants

If employer verification is not possible please contact the nearest Institutional and Industrial Education Office to discuss available options.

Contact Information

email: app@gov.nl.ca

Toll-Free Telephone: 1-877-771-3737