



Please print clearly using block letters and a ballpoint pen. All sections must be completed.

Surname [] First names []

Previous surname (if applicable) []

Permanent address and postcode []

[]

Home phone [] Mobile phone []

NZQA number [] Email []

Employer name []

Salon name []

Salon address and postcode []

[]

Salon phone number []

Where would you like your results sent to? []

[]

Date of birth Day [] Month [] Year [] Male Female

I was assessed as "More Evidence Required" for Unit Standard 2757 at

Place of assessment [] Date []

<i>Please tick the element(s) that you are resitting</i>		Apprentice or QbyE in NZARH salon	Non Apprentice or QbyE in a non NZARH salon
Element 1	Perm service	\$75.00 <input type="checkbox"/>	\$150.00 <input type="checkbox"/>
Element 2	Colour service	\$75.00 <input type="checkbox"/>	\$150.00 <input type="checkbox"/>
Element 3	Long hair service	\$75.00 <input type="checkbox"/>	\$150.00 <input type="checkbox"/>

Please note: If you are resitting the perm or colour elements, you will be required to use the same cutting and drying methods you used previously.

TOTAL PAID \$ [] Receipt required Yes No (Please note this fee is non-refundable)

Fees to accompany application. Cheques to be made out to **HITO**.

I declare that the above particulars given are correct.

Candidate's signature [] Date []

Now please post to: **HITO**
PO Box 72 442, Papakura
AUCKLAND 2244

Office Use Only

Apprentice Non Apprentice/QbyE Other units checked & registered Association Member/Salon

Regional signature [] Receipt # [] Date paid []