



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 []

Barber shop name []

Barber shop address and postcode []

[]

Barber shop 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 10650 at

Place of assessment [] Date []

Please tick the element(s) that you are resitting		Apprentice or QbyE in NZARH salon	Non Apprentice or QbyE in a non NZARH salon
Element 1	No charge	\$40.00 <input type="checkbox"/>	\$50.00 <input type="checkbox"/>
Element 2	Commercial service	\$250.00 <input type="checkbox"/>	\$550.00 <input type="checkbox"/>

Please note: If you are required to resit your assessment you must do so within 18 months of your original assessment.

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 11 764, WELLINGTON 6142

Office Use Only

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

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