



Hairdressing Certification Application Form

TITLE: Mr Miss Mrs Ms GENDER: Male Female Other

FAMILY NAME: _____ GIVEN NAMES: _____

ADDRESS: _____

SUBURB: _____ POSTCODE: _____

TELEPHONE DETAILS WORK: _____

HOME: _____ MOBILE: _____

EMAIL: _____

Evidence required	Evidence provided (list the evidence attached)	Office use only
Completion of a Hairdressing qualification <i>Please note that this certification has been mapped on the NZ Certificate in Hairdressing (Professional Stylist) (Level 4) that includes the full range of services on clients. Copies of certificates must be signed by a Justice of the Peace (signed declaration).</i>	
Current industry/salon work experience <i>Evidence must prove 12 months salon experience immediately prior to or post qualification and must be signed by a Justice of the Peace (signed declaration).</i> <i>Evidence should include C.Vs with references and may include testimonies.</i>	
Professional development activities to maintain industry technical skills on a regular basis <i>Evidence must be current and should include certificates of attendance/participation of workshops/seminars/trade shows, and may include industry association memberships, etc.</i> <i>This evidence is mandatory for all applicants.</i>	

CANDIDATE SIGNATURE: _____ DATE: _____

Please submit this application with evidence attached to **HITO, PO Box 11764, Wellington 6142** with a cheque/money order for \$80.00. Please note that the \$80.00 is the administration fee and no refund will apply should the application not be successful. All information supplied is treated as **CONFIDENTIAL**.

