Commonwealth of Virginia
Department of Professional and Occupational Regulation

PROFESSIONAL CREDENTIAL SERVICES, INC.

Virginia Cosmetology Coordinator

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Virginia Board for Barbers and Cosmetology BODY-PIERCING APPRENTICESHIP COMPLETION FORM

UPON COMPLETION OF THE APPRENTICESHIP TRAINING, THE SPONSOR SHALL REVIEW THE APPRENTICE'S PROGRESS RECORD FOR THE TRAINING PERIOD, IF THE RESULTS OF THIS REVIEW INDICATE THE APPRENTICE IS NOW A CANDIDATE FOR THE BOARD'S EXAMINATION, THE SPONSOR SHALL COMPLETE AND SIGN THIS FORM. THE PROPERLY SIGNED FORM SHOULD BE SUBMITTED WITH THE *BODY-PIERCER LICENSE AND EXAMINATION APPLICATION* TO PCS.

Completion of the apprenticeship program shall qualify the apprentice to apply the Board to take the Board for Barbers and Cosmetology Body Piercer License Examination.

Curriculum requirements specified in 18 VAC 41-60-160 of the Virginia Board for Barbers and Cosmetology Body-Piercing Regulations shall be taught over a minimum of 1500 hours broken down into the following categories:

HOURS OF INSTRUCTION AND PERFORMANCES

Initial each category of instruction/performance to verify completion.

| Appr | entice Name | | | | | | |
|--|---|---|----|---------|------------|--|--|
| Last | | First | Mi | iddle | Generation | | |
| A. | 350 Hours | | | | | | |
| 1. | Microbiology | | | Sponsor | Apprentice | | |
| | a. Microorganisms, viruses, bacteria, fungi | | | | | | |
| | b. Transmission cycle of infectious diseases | | | | | | |
| c. Characteristics of antimicrobial agents | | | | | | | |
| 2. | Immunization | | | Sponsor | Apprentice | | |
| | a. Types of immunizations | | | | | | |
| | • | patitis A – G transmission and immunization | | | | | |
| | c. HIV/AIDS | 1 ' a | | | | | |
| | d. Tetanus, streptococcal, zoonotic, tuberculoe. Measles, mumps and rubella | d influenza | | | | | |
| | e. Measles, mumps and rubella f. Vaccines and immunization | | | | | | |
| | g. General preventative measure to be taken to protect the body piercer and client | | | | | | |
| 2 | | ,, ,, , ,, , , , | | Sponsor | Apprentice | | |
| 3. | Safety | | | Эринзи | Apprentice | | |
| | a. Proper needle handling and disposalb. How to avoid overexposure to chemicals | | l | | | | |
| | b. How to avoid overexposure to chemicalsc. The use of Material Safety Data Sheets | | | | | | |
| | d. Blood spill procedures | | | | | | |
| | e. Equipment and instrument storage | | | | | | |
| | f. First Aid and CPR | | | | | | |

| 4. | Professional Standards | Sponsor | Apprentice |
|----|---|---------|------------|
| | a. History of body piercing | | |
| | b. Ethics | | |
| | c. Record Keeping | | |
| | (1) Client health history | | |
| | (2) Consent forms | | |
| | (3) HIPPA Standardsd. Preparing station, making appointments, salon ethics | | |
| | (1) Maintaining professional appearance, notifying clients of schedule change: | ¢ | |
| | (2) Promoting services of the salon and establishing clientele | 3 | |
| | Salon Management | | |
| | e. (1) Licensing requirements | | |
| | (2) Taxes | | |
| | f. Supplies | | |
| | (1) Usages | | |
| | (2) Ordering (3) Storage | | |
| _ | | Caspoor | Arrantico |
| 5. | Body Piercing | Sponsor | Apprentice |
| | a. Client consultationb. Client health information | | |
| | c. Client disclosure form | | |
| | d. Client preparation | | |
| | e. Sanitation and safety precautions | | |
| | f. Implement selection and use | | |
| | g. Proper use of equipment | | |
| | h. Material selection and use | | |
| | i. Grade of jewelry | | |
| | j. Metals to use | | |
| 6. | Virginia Body-Piercing Laws and Regulations | Sponsor | Apprentice |
| | | | |
| B. | 150 Hours | | |
| 7. | Sanitation and Disinfection | Sponsor | Apprentice |
| | a. Definition of terms | | |
| | (1) Sterilization | | |
| | (2) Disinfection and disinfectant | | |
| | (3) Sterilizer or sterilant | | |
| | (4) Antiseptic(5) Germicide | | |
| | (6) Decontamination | | |
| | (7) Sanitation | | |
| | b. The use of steam sterilization equipment and techniques | | |
| | c. The use of chemical agents, antiseptics, disinfectants and fumigants | | |
| | d. The use of sanitation equipment | | |
| | e. Pre-service sanitation procedure | | |
| | f. Post-service sanitation procedure | | |

| C. | 1000 Hours Practical Training a | nd 100 Performances | | | |
|-------------------------|-------------------------------------|---|-------------------|-------------------|--|
| 8. | Body-Piercing Procedures | Sponsor | Apprentice | | |
| | a. Ear lobe | | | | |
| | b. Helix – ear | | | | |
| | c. Concha – ear | | | | |
| | d. Tragus – ear | | | | |
| | e. Tongue | | | | |
| | f. Naval | | | | |
| | g. Eyebrow | | | | |
| | h. Lip | | | | |
| | i. Septum | | | | |
| | j. Nostril | | | | |
| | k. Male nipple | | | | |
| | I. Female nipple | | | | |
| | m. Monroe (face cheek) | | | | |
| | n. Prince Albert (male genitalia) | | | | |
| | o. Frenum (male genitalia) | | | | |
| | p. Clitoral hoods (female genitali | a) | | | |
| | q. Labia (female genitalia) | • | | | |
| <u> </u> | | | Casasas | Ammontico | |
| 9. | Body-Piercing Performances - 7 | | Sponsor | Apprentice | |
| | a. Ear lobe | Minimum of 5 | | | |
| | b. Helix – ear | Minimum of 5 | | | |
| | c. Concha – ear | Minimum of 5 | | | |
| | d. Tragus – ear | Minimum of 5 | | | |
| | e. Tongue | · · | | | |
| | f. Navel | Minimum of 5 | | | |
| | g. Eyebrow | Minimum of 5 | | | |
| | h. Lip | Minimum of 5 | | | |
| | i. Septum | Minimum of 5 | | | |
| j. Nostril Minimum of 5 | | | | | |
| | k. Additional piercing of choice | Minimum of 50 | | | |
| D. | Health Education | | | | |
| 10. | Minimum of five hours of health e | ducation to include but not limited to | Sponsor | Apprentice | |
| | bloodborne disease, sterilization, | | • | | |
| | body-piercing, and first aid and Cl | | | | |
| | 31 3. | | | | |
| By s | signing below, we acknowledge | that the foregoing information and hours ar | e true and comply | with the Virginia | |
| Bod | y-Piercing Regulations and Appr | enticeship Standards. | | | |
| | | | | | |
| Appr | entice Name | | | | |
| VA A | Apprentice License No. | | | | |
| Cont | act Phone Number | | | | |
| Sign | ature of Apprentice | | Date | | |
| J | | | | | |

PLEASE CONTINUE TO NEXT PAGE

| Sponsor's Name | | | | | |
|-----------------------------|--|--|--|----------|--|
| VA Body Piercer License No. | | | | | |
| Salon Name | | | | | |
| VA Salon License No. | | | | | |
| Signature of Sponsor | | | | Date | |
| Contact Phone Number | | | | | |