



Board of Cosmetology

Sam Brownback, Governor

**BODY PIERCING TECHNICIAN 1200 HOURS  
APPRENTICE FINAL RECORD**

Apprentice Name \_\_\_\_\_  
(Please Print)

Apprentice Address \_\_\_\_\_  
(Please Print)

Apprentice SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

**SUBJECT** \_\_\_\_\_ **HOURS** \_\_\_\_\_

**HEALTH AND SAFETY** -----

- SANITATION, STERILIZATION, AND BLOOD-BORNE PATHOGENS
- SKIN: DISEASES, DISORDERS, AND CONDITIONS;
- ANATOMY
- UNIVERSAL PRECAUTIONS
- FIRST AID, C.P.R
- 

**CLINICAL/PRACTICAL** -----

- NEEDLES, EQUIPMENT AND SUPPLIES
- JEWELRY AND PLACEMENT
- BUSINESS OPERATIONS AND LAWS
- client relations

TOTAL HOURS \_\_\_\_\_

TOTAL PROCEDURES \_\_\_\_\_

Name of Trainer \_\_\_\_\_

Facility Name and Address of Apprenticeship:

\_\_\_\_\_  
\_\_\_\_\_

Start date \_\_\_\_\_ Date of Completion \_\_\_\_\_

Signature of Trainer \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Apprentice \_\_\_\_\_ Date: \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ County \_\_\_\_\_

SIGNATURE OF NOTARY: \_\_\_\_\_ NOTARY SEAL