## Return completed application to:

Commonwealth of Virginia
Department of Professional and Occupational Regulation
9960 Mayland Drive, Suite 400
Richmond, Virginia 23233-1485
(804) 367-8509



www.dpor.virginia.gov

## Board for Barbers and Cosmetology TATTOOER APPRENTICE CERTIFICATION APPLICATION No Fee Required

**NOTE:** This application for certification as a tattooer apprentice requires designation of a Board approved tattooer apprenticeship sponsor on a signed and notarized Apprenticeship Agreement. Upon successful completion of the required apprenticeship-training program, the apprentice will be required to also successfully complete the Board's licensing examination and meet other licensing eligibility requirements in order to obtain a tattooer license.

1.	Name	Final												
2	Last  Dravida and of the following identifies	First	*			IVII	iddle					Ger	neratio	Л
2.	Provide <u>one</u> of the following identific			ontrol Nive	mbar						. Г		П	$\neg$
	<ul><li>Social Security Number or</li><li>* State law requires every applicant for a lic</li></ul>			ontrol Nur		to engag	ne in a h	nusines	trade	nrofes	sion or	OCCUDA	tion iss	haus
	by the Commonwealth to provide a social											occupai	1011 133	ucu
3.	Date of Birth													
	MM/DD/YYYY													
4.	Mailing Address (PO Box accepted)													
		City								Ctata	- —	7im C	a da	
_		City	hock hor	o if Stroot A	droce ic ti	ho samo	ac tho	Mailing	Addros	State	Lahovo	Zip C	oae	
5.	Street Address (PO Box <u>not</u> accep	ted) $\Box$	HECK HEI	e if Street A	JULESS 15 (1	ne <u>same</u>	as ine	iviaiiiiiy	Addres	-5 แรเซน	above.			
														—
		City								State	- —	Zip C	ode	—
6.	Email Address	3,								Otato		p	040	
7.	Contact Numbers													
	Primar	y Telephone			Iternate Te									
8.		Have you completed a minimum of five (5) hours of health education to include but not limited to bloodborne disease,								se,				
sterilization, and aseptic techniques related to tattooing and first aid and CPR?  No														
	Yes  If yes, attach a cert	ficate or officia	al scho	ool trans	cript inc	dicatin	a suc	cess	ful co	mplet	tion c	of the	train	ina
	program. All health				•		_							_
	listed on the board's	•	v.dpor	<u>.virginia.ç</u>	gov/Boa	ards/Ba	arber	Cosm	<u>o/</u> ) uı	nder 1	the ta	ab sec	tion	for
	"Education and Exan	าร".												
Appre	enticeship Sponsor Designation:													
9.	Sponsor's Name													
	Sponsor's Virginia Tattooer License	Number:	1	2										
10.	Parlor Name			'	'	'								
	Virginia Parlor License Number		2 3	2										_
	ga . aa. 2.301100 (1011100)	_ 1	_   _	-					J					
	<u>,                                      </u>													
BOARD USE	APPLICATION REVIEW DATE  Check f	EAGLES or Sponsor Confir					,							
ONLY		ation Approved	cu [ ]		ertification				- -					

11.	Parlor Street Address				
		City		State	Zip Code
12.	Parlor Email Address				
13.	Parlor Contact Numbers	Primary Telephone	Alternate Telephone	_	
14.	No  Yes If yes, indic	approval for credits of previous ap ate the <u>number of hours</u> that on signed by your designated app of credits is subject to Board approval and c	you are requesting for approprenticeship sponsor listed above	val and att e.	ach supporting
	Experience - I	No. of Hrs: Related	d Instruction - No. of Hrs:		
		perience must be verified by submitting bmitting a transcript showing successful o		nce Verificati	on Form. Related
15.	Tattooing Regulations, and	consor Part II. ENTRY. Section 1 d I am aware of the qualification e information is true and correc	ns for licensure as a tattooer		
	Signature			_ Date	
		(Apprenticeship Agree	ment to follow)		

## APPRENTICESHIP AGREEMENT

The purpose of this Apprenticeship Agreement is to establish the obligations of all parties participating in the Virginia Board for Barbers and Cosmetology Apprenticeship Program for Tattooing.

By affixed signatures, the parties named below acknowledge that they have read and agree to comply with all requirements, terms and conditions established in the Virginia Board for Barbers and Cosmetology Tattooing Apprenticeship Standards and Tattooing Regulations.

## **ACKNOWLEDGEMENT**

Signature				]	Date
	Signature of Apprentic	е			
Signature				[	Date
	(If Required) Signature	e of Legal Guardian			
Signature				[	Date
	Signature of Apprentic	eship Sponsor			
Signature				]	Date
	Signature of Tattooer I	Parlor Owner			
Notarization					
In the State of		, City/County of _		, subscribed an	d sworn before me, the
undersigned N	lotary Public in and	d for the City/County afor	resaid this	, day of	, 20
My commissio	n expires the	, day of	, 20	·	
Affix	official seal here.		S	Signature of Notary Public	