

Tattoo Artist Apprenticeship Log

Start Date:

Finish Date:

Date	Curriculum Categories	Method of Evaluation	Date Completed	Hours Completed	Sponsors Initials	Apprentice Initials
	Orientation 100 Hours					
	state laws and regulations;					
	tax and business license requirements;					
	OSHA bloodborne pathogens standard;					
	the establishment's exposure control plan;					
	SDS sheets;					
	paperwork and business documentation;					
	HIPAA (Health Insurance Portability and Accountability Act of 1996 privacy rule);					
	environment/appropriate studio set-up;					
	professional image;					
	appropriate communication with clients;					
	ethics and legalities;					



	minors;					
	drugs and alcohol;					
	medical conditions/risk assessment;					
	personal boundaries;					
	Dealing with emergencies:					
	blood spills;					
	fainting;					
	bleeding;					
	needlesticks;					
	other exposures.					

SECTION TOTAL:

Date	Curriculum Catagories	Method of Evaluation		Hours Completed	Sponsors Initials	Apprentice Initials
	Sterilization, Disinfection Theory and Practical 100 Hours					
	microbiology;					
	definitions;					
	microorganisms of the skin;					
	factors that influence the survival and growth of microorganisms;					
	breaking the chain of infection;					
	infection control;					



	handwashing;					
	types of soaps and hand sanitizers;					
	use of gloves and other personal protective equipment;					
	how to recognize, prevent and remedy cross-contamination;					
	immunizations;					
	cleaning, disinfection and sterilization;					
	sterile chart;					
	cleaning/appropriate procedures;					
	Implement pre-cleaning before sterilization/appropriate use of cleaning solutions and ultrasonic cleaners;					
	disinfection/appropriate use and disposal of disinfecting solutions;					
	sterilization/appropriate use and maintenance of autoclave sterilizers.					

SECTION TOTAL:



Sponsor Name: _____ Sponsor Signature: _____

Apprentice Name: _____ Apprentice Signature: _____

AFFIDAVIT:

I _____, under penalty of perjury, HEREBY DEPOSE AND STATE, that I am the person described and identified in this application and the information given by me is true and complete to the best of my knowledge and belief. I understand that any information contained in this application may be investigated and any false or dishonest answer to any question in this application may be grounds for denial or revocation of my license.

I further understand I cannot work as a Body Artist until I have received a license issued by the Regulation and Licensing Department.

Applicant's Signature _____ Date _____

