



Department of Commerce, Community, and Economic Development Division of Corporations, Business and Professional Licensing

Board of Barbers and Hairdressers

PO Box 110806, Juneau, AK 99811 Website: ProfessionalLicense.Alaska.Gov/BoardOfBarbersHairdressers

Body Piercing Trainee Quarterly Report

A trainer must submit a report on each trainee under the trainer's supervision, on a form provided by the department, no later than the 15th day after the calendar quarter. The report must include the exact number of hours of theoretical instruction and the exact number and type of practical operations completed by the trainee during the previous quarter. The quarterly report must maintain continuity from month-to-month from the date the training begins to the date of termination or completion of the course of training regardless of attendance by the trainee.

PART I Trainee Information

Trainee Name:	Trainee Permit Number:	
Shop Name:		
For the Months of:	Year:	

P	AR	T II	ł	Ιοι	ırs	of /	Att	enc	lan	ce																				
Month 1 of Quarter											Total Hours This Month:																			
01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31

	Month 2 of Quarter											т	otal	Hou																
01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31

	Month 3 of Quarter											Total Hours This Month:																		
01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31

FOR DIVISION USE ONLY

PART III Practical Operations

Subject	Number of Practical Operations Performed This Quarter
Practical operations observed by the trainee.	
Practical operations in which the trainee participated.	
Practical operations performed by the trainee under supervision, but without assistance.	

PART IV Theory Hours

Subject	Number of Theory Hours Earned This Quarter
Safety, sanitation, sterilization, and aseptic.	
Anatomy and physiology.	
Skin and skin disorders.	
Aftercare techniques.	
Equipment and supplies.	
Alaska statutes and regulations.	

PART V Signature

I certify that the above information is true and correct to the best of my knowledge.											
Trainee Printed Name:											
Trainee Signature:		Date Signed:									
Trainer Printed Name:											
Trainer Signature:		Date Signed:									