

Open Colleges

Diploma of Beauty
Workplace Assessment Approval Form

Sarah Sheppard

Student name: XXX XXXX

Student number: XXXXXX *E0484235*

Assessment Number: 22245/WA

About this Form

To successfully complete the Workplace Assessments, you need to undertake a range of practical tasks over a period of time in an appropriate workplace and under the supervision of an appropriately qualified and experienced supervisor.

This form captures important information about the proposed workplace where you are seeking to undertake the Workplace Assessments and Work Placement. It includes basic details about the workplace as well as more specific information about the resources and facilities available at the workplace. It also asks for detailed information about the proposed Workplace Supervisor.

This information will be reviewed by the Workplace Assessor to determine whether the workplace and Workplace Supervisor are appropriate for the completion of the Workplace Assessments and Work Placement (if applicable). The Workplace Assessor may seek further clarification from the student or Workplace Supervisor before formally approving the workplace.

Submission Instructions

The student should complete this Microsoft Word document electronically. Once this document is completed (excluding Section F, which will be completed by the Workplace Assessor) it should be submitted via the *Workplace Assessment Approval Form* upload link in OpenSpace or send by fax to the Student Support Team on fax number (02) 9433 3666.

Section A: Student Details

Student Details

Student Name:	Sarah Sheppard
Student Number:	E0484235
Qualification Name:	Diploma of Beauty Therapy
Home Address	9 Wendy Court Hampton Park
State	Victoria
Postcode	3976
Home Telephone	9799 3925
Mobile Number	0413081533
Email Address	Saire-Bear777@live.com.au

Preferred Communication

What is your preferred method of communication with Workplace Assessor (please tick)?

- Home phone
- Mobile phone
- Email

Section B: Workplace or Host Organisation Details

B1 Details of Workplace or Host Employer

Business Name	GLAM BEAUTY & NAILS
Company ABN	40 097 190 701
Business	Street Address: SHOP 2 3 MURPHY ST
	Postal Address: SOUTH YARRA.
	Phone Number: 03 9866 2320
	Fax Number: -
	Website: www.glambeautyandnails.com
Workplace Supervisor	Name: DEBRA STREET
	Position Title: PROPRIETOR
	Phone Number: 0422 077501
	Fax Number: -
	Email: glambeauty1@bigpond.com
Summary of the business and activities of the organisation	natural nails, manicure & pedicure, gel & acrylic, waxing, spray tanning, lash extensions
Are you currently employed with this company?	Yes: <input checked="" type="checkbox"/> Go to B2 No: <input type="checkbox"/> Go to Section C

B2 Employment Details

How long have you been employed at the workplace?	Years Months 7
What is your current position title?	PROPRIETOR
Are you a permanent employee?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Are you a full-time employee?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
How long have you been in this position?	Years Months 7
How many hours do you work each week?	Hours 50
Will your Workplace Assessments be conducted within your current working hours?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If no, will you be paid by your employer to undertake the additional hours required to complete the Workplace Assessments?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Proceed to **Section C**.

Section C: Workplace Assessment Agreement

Instructions

The student should complete the highlighted fields below. The Workplace Supervisor should review and verify this information and provide their verbal consent to the terms of the agreement prior to the student submitting this form. This form should be completed and submitted electronically by the student. During the initial interview, the Workplace Assessor will also confirm the Workplace Supervisor's agreement to the terms below.

Host Organisation / Employer Agreement

DEBKA STREET	QUAM BEAUTY & NAILS		
Insert Name of Workplace Supervisor	of Insert Name of Organisation	approve	Insert Name of
Student to work in either a paid or unpaid capacity in order for him/her to develop and demonstrate the application of skills and knowledge in a workplace context.			
Sarah Sheppard			
I acknowledge that I have received the Workplace Assessment Guide and understand the roles and responsibilities of the Workplace Supervisor and Host Organisation/Employer. I agree to mentor the student and provide verbal feedback on his/her performance in the workplace to the student and Open Colleges' Workplace Assessor.			
I authorise the Open Colleges' Workplace Assessor to assess the student's learning and progress through regular phone interviews.			

Student Agreement

Sarah Sheppard
I Insert Name of Student acknowledge that I have received the Workplace Assessment Guide and understand my roles, responsibilities and obligations in the Workplace Assessment process. I agree to abide by any policies and procedures of Insert Host Organisation or Employer, including confidentiality, professional conduct and occupational health and safety.
I authorise Open Colleges to discuss my enrolment and Workplace Assessment activities with Insert Name of Organisation. I authorise my Workplace Supervisor to discuss my progress in the Workplace Assessment activities with the Workplace Assessor.
QUAM BEAUTY & NAILS

Section D. Workplace Resources Checklist

Instructions:

The following table outlines the specific accreditation, facilities or equipment requirements at the workplace in order for the student to be able to successfully complete the requisite Workplace Assessments. The student should complete this checklist based on information obtained from the Workplace Supervisor. The Workplace Supervisor should verify that that information is correct.

This table should be completed and submitted electronically by the student. The Workplace Assessor will verify this information with the Workplace Supervisor during the initial interview.

Retail Facilities			
A reception desk	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Telephone	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Retail & merchandise display area	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Point-of-sale system, including credit card and EFTPOS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Computer with a salon software system	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Financial transactions dockets and slips	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Sample debit and credit card vouchers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Recording and tally sheets	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Product labels and sources of product information	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
A range of merchandise and products appropriate to the retail workplace	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
A range of ticketing and pricing equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Display materials and props	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Cleaning materials	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Specific Resources			
Professional comprehensive make-up and camouflage make-up range	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Professional comprehensive skin care range	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Professional range facial massage products	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Professional range of lash and brow colouring products	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Professional range of depilatory wax and soothing after-treatment products	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Professional massage work environment and aromatic massage oils	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
A fully equipped beauty therapy work station, including:			
o Adjustable make-up chair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
o Operator chair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
o Make-up lighting at each work station	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
o Magnifying mirror	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
o Adjustable massage table/couch	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
o Towels, client gown	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

<input type="radio"/> Adjustable facial couch	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> Facial steamer or vapourzone	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input type="radio"/> Effective exhaust system for nail chemical fumes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> Manicure table	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> Pedicure equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> Nail table lamp	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> Electric file	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> Implement sanitising tray	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> Hand and nail sanitiser at each table	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> UV light	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> Desk lamp, mats, towels	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> Make-up brushes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> Files, including emery boards, metal and buffers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> Tip cutters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> Sculpting forms	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> Cuticle pushers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> Tweezers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> Eyelash curlers	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input type="radio"/> Temperature controlled hot wax or strip wax at each work station	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> Stable wax pot bench area with electricity supply in each work station	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> Disposable spatulas and gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> Personal protective equipment, including disposable gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="radio"/> Appropriate cleaning and disinfection products and equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Access to a range of clients and customers with			
Different service requirements	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Different skin and hair characteristics and treatment requirements		<input checked="" type="checkbox"/>	
Product and treatment requirements		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Different beauty requirements		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Different make-up requirements		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Different skin care requirements		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Common skin disorders seeking beauty treatments		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Different camouflage make-up requirements		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Common nail disorders who are seeking nail treatments		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Acrylic nail requirements		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Different manicure or pedicure requirements		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Different massage requirements		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Different facial requirements		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Different waxing requirements		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Different financial transaction requirements		<input checked="" type="checkbox"/>	<input type="checkbox"/>

Workplace Documentation		
Store policy and procedures manuals	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Workplace policy and procedure manuals relating to customer service techniques, personal presentation, as well as complaint handling and resolution	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Government legislation on equal opportunity	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Equal employment opportunity (EEO) and anti-discrimination procedures for the store	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Access to awards and agreements	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Manufacturer instructions and operation manuals	<input checked="" type="checkbox"/>	<input type="checkbox"/>
WHS regulations and sample policies for the store	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Legislation and statutory requirements	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Industry codes of practice.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Workplace policy and procedure manuals in regard to conducting financial transactions	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Store or sample policy and procedures in regard to workplace ethics	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Store or sample job descriptions and organisational charts	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Store or sample documentation regarding mission and goals for the company	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Store or sample policy and procedures in regard to the rights and responsibilities of employers and employees in the workplace	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Retail Documentation		
Stock, inventory or price lists	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lay-by, credit and product return slips	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Store policy and procedures manuals	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Stock sheets	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Planograms	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Timetables, staff record forms	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lay-by slips	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Credit slips	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Product return slips	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Telephone message pads	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Section E. Workplace Supervisor Details

Instructions:

As outlined in the Workplace Assessment Guide, it is important that the Workplace Supervisor has appropriate experience and qualifications in order to provide effective guidance and support of the student throughout the Workplace Assessment process.

This form should be completed by the student using information supplied by the Workplace Supervisor. The Workplace Supervisor should review and verify the information supplied prior to the student submitting this form. This form should be completed electronically by the student. The Workplace Assessor will also verify this information with the Workplace Supervisor during the initial interview.

Requirements	Evidence of meeting the requirement
Requirement: At least three years full-time experience in the last five years within the provision of professional beauty therapy services	Debra has been involved in the beauty industry for over 30 years
AND	
Requirement: Completed at least the Diploma in Beauty Therapy, or equivalent, beauty therapy qualification	She currently holds certificate IV in training and assessment
OR	
Requirement: Be an individual currently employed as a Beauty Therapist or Salon Manager	she currently manages her own salon
Desirable: Experience in the provision of workplace supervision.	She currently holds certificate IV in training and assessment.

Section F. Approval (to be completed by Workplace Assessor)

Based on the information provided in this Form and verified through an initial interview with the student and Workplace Supervisor, I confirm (please tick):

<input type="checkbox"/>	1. The proposed workplace is appropriate for the completion of the Workplace Assessment
<input type="checkbox"/>	2. The proposed workplace is inappropriate for the completion of the Workplace Assessment
	If (2), please provide an explanation below:

<input type="checkbox"/>	1. The proposed Workplace Supervisor is suitable for providing supervision of the student undertaking the Workplace Assessments
<input type="checkbox"/>	2. The proposed Workplace Supervisor is not suitable for providing supervision of the student undertaking the Workplace Assessments
	If (2), please provide an explanation below:

Workplace Assessor Name	Assessor Number	Date

Work Placement Centre Application Form	
Given Name: Sarah	Surname: Sheppard
Address: 9 Wendy Court Hampton Park Vic 3176	
Student Number: E0484235	Email: Saire-Bear777@liv.com.au
Phone: 9799 3925	Mobile: 0418081533
Course Name: Diploma of Beauty Therapy	
Name Centre: Glam Beauty & Nails	Location of Centre: South Yarra
Proposed start date to attend Work Placement Centre: 5, 8, 2015	
Mode of attendance (please circle): Full-time <u>Part-time</u> – if part time, circle what days available below: M T <u>W</u> T F <u>S</u>	
Compulsory Document Checklist <ul style="list-style-type: none"> • National Police Check attached <input type="checkbox"/> • Current Immunisation Records <input type="checkbox"/> • Verified First Aid Certificate attached <input type="checkbox"/> 	

Policies and Procedures: By completing this form the student agrees to abide by the policies and procedures as set forth by the Work Placement Centre. Any student who engages in activities or behaviours contrary to the policies and procedures of the Work Placement Centre may have their agreement cancelled, and a cancellation fee may apply.

Cancellation or Deferral Conditions: Upon confirmation of attendance between the student and the centre, should you cancel or defer training within 14 days of the scheduled training date you accept that; you will forfeit your booking and incur a cancellation fee. The cancellation fee will applied according to the Schedule of fees that outlines the agreement amount that is paid by Open Colleges to the Host Organisation / Work Placement Centre.

The Schedule of fees are outlined below:

- Certificate IV Allied Health: \$35 for each day that is scheduled for placement. 160 hours of full-time placement = 20 days
- Certificate IV in Veterinary Services = \$750
- All other courses for CIV = \$400
- All courses for CIII = \$360
- Diploma courses = \$440

Travel and accommodation costs: The travel and accommodation costs to attend an Open Colleges Work Placement Centre, is at an additional expense to the student.

Declaration

I have read, understand and accept the Work Placement Centre Cancellation conditions. I accept the travel and accommodation cost to attend the Work Placement Centre is at my own expense. I declare that the information I have provided is correct and complete. I understand I must comply with all terms and conditions. I give permission for Open Colleges to pass on my full name, course of study and contact details (phone, mobile and email address) to the Work Placement Centre in order to organise my attendance.

Signature Sheppard Date 15, 7, 2015