

MEMORANDUM

TO: Licensees

FROM: Vanessa Beauchamp
Executive Director

Date: January 29, 2010

RE: Apprenticeships

Effective January 30, 2010, new regulations require that within ten (10) days of an apprenticeship beginning, a supervising practitioner must register all people who are working on fulfilling the required apprenticeship requirements under his or her supervision.

It will be necessary that you complete the *Registration of Supervisory Relationship* form for each apprentice you will be supervising. The form should be submitted to the above address within ten (10) days of the apprenticeship commencing.

Upon completion of the apprenticeship, regulations require that an apprentice's proof of completion of the apprenticeship be submitted on forms prescribed by the office. The *Certification of Apprenticeship* form should be used to track all hours/procedures completed. An apprentice should return the *Certification of Apprenticeship* with his or her application, all required documents, and the appropriate fee once all requirements are met.

Please note that no license will be issued to an individual working on fulfilling the apprenticeship requirements; the registration of supervisory relationship is merely a registration. In addition, an individual may have more than one supervising practitioner. However, each supervising practitioner must be registered with the Office as described above.

If you have any questions, please contact the office at the above number.



STATE OF MISSOURI
 DIVISION OF PROFESSIONAL REGISTRATION
REGISTRATION OF SUPERVISORY RELATIONSHIP

OFFICE OF TATTOOING, BODY PIERCING AND BRANDING
 3605 MISSOURI BOULEVARD
 JEFFERSON CITY MO 65109
 TELEPHONE: 573-526-8288
 FAX: 573-526-3489

I hereby certify that I am a licensed tattooist, body piercer and/or brander meeting the required qualifications for a supervisor as promulgated by the Division of Professional Registration/Office of Tattooing, Body Piercing and Branding in 20 CSR 2267-2.010(1)(c). I agree to supervise the practitioner named on this form. I understand that I am responsible for the training, guidance and direct supervision of the practitioner as outlined in 20 CSR 2267-2.010(1)(c). I further understand that I am to notify the Office within ten (10) days of termination of the supervisory relationship.

SUPERVISOR NAME (TYPED OR PRINTED)	SUPERVISOR LICENSE NUMBER
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NAME OF ESTABLISHMENT

ESTABLISHMENT ADDRESS (STREET, CITY, STATE, ZIP CODE)

SUPERVISOR'S SOCIAL SECURITY NUMBER	TYPE OF APPRENTICESHIP (TATTOOING, BODY PIERCING AND/OR BRANDING)	ESTABLISHMENT LICENSE NUMBER
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SUPERVISOR'S SIGNATURE	DATE
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NOTARY PUBLIC EMBOSSER OR BLACK INK RUBBER STAMP SEAL	STATE	COUNTY (OR CITY OF ST. LOUIS)	
	SUBSCRIBED AND SWORN BEFORE ME, THIS		
	DAY OF	YEAR	USE RUBBER STAMP IN CLEAR AREA BELOW.
	NOTARY PUBLIC SIGNATURE	MY COMMISSION EXPIRES	
NOTARY PUBLIC NAME (TYPED OR PRINTED)			

NAME OF SUPERVISEE (FIRST, MIDDLE INITIAL, LAST - TYPED OR PRINTED)

SUPERVISEE HOME MAILING ADDRESS (STREET, CITY, STATE, ZIP CODE)

SUPERVISEE'S TELEPHONE NUMBER	SUPERVISEE'S SOCIAL SECURITY NUMBER	DATE
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SUPERVISEE'S SIGNATURE

NOTARY PUBLIC EMBOSSER OR BLACK INK RUBBER STAMP SEAL	STATE	COUNTY (OR CITY OF ST. LOUIS)	
	SUBSCRIBED AND SWORN BEFORE ME, THIS		
	DAY OF	YEAR	USE RUBBER STAMP IN CLEAR AREA BELOW.
	NOTARY PUBLIC SIGNATURE	MY COMMISSION EXPIRES	
NOTARY PUBLIC NAME (TYPED OR PRINTED)			



STATE OF MISSOURI
 DIVISION OF PROFESSIONAL REGISTRATION
CERTIFICATION OF APPRENTICESHIP

OFFICE OF TATTOOING, BODY PIERCING AND BRANDING
 3605 MISSOURI BOULEVARD
 JEFFERSON CITY MO 65109

Pursuant to 20 CSR 2267-2.010(2)(c), an apprenticeship shall include at least 300 hours with a minimum of 50 completed procedures.

APPRENTICE NAME (PRINT)		SUPERVISOR NAME (PRINT)			SUPERVISOR LICENSE NO.
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PATRON'S NAME	PATRON'S AGE	DATE OF PROCEDURE	NO. OF		SIGNATURE OF APPRENTICE	SIGNATURE OF SUPERVISOR
			HRS.	MINS.		
TOTAL						