

## BODY ART APPRENTICE CHECK LIST

Name of Applicant: Paul Bohl

---

Phone Number: on file

---

Establishment Affiliation: Blaqsheep Ink

---

Establishment Address: 564 Dutton St Lowell, MA 01854

---

Establishment Phone Number: 978-656-8017

---

EXP DATE	Description of Document
----------	-------------------------

<u>received 3/6/21</u>	<b>Application</b>
<u>received 3/6/21</u>	<b>Check for \$250. Check Number:</b> <u>3946639</u>
<u>received 3/6/21</u>	Letter of Hire from Potential Employer
<u>received 3/6/21</u>	Letter from Licensed Practitioner overseeing apprenticeship
<u>expires 11/17/21</u>	<i>Blood Borne Pathogen Certificate</i>
<u>expires 11/17/22</u>	<i>Basic First Aid Card</i>
<u>expires 11/17/22</u>	<i>Advanced CPR Card (if separate from First Aid Card)</i>
<u>Skin Course 1.17.21</u>	Anatomy & Physiology I & II (Tattoo or Piercing) <b>OR</b> Certificate of Completion of Approved Skin Course (Tattoo Only)
<u>2 shots completed</u>	Hepatitis B Vaccination Status <b>1:</b> <u>12.2.20</u> <b>2:</b> <u>2.18.21</u> <b>3:</b> <u>PENDING 5/18/21</u>
<u>MA expires 5.1.21</u>	<i>Driver's License/State ID</i>
<u>pending letterhead</u>	Apprentice Client Consent Form

**Bold = New every year**

*Italicised require updating when expired*