

## HEALTH LICENSING OFFICE Board of Electrologists and Body Art Practitioners

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## **BODY PIERCING TEMPORARY TRAINEE /**

SUPERVISOR DECLARATION OF RESPONSIBILITY						
To be completed by the Trainee and Supervisor and submitted with the applicable level of trainee license application. This Declaration of Responsibility is being submitted for:						
☐ Star	ndard I	Body Piercing ☐ Specialty Level One Body Piercing ☐ Specialty	Level Two Body Piercing			
Trainee – Read and Sign						
By signing below, I agree to fulfill the requirements of my training by:						
<ul> <li>Performing only the services of Standard Body Piercing, Specialty Level One Body Piercing, or Specialty Level Two Body Piercing as defined in Oregon Administrative Rule 331-900-0000 and 331-905-0000</li> </ul>						
<ul> <li>Working only under the direct supervision of my Health Licensing Office (HLO) approved supervisor during the completion of my training;</li> </ul>						
<ul> <li>Developing theory and practical skills by accepting the management, guidance and control over my body piercing activities as provided to me by my onsite supervisor;</li> </ul>						
•	Notifyi	ng the HLO in writing within ten (10) calendar days if changes occur in my employment	ent or supervisor status;			
•	Respo	onding to requests for information from the HLO regarding the process of my training	; and			
•	Adher	ing to all standards within Oregon Administrative Rule chapter 331, division 925				
⊃ Tra	ainee	Signature:	Date:			
Supervisor – Read and Sign						
By signing below, I attest that as a (select one level below):						
	Standard Body Piercing Supervisor I must:					
		Submit a completed application form prescribed by the HLO, which must contain the 331-030-0000;	e information listed in OAR			
	Hold an active Standard Body Piercing license, <b>or</b> a Specialty Level One Body Piercing license, <b>or</b> a Specialt Level Two Body Piercing license with no current or pending disciplinary action; <b>and</b>					
		Have been actively practicing Standard Body Piercing for at least two (2) of the past current or pending disciplinary action.	t five (5) years, with no			
		Submit proof of current cardiopulmonary resuscitation and basic first aid training fro provider;	m a HLO-approved			
		Submit proof of current blood borne pathogens training from an HLO-approved prov	vider; <b>and</b>			
		Adhere to all standards in Oregon Administrative Rules, Chapter 331, division 900.				
Specialty Level One Body Piercing Supervisor I must:						
		Submit a completed application form prescribed by the HLO, which must contain the 331-030-0000;	e information listed in OAR			
		Hold an active Specialty Level One Body Piercing license <b>or</b> a Specialty Level Two no current or pending disciplinary action;	Body Piercing license with			
		Have been actively practicing Standard Body Piercing for at least two (2) of the past date of application;	t five (5) years before the			
		Submit proof of current cardiopulmonary resuscitation and basic first aid training fro provider;	m a HLO-approved			
		Submit proof of current blood borne pathogens training from an HLO-approved prov	vider; <b>and</b>			
		Adhere to all standards in Oregon Administrative Rules Chapter 331 division 905				

	Specialty Level Two Body Piercing Supervisor I must:				
		Submit a completed application form prescribed by the HLO, which must contain th	e information listed in OAR		
		Hold an active Specialty Level Two Body Piercing license with no current or pendin	g disciplinary action;		
		Have been actively practicing Standard Body Piercing for at least two (2) of the past date of application;	st five (5) years before the		
		Submit proof of current cardiopulmonary resuscitation and basic first aid training fro provider;	om a HLO-approved		
		Submit proof of current blood borne pathogens training from an HLO-approved pro	vider; <b>and</b>		
		Adhere to all standards in Oregon Administrative Rules, Chapter 331, division 905.			
By signing below, I agree to fulfill the requirements of a supervisor by:					
•	Supervising only one (1) trainee per shift and provide direct supervision when piercing services are being performed;				
•	<ul> <li>Exercising management, guidance, and control over the activities of the trainee and must exercise professional judgment and be responsible for all matters relative to the trainee;</li> </ul>				
•	Documenting the work done by the trainee on a form prescribed by the Health Licensing Office (HLO) and maintain training documentation for a minimum of two (2) years following completion of training;				
•	Notifying the HLO in writing within five (5) calendar days if a trainee is no longer being supervised and must provide the number of hours of training completed on a form prescribed by the HLO; and				
•	<ul> <li>Responding to requests for information from the HLO regarding the progress of the training.</li> </ul>				
<b>By signing below,</b> I attest that as an active licensed body piercer in the State of Oregon, I will provide direct supervision to the above-named trainee applicant and will perform all the activities and duties for which I am responsible pursuant to Oregon Administrative Rule 331-900-0050 and 331-900-0055, or 331-905-0052 and 331-905-0055, or 331-905-0058 and 331-905-0060, and I attest to meeting the Supervisor Qualifications indicated above.					
<b>•</b>	Super	risor Signature:	Date:		