



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

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**TATTOOING COURSE OF STUDY APPROVAL REQUEST**

Please submit this form along with the course of study curriculum for approval.

**School Information**

SCHOOL NAME:		DATE OF REQUEST:	
SCHOOL ADDRESS: (PHYSICAL LOCATION)			
CITY:		STATE:	ZIP:
SCHOOL MAILING ADDRESS: (IF DIFFERENT FROM ABOVE)			
CITY:		STATE:	ZIP:
SCHOOL BUSINESS PHONE NUMBER:	SCHOOL EMAIL ADDRESS:		

**School Owner Information**

SCHOOL OWNER NAME: FIRST	LAST	MIDDLE INITIAL
OWNER PHONE: <input type="checkbox"/> BUSINESS <input type="checkbox"/> CELL	OWNER EMAIL ADDRESS:	

**School Director Information (if different from school owner)**

SCHOOL DIRECTOR NAME: FIRST	LAST	MIDDLE INITIAL
DIRECTOR PHONE: <input type="checkbox"/> BUSINESS <input type="checkbox"/> CELL	DIRECTOR EMAIL ADDRESS:	

**Curriculum Requirements**

- ✓ 360 hours of instruction. 210 hours of theory and at least 150 hours of practical work.
- ✓ 50 completed procedures as outlined in OAR 331-915-0005(2).
- ✓ Minimum requirements:
  - (a) Needles and needle bars — metal or plastic device used to attach the needle to a tattoo machine: 20 hours of theory;
  - (b) Tattoo machines and equivalent equipment: 20 hours of theory;
  - (c) Equipment/Supplies: 20 hours of theory;
  - (d) Safety, Infection Control and Sterilization: 40 hours of theory;
  - (e) Basic color theory and pigments: 10 hours of theory;
  - (f) Design, art and placement: 10 hours of theory;
  - (g) Skin: 20 hours of theory;
  - (h) Client services 20 hours of theory;
  - (i) Business operations, including exposure control plan and federal regulations: 40 hours of theory;
  - (j) Oregon Laws and Rules: 10 hours of theory training.
- ✓ All hours of theory must be completed prior to practical work being performed on the general public.
- ✓ Training must be conducted by an Oregon licensed tattoo artist registered as a teacher by the Department of Education, Private Career Schools.
- ✓ A registered teacher must provide direct supervision of practical training on a one-to-one student/teacher ratio for students performing practical training while the student is working on the general public.

*By signing below, I hereby attest that the curriculum provided meets the above criteria.*

**Authorized School Representative:**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_