



SCA

SCHOOL / COLLEGE APPLICATION FOR CIBTAC RECOGNITION

APPLICATION IS SOUGHT TO OFFER CIBTAC EXAMINATIONS

SECTION A – ADMINISTRATION DETAILS

1. SCHOOL/COLLEGE NAME:

 For mailing purposes please give an appropriate abbreviation of not more than 25 characters

2. ADDRESS

_____ Town _____
County _____ Post Code _____
Telephone Number _____
Fax Number _____
E-Mail Address _____

3. Principal/Owner's Name: _____

4. Contact name (for correspondence) _____

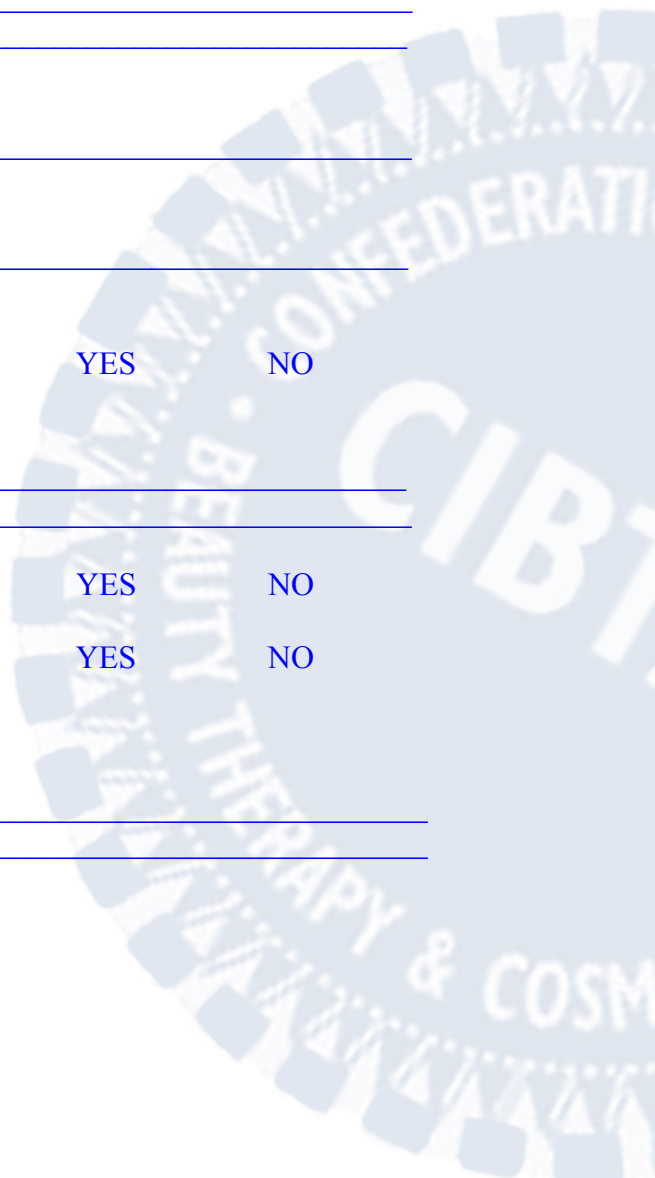
5. Have you registered with another examining body? YES NO
If yes, please state:

Examining Body and qualifications offered _____

Was approval turned down YES NO

Was approval withdrawn YES NO

6. Where did you first hear of CIBTAC?



SECTION B – STAFFING

1. Name of Head of Beauty/Holistic Therapy

2. Name of Tutors/Teachers

1	5
2	6
3	7
4	8

3. a) Does the Course Team hold regular meetings? YES NO
b) What evidence can you provide to support this e.g. team minutes
-

N.B. Please ensure that each of the above listed under No.1 and 2 completes the attached teachers C.V. forms and enclose them with copies of certificates with your application.

4. Do all members of staff receive training to ensure that they appreciate the purpose of CIBTAC procedures for
- | | | |
|---|-----|----|
| a) Approval/reports | YES | NO |
| b) Registration/examination fee processes | YES | NO |
| c) Syllabus requirements | YES | NO |
| d) Examination procedures | YES | NO |
| e) Examination report forms | YES | NO |
| f) Appeals/grievance/disciplinary procedure | YES | NO |

Do all staff have a copy of the above information or know where to access this information YES NO

Please tick the diplomas you wish to offer

- | | |
|---|--|
| <input type="checkbox"/> Aesthetics Treatments | <input type="checkbox"/> Blend Epilation |
| <input type="checkbox"/> Facial Electrical Treatments | <input type="checkbox"/> Post Graduate Blend Epilation |
| <input type="checkbox"/> Skin Treatments | <input type="checkbox"/> Tweezer/Probe Free Epilation |
| <input type="checkbox"/> Media Make – Up | <input type="checkbox"/> Advanced Epilation |
| <input type="checkbox"/> Waxing | <input type="checkbox"/> Sports Massage |
| <input type="checkbox"/> Sugaring | <input type="checkbox"/> Sports Therapy |
| <input type="checkbox"/> Nail Treatments | <input type="checkbox"/> Stress Management |
| <input type="checkbox"/> Nail Technician | <input type="checkbox"/> Aromatherapy |
| <input type="checkbox"/> Advanced Aesthetics Treatments | <input type="checkbox"/> Reflexology |
| <input type="checkbox"/> Body Therapy | <input type="checkbox"/> Infant Massage |
| <input type="checkbox"/> Body Electrical Treatments | <input type="checkbox"/> Reiki |
| <input type="checkbox"/> Body Massage | <input type="checkbox"/> Indian Head Massage |
| <input type="checkbox"/> Anatomy & Physiology | <input type="checkbox"/> Manual Lymph Drainage Massage |
| <input type="checkbox"/> Advanced Body Therapy | |
| <input type="checkbox"/> Electrical Epilation | |

Please now complete the equipment information specific to the Diplomas you have ticked. The minimum equipment for 6 students is indicated in brackets, please state the actual number of each piece of equipment exclusively available to the students.

AESTHETICS TREATMENTS

Number

- _____ Couches (6)
- _____ Trolleys (6)
- _____ Stools (6)
- _____ High Frequency units (2)
- _____ Galvanic units for disincrustation and iontophoresis (2)
- _____ Facial steamer units (2)
- _____ N.M.E.S. (Facial faradic) (2)
- _____ Vacuum suction units for facial treatments (2)
- _____ Warm Wax systems (3)
- _____ Hot Wax systems (3)
- _____ Cold light magnifier lamps/wood lamps (6)
- _____ Infra Red Heat lamp (1)
- _____ Range of Skin care and make-up products (1)
- _____ Selection of research books (taken from CIBTAC recommended list) YES NO

Which professional products will candidates work with/retail?

How will you ensure candidates develop knowledge of other professional ranges?

N.B. Please provide information on how you ensure that staff/students develop a knowledge of other professional ranges.

FACIAL ELECTRICAL TREATMENTS

Number

- _____ Couches (6)
- _____ Trolleys (6)
- _____ Stools (6)
- _____ High Frequency Units (2)
- _____ Galvanic Units (2)
- _____ Facial Steam Units (2)
- _____ N.M.E.S. (Facial Faradic) (2)
- _____ Vacuum Suction Units (2)
- _____ Infra Red Heat Lamp (1)
- _____ Range of suitable products (1)
- _____ Selection of research books (taken from CIBTAC recommended list) YES NO

SKIN TREATMENTS

Number

_____ Couches (6)		
_____ Trolleys (6)		
_____ Stools (6)		
_____ Cold Magnifying lamps/wood lamps (6)		
_____ Range of skin care and make-up products (1)		
_____ Selection of research books (taken from CIBTAC recommended list)	YES	NO

MEDIA MAKE-UP

_____ Range of suitable products and make up to enable students to produce the work detailed in the syllabus	YES	NO
_____ Selection of research books (taken from CIBTAC recommended list)	YES	NO

WAXING

Number

_____ Couches (6)		
_____ Trolleys (6)		
_____ Stools (6)		
_____ Warm Wax systems (3)		
_____ Hot Wax systems (3)		
_____ Disposable Gloves	YES	NO
_____ Range of suitable products	YES	NO
_____ Selection of research books (taken from CIBTAC recommended list)	YES	NO

SUGARING

Number

_____ Couches (6)		
_____ Trolleys (6)		
_____ Stools (6)		
_____ Heating pots for sugar (3)		
_____ Selection of sugaring products	YES	NO
_____ Disposable Gloves	YES	NO
_____ Selection of equipment e.g. spatulas	YES	NO
_____ Selection of research books (taken from CIBTAC recommended list)	YES	NO

NAIL TREATMENTS

Number

_____ Manicure/Pedicure Stations (6)		
_____ Range of suitable products	YES	NO
_____ Selection of research books (taken from CIBTAC recommended list)	YES	NO

NAIL TECHNICIAN

Number

- _____ Nail stations/desks (6)
- _____ Stools (6)
- _____ Selection of nail product systems e.g. gel, fibre glass, silk, acrylic YES NO
- _____ Selection of research books (taken from CIBTAC recommended list) YES NO

ADVANCED AESTHETICS TREATMENTS

Schools/Colleges must ensure that candidates have access to a wide range of commercial products and equipment, either within the School/College and/or through demonstrations and visits to product/equipment companies as well as through the candidate's workplace.

Number

- _____ Couches (6)
- _____ Trolleys (6)
- _____ Stools (6)
- _____ Cold light magnifier lamps/wood lamps(6)
- _____ Range of suitable product YES NO
- _____ Selection of research books (taken from CIBTAC recommended list) YES NO

Schools/Colleges must attach an outline plan of the range of products and equipment that candidates will have access to and where these will be sited.

BODY THERAPY

Number

- _____ Couches (6)
- _____ Trolleys (6)
- _____ Stools (6)
- _____ Mechanical Vibrators (hand held or stand type) (2)
- _____ Galvanic
- _____ N.M.E.S. (Body Faradic) (2)
- _____ Vacuum Suction Units (2)
- _____ High Frequency Units (2)
- _____ Infra Red Lamp (1)
- _____ Steam Bath } YES NO
- _____ Sauna } Have access to YES NO
- _____ Shower } YES NO
- _____ Sun bed } YES NO
- _____ Selection of appropriate products YES NO
- _____ Selection of research books (taken from CIBTAC recommended list) YES NO

BODY ELECTRICAL TREATMENTS

Number

_____ Couches (6)		
_____ Trolleys (6)		
_____ Stools (6)		
_____ Mechanical Vibrators (hand held or stand type) (2)		
_____ Galvanic		
_____ N.M.E.S (Body Faradic) (2)		
_____ Vacuum Suction Units (2)		
_____ High Frequency Units (2)		
_____ Infra Red Lamp (1)		
_____ Steam Bath }	YES	NO
_____ Sauna }	YES	NO
_____ Shower }	YES	NO
_____ Sun Bed }	YES	NO
_____ Selection of appropriate products	YES	NO
_____ Selection of research books (taken from CIBTAC recommended list)	YES	NO

BODY MASSAGE

Number

_____ Couches (6)		
_____ Trolleys (6)		
_____ Stools (6)		
_____ Selection of appropriate products	YES	NO
_____ Selection of research books (taken from CIBTAC recommended list)	YES	NO

ANATOMY & PHYSIOLOGY

Number

_____ Selection of books (<i>taken from CIBTAC recommended list</i>)	YES	NO
_____ Selection of anatomical charts/CD ROMs	YES	NO
_____ Research books	YES	NO

ADVANCED BODY THERAPY

Schools/Colleges must ensure that candidates have access to a wide range of commercial products and equipment either within the School/College and/or through demonstrations and visits to product/equipment companies as well as through the candidates' workplace.

Number

_____ Couches (6)		
_____ Trolleys (6)		
_____ Stools (6)		
_____ Range of suitable product	YES	NO
_____ Selection of research books (taken from CIBTAC recommended list)	YES	NO

Schools/Colleges must attach an outline plan of the range of products and equipment that candidates will have access to and where these will be sited.

GENERAL EQUIPMENT required for *all* Epilation

Number

_____ Couches (6)		
_____ Trolleys (6)		
_____ Stools (6)		
_____ Cold Light Magnifying lamps (6)		
_____ Disposable gloves	YES	NO
_____ Selection of Needles	YES	NO
_____ Sharps box or equivalent	YES	NO
_____ Range of suitable products	YES	NO
_____ Specific equipment		

**SPECIFIC EQUIPMENT REQUIRED FOR:
SHORT WAVE DIATHERMY ELECTRICAL EPILATION**

Number

_____ Short Wave Diathermy Electrical Epilation Machines (6)		
_____ Selection of research books (taken from CIBTAC recommended list)	YES	NO

BLEND EPILATION

Number

_____ Blend Electrical Epilation Machines (6)		
_____ Selection of research books (taken from CIBTAC recommended list)	YES	NO

POST GRADUATE BLEND EPILATION

Number

_____ Blend Electrical Epilation Machines (6)		
_____ Selection of research books (taken from CIBTAC recommended list)	YES	NO

TWEEZER / PROBE FREE EPILATION

Number

_____ Couches (6)		
_____ Trolleys (6)		
_____ Stools (6)		
_____ Cold Light Magnifying Lamps (6)		
_____ Disposable gloves	YES	NO
_____ Selection of research books (taken from CIBTAC recommended list)	YES	NO

ADVANCED EPILATION

Number

_____ Epilation Units (please specify type) (6)		
_____ Selection of research books (taken from CIBTAC recommended list)	YES	NO

SPORTS MASSAGE

Number

- _____ Couches (6)
- _____ Trolleys (6)
- _____ Stools (6)
- _____ Infra Red Lamp (3)
- _____ Paraffin Wax heaters (3)
- _____ Bandages/slings YES NO
- _____ Selection of appropriate products YES NO
- _____ Selection of research books (taken from CIBTAC recommended list) YES NO

SPORTS THERAPY

Number

- _____ Couches (6)
- _____ Trolleys (6)
- _____ Stools (6)
- _____ Ultrasound (1)
- _____ Mechanical Vibrators (hand held or stand type) (2)
- _____ N.M.E.S. (Body Faradic) (2)
- _____ Vacuum Suction Units (2)
- _____ Infra Red (2)
- _____ Paraffin wax heaters (2)
- _____ Selection of appropriate products YES NO
- _____ Selection of research books (taken from CIBTAC recommended list) YES NO

STRESS MANAGEMENT

Number

- _____ Couches/chairs (6)
- _____ Trolleys (6)
- _____ Stools (6)
- _____ Selection of research books/articles/journals YES NO

AROMATHERAPY

Number

- _____ Couches (6)
- _____ Trolleys (6)
- _____ Stools (6)
- _____ Selection of essential oils (40)
- _____ Selection of carrier oils (10)
- _____ Selection of appropriate products YES NO
- _____ Selection of research books (taken from CIBTAC recommended list) YES NO

REFLEXOLOGY

Number

_____ Couches (6)		
_____ Trolleys (6)		
_____ Stools (6)		
_____ Selection of appropriate products	YES	NO
_____ Selection of research books (taken from CIBTAC recommended list)	YES	NO

INFANT MASSAGE

Number

_____ Pillows (2 per candidate)		
_____ Floor mats (1 per candidate)		
_____ Life size baby doll (1 per candidate)		
_____ Selection of appropriate products	YES	NO
_____ Research articles	YES	NO
_____ Selection of research books (taken from CIBTAC recommended list)	YES	NO

REIKI

Number

_____ Couch (1)		
_____ Selection of research books (taken from CIBTAC recommended list)	YES	NO

INDIAN HEAD MASAGE

Number

_____ Couches (6)		
_____ Trolleys (6)		
_____ Stools (6)		
_____ Selection of appropriate products	YES	NO
_____ Selection of research books (taken from CIBTAC recommended list)	YES	NO

MANUAL LYMPH DRAINAGE MASSAGE

Number

_____ Couches (6)		
_____ Trolleys (6)		
_____ Stools (6)		
_____ Selection of appropriate products	YES	NO
_____ Selection of research books (taken from CIBTAC recommended list)		

HOLISTIC THERAPIES

The equipment required is dependent on the 4 qualifications the school/college decides to offer.

All the above equipment/resources must be exclusively available to candidates for the duration of their training.

All equipment must comply with current safety standards

SECTION D – SCHOOL PROCEDURES

1. Please provide details on the following:

What are your arrangements for: -
Induction of staff/candidates

Monitoring and recording candidates progress/attendance

Practical and oral tests

Written tests

Who monitors Health & safety? **(Please enclose policy)**

Who monitors equal opportunities? **(Please enclose policy)**

Who monitors appeals/grievance/disciplinary procedures? **(Please enclose policy)**

**Please provide evidence for all of the above to include Health & Safety,
Equal opportunities and Appeals/Grievance Policies.**

2. Do you provide the following?

Guidance to candidates/staff on the role of:-

BABTAC	YES	NO
BABTAC Council	YES	NO
CIBTAC Examiner	YES	NO
CIBTAC Education Rules and Regulations	YES	NO
School/College Assessments	YES	NO
CIBTAC examination requirements	YES	NO
CIBTAC Appeal/Grievance/Disciplinary procedures	YES	NO

3. How often does the school?

Service electrical equipment _____

Update the facilities and equipment _____

On the approval visit all information on the application form will be verified. If at any time the school wishes to offer additional qualifications or change premises, a new application must be completed.

It is essential that CIBTAC is kept informed of staff changes, please forward new CV's to the office.

This form was completed by:

Name: _____ Position: _____

Signature: _____ Date: _____

CIBTAC Application For Accreditation Check List

Please ensure you have enclosed the following documents:

- 1) Completed Application Form.
- 2) Floor Plan of School (indicate number of practical and theory rooms, work stations, toilet facilities and hand basins).
- 3) Health and Safety Policy.
- 4) Equal Opportunities Policy.
- 5) Appeals/Grievances Policy
- 6) Tutor CVs to include copies of all professional qualifications.
- 7) Cheque or Bank Draft*
*£650 for a new application, £200 for an additional site of a previously accredited School/College

Please forward all of the above to BABTAC, Meteor Court, Barnett Way, Barnwood, Gloucester, GL4 3GG.

Office use only

Date received _____

Name of Administrator _____

Date sent to Education Team _____

