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SAAHSP - CIDESCO SECTION S.A

## SAAHSP PROFESSIONAL MEMBERSHIP APPLICATION PROCESS

Congratulations on your decision to join SAAHSP. Our aim is to advance cooperation with all participants in the Health, Beauty, Skincare and Nail Industry to ensure the maintenance of the Highest Standard of Ethical Conduct.

<u>THE SAAHSP MISSION</u> - To foster the advancement of education and professionalism in the Health and Skincare Industry

<u>The SAAHSP VISION</u> - To advance co-operation with all participants in the Health, Beauty, Skincare and Nail Industry to ensure the maintenance of the Highest Standard of Ethical Conduct

SAAHSP the recognised Professional Body appointed by SAQA seeks to uplift the profession, the interests of the individuals engaged and to look after the public's interest.

SAAHSP is appointed to regulate CPD (Continuous Professional Development) to ensure systematic maintenance, improvement and broadening and skills and the development of personal qualities necessary for the execution of professional and technical duties throughout your career.

Your professional membership shows commitment to the industry, employer, stakeholders, clients, and your own personal development. It shows interest in the industry, passion for your occupation and ensures that your knowledge in up to date both nationally and internationally.

Join SAAHSP today:

Step 1: Complete the Professional Membership Application Form (Part A)

Step 2: Complete your Designation application form (Part B)

Step 3: Submit all documentation utilising the assessment tools provided.

Kind regards

Sandra Rath

Membership Coordinator and Branches

SAAHSP - CIDESCO Section S.A.





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## **MEMBERSHIP APPLICATION FORM** (PART A)

Please send your completed form to <a href="mailto:info@saahsp.co.za">info@saahsp.co.za</a> All fields are required to process application. We look forward to welcoming you as a member of SAAHSP. Our aim is to advance co-operation with all participants in the Health, Beauty, Skincare and Nail Industry to ensure the maintenance of the Highest Standard of Ethical Conduct.

Name:					Surname:					
ID no:					Email:					
Physical Address:					Postal Address:					
Code:					Province:					
Cell no:					Alternate no:					
Nationality:					Citizen:	South African	Dual	Permanent Resident	Other	
Home Language:					Disability:					
	Black	Coloured	White	Indian		Gender:	Female	Male		
Socio economic Status	Employed	Looking for work	Not working	Home maker	Scholar/ Student	Pensioner Retired	Disabled	Not wishing to work	None	

## **CURRENT MEMBERSHIP FEES (Membership fees is non refundable)**

R560 per annum (R530 if paid before 31/03/2016) SAAHSP Professional member R600 including your badge (if paid before 31/03/2016)

R78 (replacement or new badge) Membership badge:

- Fax confirmation of your payment along with this form by 30<sup>th</sup> March 2016
- Please note all payments to be made to **SAAHSP**
- Please note a pro-rata fee is applicable from June to December

SAAHSP Address:

**BANKING DETAILS** Postnet Suite 236

Private Bag x1 Account Name: SAAHSP Cresta 2115

Bank: FNB Cresta

Fax: 0865 880 973 Account No: 51440975783 Branch Code: 25 49 05 Email: info@saahsp.co.za

By completing the information you agree that we can send you information from the SAAHSP. We will not in any circumstances reveal your information to a third party.





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## **DESIGNATION APPLICATION FORM - PROFESSIONAL MEMBERSHIP** (PART B)

This section applies to Professional Designation applications. Please complete this form and attach all relevant information as per table below. \*please note all documents must be certified copies.

#### **SECTION 1**

#### PROFESSIONAL INFORMATION

- Certified ID copy 1.1
- Highest Qualification Achieved (in the field you are applying for) 1.2
- Highest additional Qualification achieved 1.3
- 1.4
- i. **Personal Information**
- **Tertiary Education** ii.
- iii. List of Training Subjects
- Additional training/qualifications iv.
- **Employment History** ٧.
- Skill obtained (not necessarily proof of training) vi.

## **SECTION 2**

### **DESIGNATION APPLYING FOR**

(PLEASE NOTE THAT YOU MAY ONLY APPLY FOR 1 OF THE DESIGNATIONS LISTED)

#### **Nail Technologist** 2.1

Minimum requirements 5 days training in one system e.g. gel

Services Seta Qualification/ **Product Company Attendance** 

Certificate \* additional information

required refer to Section i.

ITEC Nail Technology Diploma

- i. POE (port folio of evidence) required:
- Evidence of manicure and pedicure training
- Course content
- Hours of training
- Case studies
- Nail System(s) obtained

### **Beauty Technologist**

Training Provider Certificate provided OR Services Seta Qualification/

to include:

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i. Manicure and Pedicure unit ITEC Diploma Beauty Specialist/

Tinting and Shaping unit City and Beauty Therapy/ ii. iii.

Hair removal unit CIBTEC Level 1/

iv. Facial Therapy unit SAAHSP Modular certificate all units Make-up unit

vi. Professionalism (to include, hygiene, communication, business, first aid





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2.3  i. ii. iii. iv. v. vii. viii. viiii.	Beauty Therapist Training Provider Diploma with minimum 2 years of study Skincare Therapy Body Therapy including massage Electrotherapy Units as in Beauty Technologist Anatomy and Physiology Specialised treatments Cosmetic Science Physics and Chemistry Professional Business as in Beauty Technologist	OR	SAAHSP Diploma Health ITEC Diploma Health CIDESCO Diploma He CIBTEC Level 2	and Skincare/	
2.4	Somatologist Training Provider Diploma minimum 3 years of training/ Additional proof of the following	OR	University Degree  Training Provider Registered 3 year Diploma		
i.	Diploma as stated in Beauty Therapist		ырюша		
ii.	POE (port folio of evidence) required:			T -	
	Additional Training In Anatomy and Physiology/Cosmetic Science	Complimentary Therapies minimum of 3	Advanced Therapies minimum of 2 OR	Spa Therapy	
	Teaching Anatomy and Physiology	Aromatherapy	Microdermabrasion	Spa management	
	Sport massage – shows more A&P knowledge	Reflexology	Advanced peeling	Water therapies	
	Developing products	MLD	Microneedling		
	Teaching cosmetic science	Sports Massage	IPL/Laser		
	Teaching sports massage	Stress Massage	PDT		
		Indian Head massage	Plastic Surgery		
		Reiki	Epilation		
		Shiatsu	Vein cauterisation		
		Deep Tissue			
		massage			
		Thai massage	Minor skin lesion removal		
		Other	Fat freezing		
			Cavitation		
			Other		
l wis all co	aration: I hereby agree that the above inf h to apply for designation membership a onditions of Membership, By-laws, Ethica e practices of my profession and maintain	nd do solemnly decl I rules and Regulatio	are that if elected a me ons, CPD and will condu	ct myself honorably	

Signature of Applicant

Date: