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**APPLICATION FOR REGISTRATION OF PERSON TO GIVE LICENSABLE TREATMENTS**

**SPECIAL TREATMENT LICENCE LONDON LOCAL AUTHORITIES ACT 1991**

**BEFORE COMPLETING THIS FORM, PLEASE READ THE ATTACHED GUIDANCE NOTES,** this form should be fully completed and emailed to the Licensing Team at **licensing@haringey.gov.uk** with all supporting documents. Please complete in **CAPITAL letters and black ink.**

Office Use Only

Date Rec’d: Fee: No Fee Required

1. Certificates of qualification for all treatments to be given

2. At least 1 form of photographic identification

3. Proof of address

4. 2 full face passport photos of your self, taken within the last 12 months.

5.Marriage certificate or deed poll documents where applicable

**Your details**

|  |  |  |
| --- | --- | --- |
| **1.** | Please provide details of person to be registered | Title: Surname: |
| Forename/s: |
| Maiden name: |
| Home Address: |
| Postcode: |
| Date of Birth: |
| Daytime telephone no: |
| Mobile no: |
| Email: |

**Before completing this section please read guidance note 5**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Treatment/s that you wish to register for | Qualification(s) | Office Use |
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**If more room is needed, please continue on a separate sheet**

3B. Do you have a registration card from any other London Borough?  **Yes**  **No**

If **Yes,** please specify the Borough, registration number and date of registration and bring the original registration badge with you when applying.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Borough** | **Registration number** | **Date of registration** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**N.B. The form must be signed by the person applying for registration**

|  |  |  |
| --- | --- | --- |
|  | Please give details of the name and address of premises in Haringey you will be working at. | Name: |
|  |  | Address: |
|  |  | Telephone No: |

**Declaration**

**I hereby declare the information contained in this application is true to the best of my knowledge. I understand that it is an offence to knowingly make a false statement in connection with this application**

Signed:……………………………………………………Date:…………………………

**CHECK LIST**

1. Form fully completed

2. Passport or other Identification document with photo

3. Full face colour photograph JPEG

(name, signed & date written on the back)

4. Clear scanned copies of qualifications

5. Proof of address (Bank statement/utility bill)

**APPLICATION FOR REGISTRATION OF PERSONS TO GIVE LICENSABLE TREATMENTS – GUIDANCE NOTES.**

If you do not have any of the other documents mentioned in this guidance, please contact the Licensing Team on 020 8489 8232 or visit our web site at www.haringey.gov.uk/licensing

**Who should apply for registration?**

Any person who wants to give special treatments within the Borough of Haringey needs to be registered with the Council. This includes people who hold a special treatments licence, and who also give treatments.

For a definition of what is a special treatment, please see the document “A-Z of Treatments/Therapies”.

**1. Who does not need to apply for registration?**

The legislation concerning special treatments allows for certain exemptions from the need for a licence. These are as follows:

* A medical practitioner duly registered with the General Medical Council.
* A person registered under the Health Professions Order 2001, solely for the practice or profession for which they are registered.
* In the case of Acupuncture, a Dentist registered under the Dentists Act 1984.
* In the case of Ear Piercing – members of the **Royal Pharmaceutical Society of GB**

If you give 2 or more treatments but are only a member of an exempt organisation for one of them, then you will need to register for the other treatment. For any exempted treatments, you will need to ensure that there is a copy of your up to date exemption membership and insurance available at each premises where you work.

**For a list of exempted organisations, please see the document “List of Exempted Bodies”.**

**2.** **How do I apply for registration?**

Firstly, read this guidance note to ensure that you understand the process. Then, fill in the enclosed application form, making sure that you have completed all the relevant parts. You must then email this form, to licensing@haringey.gov.uk. Please do not post any documents.

You must also provide the following items:

* Proof of identification – see note 6.
* Photograph of the applicant taken within the last 12 months- see note 7.
* Proof of address – see note 9.
* Clear scanned copies of the full qualification for ALL treatments that you are applying for.

**Please note: ALL incomplete applications will be refused.**

**3. Acceptable Qualifications**

For the purposes of registration, this Council will now only accept nationally or internationally recognised qualifications. Where there are no nationally recognised qualifications for a particular special treatment, we would expect the applicant to have a nationally recognised qualification in a relevant subject. **For example:**

A. Many beauty treatments are brand based, and training is only given by the product manufacturer or supplier. In these cases we would expect the therapist to have a nationally recognised qualification in the area of Beauty Treatments, as well as the supplier training for individual products.

B. Some types of massage are learnt from small private colleges, which are not nationally recognised. In these cases we would expect the therapist to have a nationally recognised qualification in anatomy and physiology as well.

Where there is no other relevant nationally recognised qualification, (for example: kenisiology, Bowen technique or other holistic therapies), and there is an exempt organisation that covers the particular Treatment, the Council will require the therapist to become a member in order to practice within the Borough. Where no exempt organisation exists, the Council will require further information concerning the training institute and may use its discretion to allow registration. However, these will be reviewed on a strictly case by case nature.

**Body Piercing, branding, beading, scarification, tattooing and other similar   
treatments**

These are highly specialist areas and as such all persons applying for registration for these treatments will need to attend an interview before registration is granted. Where no formal qualifications are available, the applicants will need to supply references and proof of where they have carried out their apprenticeships/training. All applicants for these treatments will be expected to have certified training in the area of hygiene such as a level 2 certificate in Salon Hygiene as offered by the Royal Institution of Public Health, or an equivalent qualification. As and when Nationally Recognised Qualifications become available, we will expect new applicants to have these qualifications.

**Foreign Qualifications**

Where qualifications have been obtained outside the UK, and/or are written in a language other than English, and are not internationally recognised qualifications (such as CIBTAC, ITEC etc.), you must do 2 things before making an application for registration:

* Obtain a translation of the certificate. This must be carried out by an independent, certified translator and be signed by them.
* You must then obtain a comparability certificate. This will state what your   
  qualification is equivalent to in terms of UK qualifications.

A comparability certificate can be obtained from an organisation called the Education Counselling and Credit Transfer Information Service for the UK (ECCTIS).

ECCTIS provides a service for individuals seeking information on comparability between international and UK academic qualifications. This service is intended to

assist those with overseas qualifications to progress towards further studies and   
employment in the UK.   
You will need to supply them with the following:

• A photocopy of your certificate(s) together with transcript(s)

• A copy of a certified translation in English

• A covering letter from yourself stating the purpose of your enquiry

ECCTIS make a charge for this service

Contact details for ECCTIS:   
Ecctis  
Suffolk House  
68-70 Suffolk Road  
Cheltenham  
GL50 2ED

Website: <https://www.ecctis.com/Default.aspx>

Tel: +44 (0) 330 912 0040  
Email: [feedback@ecctis.com](mailto:feedback@ecctis.com)

**Filling in the application form**

**4. What treatments are you giving?**

In this section, please state ALL Treatments that you will be giving. For example: do not write “beauty Treatment”, list all the types of beauty Treatments you give. Do not give the trade name of the treatment, please state the type of treatment: For example: Feradic or Galvanic electrical treatments, facial scrub treatments, body wrap treatments. Do not give broad-based descriptions such as epilation or thermology. Please state the exact treatments. For example: Hair removal by epilation, red/thread vein removal by epilation, Skin tag removal by epilation, etc.

**5. Identification**

You must provide proof of identity at the time of application. The following explains what proof will be acceptable:

You must provide either:

* A full, current passport or,
* A current photo driving licence.

If you do not have either of these, then you must produce 2 of the following documents:

Old style (non photo) driving licence, birth certificate, current credit card and statement, marriage certificate, identity card issued by an EC/EEA member state or other country, recent letter from a solicitor, social worker, Doctors Surgery, probation officer or the Inland Revenue (any letter must have the contact details of the person who sent it), medical card, wage slips from current employer, photo registration card issued by another Borough Council, insurance policies, divorce papers, paid utility bill for the last quarter (must be at your current address), National Insurance card.

**Please remember that whatever forms of identity you chose to provide, we must have sight of the original. Photocopies will only be acceptable if they are certified true copies produced by the original issuing authority or signed by a solicitor.**

**6. Photographs**

Two identical full-face passport photographs of yourself in colour, (taken within the last 12 months) must accompany this application. You must sign and add your address on the back of each photo. The Council reserves the right to reject any photographs, which are not acceptable.

**7. Maiden or previous name**

If you have changed your name or got married since obtaining your qualifications, you will need to supply proof of the name change. For marriage, you will need to supply your marriage certificate. For a name change by deed poll, you will need to produce the deed poll documents.

**8. Proof of address**

Acceptable proof of address include:   
driving licence, current credit card statement, recent letter from a solicitor, Doctor, social worker, probation officer or the Inland Revenue (any letter must have the contact details of the person who sent it), photo registration card issued by another Borough Council, insurance policies, divorce papers, paid utility bill for the last quarter.