

WORK ENVIRONMENT CONDITIONS AND PHYSICAL REQUIREMENTS

Please read the following carefully before enrolling:

Career Considerations

Panache Academy of Beauty want to ensure that students interested in pursuing a career in Hair, Skin or Nail Care considers all aspect of such a decision. Persons who want to become professional in this field must:

- To ensure continued career success, the graduate/licensed practitioner will need to continue to learn new and current information related to skills, trends, and methods for career development in Barber, Cosmetology, and related fields.
- Make a strong commitment to the education process and complete to course of study.
- The practitioners will make appointments and keep records of their regular patrons, ie; hair color, skin or nail conditions, or areas of skin treatments, etc. Work areas clean and sanitized, as well as sanitizing all implements, towels and sheets that may have been used during a service.
- Salon/Spa owners also have managerial duties which include hiring and supervising employees, bookkeeping records, and inventory.
- Individuals who want to become a cosmetology practitioners, barbers, manicurists, and aestheticians must have finger and wrist dexterity, range of motion for their arms and backs and in several of the professions a sense of form and artistry.
- All should enjoy dealing with people and have the ability to utilize basic analytical skills to determine safe and proper use of implements and/or tools, products, disinfection specifications, and able to follow patrons' instructions.
- Building a personal clientele in order to earn the desired income.
- Learn the skills necessary to operate a personal business

Applicants and students should be aware that:

- Practitioners are required to work in clean, pleasant surroundings, with good lighting and comfortable temperatures.
- The work can be strenuous and physically demanding because most must be on their feet for long hours at a time and all must work with their hands, often times at shoulder level or higher. Standing over a stylists chair or an aesthetician's treatment bed or a manicurists table or pedicure station
- Practitioners will be required to stand for long periods of time and perform work with arms and hands in a raised manner.
- Some products used in the Cosmetology/Barber, Skin and Nail industry may cause an allergic reaction in persons who are sensitive to these chemicals. If you have encountered allergic reactions or are concerned about a reaction, you should consult with your physician prior to enrolling in the program. In addition, the profession requires that you work with sharp and/or hot instruments which could cause injury.
- Students will be educated on how to work with instruments and the procedure for conditions in which blood may become present.
- The practice of Safety and infection control is essential for effective and successful performance within the industry.
- Many of the professions work more than 40 hours a week, which include evenings and weekends when beauty salons/spas are at the busiest times.
- Methods of compensation vary and may include :
 - Straight salary, salary plus commission, straight commission, sliding scale commission, retail commission or independent contracting (renting space and equipment for an existing salon or spa).
- The 2007 Job Demand Survey commissioned by NACCAS indicated that salons in Wisconsin planned to hire 5,162 new employees in 2008. The average annual salary for a salon professional in Wisconsin is \$31,959. **This amount does not included tips and gratuities.** Nationally, the average salon professional's salary is \$35,973.

Health Status: Do you have any medical conditions you would like to inform us of? Yes (if yes, please fill in below) No

List any Medical Conditions / Allergies or Reactions you may have:

- _____
- _____
- _____
- _____

List any Medications taken for Treatment

- _____
- _____
- _____
- _____

Pregnancy: Are you pregnant: Yes No (if yes, you must fill out a Pregnancy Release Form)

EMERGENCY INFORMATION:

In case of Medical Emergency while attending school, whom should we contact?

Name: _____ Phone: _____

Relationship: _____

Medical Emergency Contact: (if applicable)

Name of Physician or Facility: _____ Phone: _____

Health Insurer: _____ Phone: _____

I understand that if any of the above information changes during my enrollment period, I am responsible for notifying Admissions Department and updating this form.

Student Signature: _____

Date: ____/____/____