****

**Therapist Application Form**

Love Pamper Company

**Name \***

**Address \***

**Phone Number \***

**Email \***

**Date of Birth \***

**Website address**

**Preferred Contact \***

Email

Phone

**Do you hold a valid beauty insurance policy?**

Emergency contact

**Name \***

**Contact number \***

**Relationship to you \***

Social Media

**Twitter:**

**Facebook:**

**Instagram:**

**Services**

What services are you trained in?

**Please select services you are trained in and also have the equipment to carry out.**

Swedish massage

Facials

Manicure

Pedicure

Gel Nails

Holistic massage

Deep tissue massage

Aromatherapy massage

Pregnancy massage

Hot stones massage

Indian head massage

Reflexology

**Are you available weekends and evenings ? \***

**Do you have experience working with pamper party companies?**

**Are there any areas that you would not like to cover? \***

**How many years’ experience do you have in the beauty industry?**

Equipment, products and transport.

**Which professional massage/ facial range do you currently use?**

**Do you have the products for the treatment / services that you provide? \***

**Do you own a beauty couch? \***

**Do you hold a valid full UK driving license? \***

**Do you have your own means of transport? (E.g car or van? ) \***

Disabilities / Allergies

**Do you have any disabilities or health concerns? \***

Yes

No

**If 'YES' please give details:**

Claims and convictions

**Have you ever been convicted of a criminal offence? \***

Yes

No

**If so, please state the nature of this conviction and date:**

**Have you ever been prevented from working with children or vulnerable adults? \***

Yes

No

**If yes, please state the nature of this claim and date**

**Have you ever had to claim, or had a claim against you in your field of work? \***

Yes

No

**If Yes, please give details about this claim and date:**

DBS:

**Do you have a current DBS check? (This is not essential to work with us) \***

Yes

No

**Do you have a right to work in the UK, (You will be required to give evidence) \***

Yes

No

**Do you require a Visa/ permit to work in the UK? \***

Yes

No

**Please supply your visa / work permit number**

**Do you give permission for us to use images of you on the love pamper company website and social media?**

Yes

No

Please send the following documents with this application form:

**Insurance -** (Please provide a copy of your up to date public liability insurance)

**Qualification Certificates** - (Please provide us with a copy of all of your qualifications)

**Photograph**- (Please provide us with a recent photo of yourself)

**Visa/ Work permit** (Please supply us with a copy of your visa work permit if applicable)

Alternatively, you can email lovepampercompany@gmail.com

References

Please can you provide **two** references.

First reference

**Name \***

**Email \***

**Phone Number \***

**Relationship to you \***

**Name \***

**Phone Number \***

**Email \***

**Relationship to you \***

**Declaration**

I hereby state that the information I have given in this application is true and correct and I have not withheld any factual information. I give my permission for Love Pamper Company to hold this

Information on file to use manually or in a database.

**Print Name \***