



SOUTH AFRICAN ASSOCIATION OF HEALTH & SKINCARE PROFESSIONALS

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.

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

The SAAHSP VISION - 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 is up to date both nationally and internationally.

Join SAAHSP today:

Step 1: Complete the 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.



SOUTH AFRICAN ASSOCIATION OF HEALTH & SKINCARE PROFESSIONALS



SAAHSP – CIDESCO SECTION S.A

MEMBERSHIP APPLICATION FORM

(PART A)

Please send your completed form to info@saahsp.co.za **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. SAAHSP guarantees that, as members of the industry, these professionals are committed to providing group support, improving practice standards and ensuring a professional image for themselves and for you.

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 not refundable)

SAAHSP Professional member R320 per annum including your badge
(valid for 1 year after qualified)

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

Address: SAAHSP
Postnet Suite 236
Private Bag x1
Cresta 2115

BANKING DETAILS

Account Name: SAAHSP
Bank: FNB Cresta
Account No: 51440975783
Branch Code: 25 49 05

Fax: 0865 880 973

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.

Savanah Office Park, Cycad Building, C/O 9th Avenue and Rugby Road, Weltevredenpark, 1709
Postnet Suite 236, Private Bag X1, Cresta, 2115

Tel: 011 675 6518 Fax: 086 588 0973 info@saahsp.co.za www.saahsp.co.za

2003/016035/08 – Section 21 Company Non Profit



SOUTH AFRICAN ASSOCIATION OF HEALTH & SKINCARE PROFESSIONALS

SAAHSP – CIDESCO SECTION S.A



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

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

SECTION 2

DESIGNATION APPLYING FOR

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

- 2.1 **Nail Technologist**
Minimum requirements 5 days training in one system e.g. gel
Product Company Attendance **OR** Services Seta Qualification/
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
- 2.2 **Beauty Technologist**
Training Provider Certificate provided **OR** Services Seta Qualification/
to include:
 - i. Manicure and Pedicure unit
 - ii. Tinting and Shaping unit
 - iii. Hair removal unit
 - iv. Facial Therapy unit
 - v. Make-up unit
 - vi. Professionalism (to include, hygiene, communication, business, first aid)
ITEC Diploma Beauty Specialist/
City and Beauty Therapy/
CIBTEC Level 1/
SAAHSP Modular certificate all units



SOUTH AFRICAN ASSOCIATION OF HEALTH & SKINCARE PROFESSIONALS



SAAHSP – CIDESCO SECTION S.A

2.3 Beauty Therapist

- | | | |
|--|-----------|---|
| <p>Training Provider Diploma with minimum 2 years of study</p> <ul style="list-style-type: none"> i. Skincare Therapy ii. Body Therapy including massage iii. Electrotherapy iv. Units as in Beauty Technologist v. Anatomy and Physiology vi. Specialised treatments vii. Cosmetic Science viii. Physics and Chemistry ix. Professional Business as in Beauty Technologist | OR | <p>SAAHSP Diploma Health and Skincare/

ITEC Diploma Health and Skincare/
CIDESCO Diploma Health and Skincare/
CIBTEC Level 2</p> |
|--|-----------|---|

2.4 Somatologist

- | | | |
|--|-----------|---|
| <p>Training Provider Diploma minimum 3 years of training/
Additional proof of the following</p> <ul style="list-style-type: none"> i. Diploma as stated in Beauty Therapist ii. POE (port folio of evidence) required: | OR | <p>University Degree

Training Provider Registered 3 year Diploma</p> |
|--|-----------|---|

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	

Declaration: I hereby agree that the above information is correct and authentic. I wish to apply for designation membership and do solemnly declare that if elected a member, I will observe all conditions of Membership, By-laws, Ethical rules and Regulations, CPD and will conduct myself honorably in the practices of my profession and maintain the dignity and welfare of SAAHSP at all times.

Signature of Applicant

Date: