



TEG811

## ITEC LEVEL 2

### Treatment Evidence Guidance Form

#### Unit 811 - Design and Apply Mendhi Skin Decoration

**4 mendhi skin decoration treatments to be performed and the outcomes documented**

*To be completed by the assessor and internal verifier and externally verified by ITEC. Please attach a copy of this form to the front of each learner's completed treatment evidence*

**Learner Name:**

**Learner Number:**

**Centre Name and ID Number:**

**Date:**

| <i>Please tick box</i>  | <b>Yes</b> | <b>No</b> |
|---|------------|-----------|
| <b>Consultation</b>   |            |           |
| <b>Medical History</b>  |            |           |
| <b>Treatment Details (To Include Design Details For Each Treatment)</b> |            |           |
| <b>Before And After Photographs For Each Treatment</b>                  |            |           |
| <b>Client Feedback</b>  |            |           |
| <b>Aftercare And Home Care Advice</b>                                   |            |           |

**All treatments completed – Yes ☐ No ☐**

Please note **each** box must be ticked 'Yes' in order to gain a Pass grade. If any area is answered 'No' the treatment evidence will be referred until the omitted section is completed

**Signed by the Assessor**

**Signed by the Learner**

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**Signed by the Internal Verifier**

**Signed by the ITEC External Verifier**

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