



TEA825

**ITEC Level 3
Treatment Evidence Guidance Form
Unit 825 - Provide Massage using Pre-blended Aromatherapy Oils**

4 massage treatments using pre-blended Aromatherapy oils and the outcomes documented

To be completed by the lecturer/assessor and quality assurer and externally verified by ITEC. Please attach a copy of this form to the front of each candidate's completed treatment evidence

Candidate Name:

Candidate Number:

Centre Name and ID Number:

Date:

<i>Please tick box</i>	Yes	No
Consultation		
Medical History		
Treatment Details: To Include Reason For Treatment And Blended Essential Oil/Essence Justification		
Client Feedback		
Aftercare and Homecare Advice		

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 Lecturer/Assessor

Signed by the Candidate

Quality Assured by:

ITEC Examiner/External Verifier

Name:

Name:

Signature:

Signature: