

## Body Piercing and Tattoo Apprentice Program Requirements

- Apprentice shall be at least eighteen (18) years of age.
- The apprentice shall work under the direct supervision of an Oklahoma Licensed artist who has at least five (5) years of practical experience as a licensed artist. It is the responsibility of the individual to find an artist to sponsor them. The licensed artist shall make application to the Department to become a sponsoring artist for the Apprentice Program. After approval, the applicant can apply for the Apprentice Program with the Department.
- The applicant for an apprentice license must have completed a bloodborne pathogens certification, first aid certification and CPR certification.
- The apprentice training shall commence on the date the apprentice application is approved. Hours shall not be credited for any hours received prior to registering with the department.
- Apprentice hours are valid only when working for the supervising artist and establishment listed on the apprentice application.
- The apprentice program shall be a minimum of one (1) year and no more than two (2) years in length.
- The apprentice permit shall be a continuous permit. This permit shall expire two (2) years from the date of issuance.
- If the apprentice training should cease under the approved supervising artist or shop, the apprentice shall make arrangements to locate another supervising artist and shop as soon as possible. It is the responsibility of the apprentice and the sponsoring supervising artist to notify the Department of any changes.
- During the apprentice training, the supervising artist shall submit the quarterly reports and weekly log sheets every 3 months to the Department. It is the responsibility of the apprentice and the supervising artist to retain copies of the reports submitted to the Department for documentation of accumulated apprentice hours.
- Upon completion of the apprentice training you should have the ability to demonstrate knowledge to pass the tattoo/body piercing exam before tattooing on flesh of individuals.
- Individuals who have completed apprentice training (1500 hours curriculum) shall contact the Department for Graduate Apprentice permit. Upon approval the individual shall be given a letter from the Department, which allows them to take the written certification exam with Career Tech.
- If applicant does not pass the written exam within three (3) times, the applicant shall repeat the apprentice program.
- Upon notification from Career Tech to the Department of a passing score, A Graduate Apprentice License will be mailed to the apprentice. Upon completion of one (1) year of Graduate Apprentice licensure, the individual will be approved for full licensure.
- The Graduate Apprentice license to practice body piercing or tattooing shall be under the direct face to face supervision of their apprentice sponsor.



**AFFIDAVIT OF LAWFUL PRESENCE BY PERSON  
MAKING APPLICATION FOR A LICENSE, PERMIT OR CERTIFICATE**

I, the undersigned applicant, being of lawful age, state that one of the following statements is true and correct: (Check which of the following statements apply.)

- I am a United States citizen.
- I am a qualified alien under the federal Immigration and Nationality Act and am lawfully present in the United States. (Alien or Admission # \_\_\_\_\_)

I state under penalty of perjury under the laws of Oklahoma that the foregoing is true and correct and that I have read and understand this form and executed it in my own hand.

Date \_\_\_\_\_ Signature \_\_\_\_\_

City & State \_\_\_\_\_ Print Name \_\_\_\_\_

If you are applying to renew a license, permit, or certificate, please write your number:

\_\_\_\_\_ Current license, permit, or certificate # \_\_\_\_\_

**INSTRUCTIONS FOR USE OF THE AFFIDAVIT OF LAWFUL PRESENCE BY  
PERSON MAKING APPLICATION FOR A LICENSE, PERMIT OR CERTIFICATE**

**The person signing this form must read these instructions carefully.**

1. If the person executing this form is receiving services and not making an application for a license, permit or certificate, this form should *not* be used but rather, either the form titled, “*Affidavit of Lawful Presence by Parent or Guardian of Person Receiving Services*” or the form titled “*Affidavit of Lawful Presence by Person Receiving Services*” should be used.

2. If the person executing this form is a citizen of the United States then that person should check the box to the left of the statement, “*I am a citizen of the United States.*” If the person executing this form is not a citizen of the United States but is a qualified alien under the federal Immigration and Nationality Act and is lawfully present in the United States then that person should check the box to the left of the statement, “*I am a qualified alien under the federal Immigration and Nationality Act and am lawfully present in the United States.*”

3. In the space after the word “*Date*” the person executing this form should write today’s date. The person executing this form should indicate the city and state where they are actually located when they sign this form.

4. Within the context of the execution of this form, the term “penalty of perjury” means the willful assertion of the fact of either United States citizenship or lawful presence in the United States as a qualified alien, and made upon one’s oath or affirmation and knowing such assertion to be false. Making such a willful assertion on this form knowing it to be false is a crime in Oklahoma and may be punishable by a term of incarceration of not more than five (5) years in prison. Additionally, one who procures another to commit perjury is guilty of the crime of subornation of perjury and may be punished in the same manner, as he would be if personally guilty of the perjury so procured.

**PROTECTIVE  
HEALTH  
SERVICES**

**Oklahoma State Department of Health  
Protective Health Services  
Consumer Protection Division  
1000 NE 10th Street  
Oklahoma City, OK 73117-1299  
Telephone: (405) 271-5243  
FAX: (405) 271-3458**

**APPLICATION FOR APPRENTICE PERMIT**

No person shall be issued a permit as an apprentice unless such person is at least eighteen (18) years of age and work under the direct supervision of an Oklahoma licensed artist who has at least five (5) years of legal practical experience as a licensed artist. Persons applying for this permit should have intentions of applying for Oklahoma licensure upon completion of the required fifteen hundred (1,500) clock hours. The apprentice program shall be a minimum of one (1) year and no more than two (2) years in length.

**Please print or type:**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
                    First                    MI                    Last

Address: \_\_\_\_\_  
                    Street Location                    City                    State                    Zip

SSN: \_\_\_\_\_ Area Code/Telephone Number: \_\_\_\_\_

Have you submitted Application for an apprentice license prior to this Application? Yes \_\_\_\_\_ No \_\_\_\_\_

Date of prior Application: \_\_\_\_/\_\_\_\_/\_\_\_\_ Was license received? Yes \_\_\_\_\_ No \_\_\_\_\_

NOTE: The apprentice shall notify this office immediately when changing shops or supervising artist. An apprentice may transfer to another establishment by requesting a new permit application from the Department. The form shall be filed with the Department and approved before the transfer can occur. In addition, the original apprentice permit must be returned, a new permit generated before the transfer is complete.

If an apprentice ceases training prior to completion of fifteen hundred (1500) hours, the supervising artist shall notify the Department in writing within fourteen (14) days.

The apprentice license is valid for one (1) year from the date of issue. You must arrange your schedule to be able to obtain a minimum of fifteen hundred (1,500) clock hours as a licensed apprentice within the one (1) year time frame.

I certify that the information given on this Application by me is true and accurate to the best of my knowledge.

\_\_\_\_\_  
Apprentice Applicant's Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

To be completed by the licensed artist sponsoring the apprentice. This form must accompany the Application for Apprentice Permit and fee. Please read The Body Piercing and Tattooing Regulations carefully before completing this form.

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Please print or type:**

Name of Apprentice to be Employed: \_\_\_\_\_

Name of Licensed Supervising Artist: \_\_\_\_\_

Supervising Artist License Number: \_\_\_\_\_ SSN: \_\_\_\_\_

Name of Shop in which supervision will be given: \_\_\_\_\_

\_\_\_\_\_  
Street Location City State Zip

\_\_\_\_\_  
Area Code/Telephone Number

**NOTE:** The apprentice must work for a total of not less than fifteen hundred (1500) hours for a period of not less than 12 (12) months and not more than two (2) years. A maximum of one (1) licensed apprentice and one (1) graduate apprentice shall be supervised by a licensed sponsoring artist. Supervision date begins upon issuance of permit.

**The sponsoring artist is held responsible for notifying the Department if shop in which supervision of the graduate apprentice is changed for any reason.**

**The sponsoring artist is held responsible for returning the apprentice license to the Department.**

1. Upon apprentice not being supervised by the licensed sponsoring artist for any reason.
2. Upon the termination of apprenticeship it is your responsibility as the sponsoring artist to submit written notification to the Department indicating the beginning and ending dates of the apprentice training and the total number of hours accumulated.
3. Upon apprentice successfully completing the apprentice program.

I do hereby certify that the above named apprentice will be under my direct personal supervision at all times.

I have read the regulations pertaining to the apprenticeship program and agree to abide by same. The above information, which I have provided is true and accurate to the best of my knowledge.

\_\_\_\_\_  
Signature of Licensed Supervising Artist \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

State of \_\_\_\_\_  
County of \_\_\_\_\_ ss:

Before me, the undersigned, a Notary Public in and for said County and State on this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, personally appeared \_\_\_\_\_ to me known to be the identical person(s) who executed the within and foregoing instrument and acknowledged to me that he/she executed the same as his/her free and voluntary act and deed for the uses and purposes therein set forth.

Given under my hand and seal the day and year last above written.

\_\_\_\_\_  
Notary Public My Commission Expires: \_\_\_\_/\_\_\_\_/\_\_\_\_