# Job Ready Program – Employment Verification Report (EVR)

## Hairdresser (ANZSCO 391111)

The Trades Recognition Australia (TRA) Job Ready Program (JRP) is an employment-based skills assessment program for international student graduates with an Australian qualification.

**You are receiving this form because you have an employee applying for, or currently participating in, the Job Ready Program.** The information you provide in this form will allow us to confirm that the workplace and employment arrangements provide enough opportunity for the participant to develop the required skills in their nominated occupation.

##### **Your role, as the employer, is to:**

* give the participant appropriate trade level work under standard employment arrangements within a safe work environment
* nominate an employee skilled in the occupation to supervise the participant
* sign-off on the participant’s progress report (usually six months after the start of the program)
* support the participant to develop and improve their skills and understanding of Australian Standards and Legislation, language, and terminology as it is used in the workplace
* help the participant to demonstrate their trade skills in an Australian workplace
* allow an approved assessor to carry out a workplace assessment of the participant’s skills and job readiness (after 6 months or longer in the program).

##### To receive a successful workplace assessment outcome your employee (the JRP participant) will have to demonstrate the skills they have developed in the workplace. They will also have to show that they have the capacity to apply their skills and knowledge to all other tasks and duties involved in the occupation even if they are not doing them daily.

##### **How to provide the completed EVR to TRA**

This form must be completed and signed by you, as the employer and/or a nominated supervisor. The participant will upload the completed EVR in the TRA Online Portal.

If you have any questions about this form or the Job Ready Program, please visit [www.tradesrecognitionaustralia.gov.au](http://www.tradesrecognitionaustralia.gov.au) or email [jrpenquiries@dewr.gov.au](mailto:jrpenquiries@dewr.gov.au).

## Section One: Participant Details

|  |  |  |
| --- | --- | --- |
| TRA Reference Number |  | |
| Participant’s Name |  | |
| Date the participant started work for you |  | |
| Is the participant still employed with you? | YES | NO |
| If NO, what date did they finish? |  | |
| How many hours/week on average are they working/did they work? |  | |
| Is the participant working as a Hairdresser? | YES | NO |
| If NO, what is their current occupation/job? |  | |
| Is the participant a subcontractor? | YES | NO |
| If YES, do you supervise the participant (i.e., they work under your direction and you directly assign them work)? | YES | NO |

## Section Two: Business Details

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Registered Business Name |  | | | | | | | |
| Address |  | | | | | | | |
| Australian Business Number (ABN) |  | | | | | | | |
| Address of website or web presence (e.g., Facebook) |  | | | | | | | |
| Name of Employer |  | | | | | | | |
| Contact number/s and email |  | | | | | | | |
| Name of Supervisor |  | | | | | | | |
| Contact number/s and email |  | | | | | | | |
| Number of Hairdressers employed |  | | | | | | | |
| Seating capacity/maximum number of clients |  | | | | | | | |
| Type of business | Barber shop | Beauty parlour | | | | | Hairdresser | | | |
|  | Salon | Other (please specify) | | | | |  | | | |
| Opening days | Monday | Tuesday | | | | | Wednesday | | | |
|  | Thursday | Friday | | | | | Saturday | | | |
|  | Sunday |  | | | | |  | | | |
| Do you provide pay slips? | YES | | | | NO | | |
| If YES, how often? | Weekly | | Fortnightly | | | Monthly | | | |
| If NO, do you direct deposit wages to the participant under sub-contracting arrangements? | YES | | | NO | | | | |
| If NO, please provide reason. |  | | | | | | | |

## Section Three: Tasks Performed

**Hairdresser [391111]:** Cuts, styles, colours, straightens, and permanently waves hair, treats hair and scalp conditions, braids, plaits, adds hair extensions. May also shave, trim and shape beards.

Please tell us about the work the JRP participant is doing, or will have the opportunity to do, in your workplace as a Hairdresser.

This section is divided into *trade* skills (the tasks and work they do; the tools and equipment they use) and *workplace* skills (how they communicate and work with others; how they get the work done).

It is important that the participant has the opportunity in your workplace to develop their skills and understanding in all these areas. If you tick no to any of the questions below, please provide reasons in the comments box.

***Trade Skills***

|  |  |  |  |
| --- | --- | --- | --- |
| Tasks and Duties | Yes | No | Comments |
| Identifying the occupational health and safety, hygiene, and workplace procedures required to complete tasks safely |  |  |  |
| Providing advice on hair care, hair products and hairstyles |  |  |  |
| Consulting with customers on their style preferences, using tact and good communication skills |  |  |  |
| Shampooing hair and conditioning scalps, analysing hair and scalp conditions |  |  |  |
| Colouring, straightening, curling and volumising hair |  |  |  |
| Cutting hair with scissors, clippers, and razors |  |  |  |
| Styling hair, including up-styling |  |  |  |
| Cutting men’s hair in traditional and classic styles |  |  |  |
| Cleaning work areas and sanitising instruments |  |  |  |
| Participating in environmentally sustainable work practices |  |  |  |
| Arranging appointments and collecting payments |  |  |  |

***Workplace Skills***

|  |  |  |  |
| --- | --- | --- | --- |
| The participant will build their understanding of the workplace by: | Yes | No | Comments |
| Learning about Australian Standards, legislation, regulations, and terminology relevant to Hairdressers |  |  |  |
| Managing resources |  |  |  |
| Working effectively with others |  |  |  |
| Communicating effectively |  |  |  |
| Identifying and resolving issues and problems |  |  |  |

## Additional Information/Comments

Please write in the space below if you have any further information and/or comments on the JRP participant’s work performance or duties.

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| --- |
|  |

## Section Four: Supervisor and Employer Declaration

**NOTE: Penalties apply under the Crimes Act 1914 and the Criminal Code Act 1995 may apply for making false or misleading statements and providing false or misleading information or documents.**

**I confirm that**:

1. I am an authorised representative of the business listed in Section 2
2. the information in Sections 1 and 2 above is true and accurate
3. the information in Section 3 is a true and accurate record of the tasks and duties that the JRP participant is doing, or will be doing, in this workplace
4. I agree to allow a workplace assessment of the participant’s skills.

|  |  |
| --- | --- |
| **Supervisor Name** |  |
| **Position** |  |
| **Signature** |  |
| **Date** (dd/mm/yyyy) |  |

|  |  |
| --- | --- |
| **Employer Name (if different to Supervisor)** |  |
| **Signature** |  |
| **Date** (dd/mm/yyyy) |  |