



# TEXAS DEPARTMENT OF LICENSING & REGULATION

P.O. Box 12157 • Austin, Texas 78711-2157

[www.tdlr.texas.gov](http://www.tdlr.texas.gov)

## LASER HAIR REMOVAL TECHNICIAN 100 LHR SUPERVISED PROCEDURES AFFIDAVIT INSTRUCTIONS

**A Laser Hair Removal (LHR) Technician licensee must directly supervise 100 LHR procedures as audited by an LHR Professional within twelve months of applying for an upgrade to the Senior LHR Technician license.**

Signatures are required by the applicant and LHR Professional that audited the procedures.

**Please note: An LHR Technician license must be issued before the 100 LHR supervised procedures may begin. Procedures supervised prior to the issuance of the LHR Technician license will not be accepted.**

Once the 100 LHR supervised procedures are completed, the affidavit must be signed by the LHR Professional and submitted with the Senior LHR Technician application.

1. LHR TECHNICIAN NAME– Provide the legal name of the LHR Technician license holder applying for an upgrade to the Senior LHR Technician in the space provided. (Last Name, First Name, Middle Name, Suffix). Examples of a suffix include Jr., Sr., and II. (Mr. is not a suffix.)
2. LHR TECHNICIAN LICENSE NUMBER – Provide the LHR Technician license number.
3. LHR TECHNICIAN STATEMENT OF AGREEMENT – Carefully read the statement, list the number of LHR supervised procedures audited by an LHR Professional, sign, and date.
4. NAME OF LHR PROFESSIONAL – Indicate the legal name of the LHR Professional license holder that audited the supervised LHR procedures in the space provided. (Last Name, First Name, Middle Name, Suffix) Examples of a suffix include Jr., Sr., and II. (Mr. is not a suffix.)
5. LHR PROFESSIONAL'S LICENSE NUMBER – Provide the LHR Professional's license number.
6. LHR PROFESSIONAL'S STATEMENT OF AGREEMENT - The affidavit must be signed by the auditing LHR Professional. Carefully read the statement, sign, and date.

**Please read the requirements below for upgrade to Senior LHR Technician**

### **§ 118.33. Laser Hair Removal Individual License--Requirements and Application.**

(c) Senior Laser Hair Removal Technician License Requirements. An applicant for a senior LHR technician certificate shall meet the following requirements:

- (1) meet the requirements for an LHR technician license in accordance with this chapter; and
- (2) have directly supervised at least 100 LHR procedures within 12 months, as audited by an LHR professional. An individual shall not supervise LHR procedures without audit by an LHR professional until:
  - (A) 100 LHR procedures within 12 months have been directly supervised, as audited by an LHR professional; and
  - (B) an individual senior LHR technician license has been issued by the department in accordance with this chapter.



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## LASER HAIR REMOVAL TECHNICIAN 100 SUPERVISED LHR PROCEDURES AFFIDAVIT

An LHR Technician license holder is required to directly supervise 100 LHR procedures as audited by an LHR Professional in order to upgrade to the Senior LHR Technician license.

**If the supervised LHR procedures are audited by more than one LHR Professional, additional affidavits must be submitted to total 100 LHR procedures.**

1. Laser Hair Removal Technician Name:

2. LHR License Number:

\_\_\_\_\_  
Last

\_\_\_\_\_  
First

\_\_\_\_\_  
Middle

### 3. LASER HAIR REMOVAL TECHNICIAN STATEMENT OF AGREEMENT

I do hereby certify that I have completed the specified number of supervised LHR procedures as audited by an LHR Professional in accordance with 16 Texas Administrative Code (TAC), Chapter 118. The procedures have been completed within the previous twelve months of submission of the Senior LHR Technician application.

I certify that I have read and will comply with all applicable provisions of the Health and Safety Code, Chapter 401, §§401.501-401.522, Subchapter M and administrative rules under 16 TAC, Chapter 118.

I understand that any LHR procedures supervised prior to the issuance of the LHR Technician license will not be accepted.

I understand that providing false information on this application may result in denial of this application and/or revocation of my license and/or the imposition of administrative penalties.

Total number of directly supervised LHR procedures completed : \_\_\_\_\_

\_\_\_\_\_  
Signature of LHR Technician License Holder

\_\_\_\_\_  
Date Signed

4. Name of LHR Professional that audited the supervised LHR procedures:

5. LHR Professional's License #:

\_\_\_\_\_  
Last, First, Middle Name, Suffix (Jr., Sr., III)

### 6. LHR PROFESSIONAL'S STATEMENT OF AGREEMENT

I do hereby certify that I have supervised the specified number of LHR procedures as required by 16 TAC, Chapter 118. I certify that I have read and will comply with all applicable provisions of the Health and Safety Code, Chapter 401, §§401.501-401.522, Subchapter M and administrative rules under 16 Texas Administrative Code, Chapter 118. I understand that providing false information on this application may result in denial of this application and/or revocation of the license requested and the imposition of administrative penalties.

\_\_\_\_\_  
LHR Professional's Signature

\_\_\_\_\_  
Date Signed