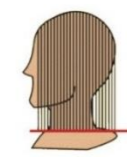
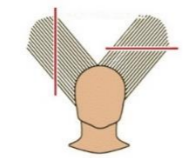

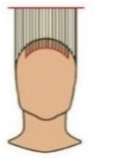


Cyfeirnod portffolio:

Enw'r prentis:			
Enw/cyfeirnod y cleient:		Cleient newydd <input type="checkbox"/>	Cleient presennol <input type="checkbox"/>
Dyddiad:			
Cost y gwasanaeth:			
	Ymgynghoriad <input type="checkbox"/>	Siampwio, cyflyru a thrin gwallt <input type="checkbox"/>	
	Technegau torri <input type="checkbox"/>	Steilio a gorffennu gwallt <input type="checkbox"/>	
	Lliwio a goleuo gwallt <input type="checkbox"/>	Permio <input type="checkbox"/>	
	Llacio gwallt <input type="checkbox"/>	Estyniadau gwallt <input type="checkbox"/>	
Trosolwg o'r gwasanaeth/ amseriadau'r gwasanaeth:	Dymuniadau'r cleient/achlysur;		

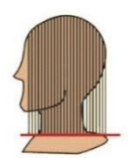
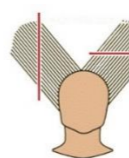

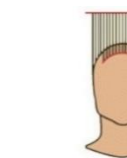
Dosbarthiadau gwallt	Gwead		
	1a Ffein	1b Canolig	1c Cwrs
Math 1 – Gwallt syth	Syth <input type="checkbox"/>	Syth gyda foliwm <input type="checkbox"/>	Gwallt anodd syth <input type="checkbox"/>
Math 2 – Gwallt tonnog	2a Ffein Patrwm 'S' <input type="checkbox"/>	2b Canolig Patrwm 'S' crychlyd <input type="checkbox"/>	2c Cwrs Patrwm 'S' crychlyd iawn <input type="checkbox"/>
Math 3 – Gwallt cyrliog	3a Ffein Cwrl rhydd <input type="checkbox"/>	3b Canolig Cwrl llac <input type="checkbox"/>	3c Cwrs Cwrl tynn <input type="checkbox"/>
Math 4 – Gwallt cyrliog iawn	4a Ffein Patrwm cwrl wedi'i dorchi'n dynn <input type="checkbox"/>	4b Canolig Patrwm Z a chwrl gwrychog <input type="checkbox"/>	4c Cwrs Patrwm Z tynn <input type="checkbox"/>







Wedi ystyried holl ffactorau dylanwadol					
Dwysedd (faint o wallt)	Trwchus <input type="checkbox"/>	Canolig <input type="checkbox"/>	Tenau <input type="checkbox"/>		
Hyd y gwallt	Uwch ysgwydd <input type="checkbox"/>	O dan yr ysgwydd <input type="checkbox"/>	Un hyd <input type="checkbox"/>	Haenog <input type="checkbox"/>	Ffrinj <input type="checkbox"/>
Cyflwr y gwallt	Normal <input type="checkbox"/>	Seimlyd <input type="checkbox"/>	Wedi'i niweidio <input type="checkbox"/>	Gwaddodion cynnyrch <input type="checkbox"/>	Sych <input type="checkbox"/>
Cyflwr croen pen	Normal <input type="checkbox"/>	Seimlyd <input type="checkbox"/>	Cen pen <input type="checkbox"/>	Gwaddodion cynnyrch <input type="checkbox"/>	Sych <input type="checkbox"/>
Patrymau tyfiant	Llyfiad llo <input type="checkbox"/>	Pigyn gweddw <input type="checkbox"/>	Llyfiad gwegil <input type="checkbox"/>	Corun ceiliog <input type="checkbox"/>	Patrwm moelni mewn dynion <input type="checkbox"/>
% o wallt gwyn	Dim <input type="checkbox"/>	10% <input type="checkbox"/>	25% <input type="checkbox"/>	50% <input type="checkbox"/>	75% <input type="checkbox"/>
Tôn y croen	Cynnes <input type="checkbox"/>	Niwtral <input type="checkbox"/>	Claeaf <input type="checkbox"/>	Onnen <input type="checkbox"/>	
Triniaeth gemegol	Pen Fergin <input type="checkbox"/>	Wedi'i bermio o'r blaen <input type="checkbox"/>	Wedi'i liwio o'r blaen <input type="checkbox"/>	Wedi cael blaenoleuadau o'r blaen <input type="checkbox"/>	Wedi'i lacio o'r blaen <input type="checkbox"/>
Tymheredd	Gwres wedi'i ychwanegu <input type="checkbox"/>	Dim gwres <input type="checkbox"/>			
Math o doriad gwallt	Cyfuniad o doriadau gwallt		Datgysylltiad		
	 Un hyd <input type="checkbox"/>	 Graddoledig – byr neu hir <input type="checkbox"/>	 Haen unfurf <input type="checkbox"/>	 Haen sgwâr <input type="checkbox"/>	

Portfolio reference:

Apprentice name:			
Client name/reference no:		New client <input type="checkbox"/>	Existing client <input type="checkbox"/>
Date:			
Service cost:			
	Consultation <input type="checkbox"/>	Shampoo, condition and treat <input type="checkbox"/>	
	Cutting techniques <input type="checkbox"/>	Style and finish hair <input type="checkbox"/>	
	Colour and lighten hair <input type="checkbox"/>	Perming <input type="checkbox"/>	
	Relaxing hair <input type="checkbox"/>	Hair extensions <input type="checkbox"/>	
Service overview/service timings:	Client wishes/occasion;		

Hair classifications	Texture		
	1a Fine	1b Medium	1c Coarse
Type 1 – Straight hair	Straight <input type="checkbox"/>	Straight with volume <input type="checkbox"/>	Straight difficult hair <input type="checkbox"/>
Type 2 – Wavy hair	2a Fine 'S' pattern <input type="checkbox"/>	2b Medium Frizzy 'S' pattern <input type="checkbox"/>	2c Coarse Very frizzy 'S' pattern <input type="checkbox"/>
Type 3 – Curly hair	3a Fine Soft curl <input type="checkbox"/>	3b Medium Loose curl <input type="checkbox"/>	3c Coarse Tight curl <input type="checkbox"/>
Type 4 – Very curly hair	4a Fine Tightly coiled curl pattern <input type="checkbox"/>	4b Medium Z pattern & spring curl <input type="checkbox"/>	4c Coarse Tight Z pattern <input type="checkbox"/>







Considered all influencing factors					
Density (amount of hair)	Thick <input type="checkbox"/>	Medium <input type="checkbox"/>	Thin <input type="checkbox"/>		
Hair length	Above shoulder <input type="checkbox"/>	Below shoulder <input type="checkbox"/>	One length <input type="checkbox"/>	Layered <input type="checkbox"/>	Fringe <input type="checkbox"/>
Hair condition	Normal <input type="checkbox"/>	Oily <input type="checkbox"/>	Damaged <input type="checkbox"/>	Product build-up <input type="checkbox"/>	Dry <input type="checkbox"/>
Scalp condition	Normal <input type="checkbox"/>	Oily <input type="checkbox"/>	Dandruff <input type="checkbox"/>	Product build-up <input type="checkbox"/>	Dry <input type="checkbox"/>
Growth patterns	Cowlick <input type="checkbox"/>	Widows peak <input type="checkbox"/>	Nape whorl <input type="checkbox"/>	Double crown <input type="checkbox"/>	Male pattern baldness <input type="checkbox"/>
% of white hair	None <input type="checkbox"/>	10% <input type="checkbox"/>	25% <input type="checkbox"/>	50% <input type="checkbox"/>	75% <input type="checkbox"/>
Skin tone	Warm <input type="checkbox"/>	Neutral <input type="checkbox"/>	Cool <input type="checkbox"/>	Ash <input type="checkbox"/>	
Chemically treated	Virgin <input type="checkbox"/>	Previously permed <input type="checkbox"/>	Previously coloured <input type="checkbox"/>	Previously hi-lighted <input type="checkbox"/>	Previously relaxed <input type="checkbox"/>
Temperature	Added heat <input type="checkbox"/>	No heat <input type="checkbox"/>			
Hair cut type	Combination of hair cuts		Disconnection		
	 One length <input type="checkbox"/>	 Short or long graduation <input type="checkbox"/>	 Uniform layer <input type="checkbox"/>	 Square layer <input type="checkbox"/>	

Siapiau'r wyneb					
					
Hirgrwn	Sgwâr	Crwn	Calon	Petryal	Diemwnt

Offer gwarchod personol					
Offer gwarchod personol	Gŵn <input type="checkbox"/>	Coler dorri <input type="checkbox"/>	Tywel(ion) <input type="checkbox"/>	Gwlân cotwm <input type="checkbox"/>	Clogyn <input type="checkbox"/>
	Cadach gwddf <input type="checkbox"/>	Cap <input type="checkbox"/>	Menig <input type="checkbox"/>	Ffedog <input type="checkbox"/>	

A fydd y gwrtharwyddion yn effeithio ar y gwasanaeth	Cyngor a roddwyd/camau a gymerwyd	
Heintiadau tybiedig	Bydd <input type="checkbox"/>	Na fydd <input type="checkbox"/>
Plâu tybiedig	Bydd <input type="checkbox"/>	Na fydd <input type="checkbox"/>
Hanes meddygol	Bydd <input type="checkbox"/>	Na fydd <input type="checkbox"/>
Cyngor neu gyfarwyddiadau meddygol	Bydd <input type="checkbox"/>	Na fydd <input type="checkbox"/>
Niwed i'r gwallt	Bydd <input type="checkbox"/>	Na fydd <input type="checkbox"/>
Briwiau a chrafiadau	Bydd <input type="checkbox"/>	Na fydd <input type="checkbox"/>
Anafiadau/creithiau diweddar	Bydd <input type="checkbox"/>	Na fydd <input type="checkbox"/>
Ffordd o fyw	Bydd <input type="checkbox"/>	Na fydd <input type="checkbox"/>
Sensitifedd croen y pen	Bydd <input type="checkbox"/>	Na fydd <input type="checkbox"/>
Siâp y pen a'r wyneb	Bydd <input type="checkbox"/>	Na fydd <input type="checkbox"/>
Hanes o adweithiau alergaidd i liw	Bydd <input type="checkbox"/>	Na fydd <input type="checkbox"/>
Tyllau yn y corff	Bydd <input type="checkbox"/>	Na fydd <input type="checkbox"/>
Cynhyrchion a gwasanaethau anghymarus	Bydd <input type="checkbox"/>	Na fydd <input type="checkbox"/>
Presenoldeb/ansawdd gwallt a ychwanegwyd	Bydd <input type="checkbox"/>	Na fydd <input type="checkbox"/>
Faint o ad-dyfiant	Bydd <input type="checkbox"/>	Na fydd <input type="checkbox"/>
Steil gwallt	Bydd <input type="checkbox"/>	Na fydd <input type="checkbox"/>
Trawsnewidiad	Bydd <input type="checkbox"/>	Na fydd <input type="checkbox"/>
Tynnu estyniadau/plethi	Bydd <input type="checkbox"/>	Na fydd <input type="checkbox"/>
Ysbaid rhwng gwasanaethau cemegol	Bydd <input type="checkbox"/>	Na fydd <input type="checkbox"/>

Profi gwallt					
Prawf amsugedd	Da <input type="checkbox"/>	Canolig <input type="checkbox"/>	Gwael <input type="checkbox"/>		
Prawf elastigedd	Da <input type="checkbox"/>	Canolig <input type="checkbox"/>	Gwael <input type="checkbox"/>		
Prawf anghydnewydd	Adwaith negyddol <input type="checkbox"/>	Adwaith positif <input type="checkbox"/>			
Prawf croen	Adwaith negyddol <input type="checkbox"/>	Adwaith positif <input type="checkbox"/>			
Prawf lliw	Wedi cyflawni'r canlyniad a dargedwyd <input type="checkbox"/>	Canlyniad arall:			
Prawf datblygu	Wedi cyflawni'r canlyniad a dargedwyd <input type="checkbox"/>	Canlyniad arall:			
Prawf tynnu	Da <input type="checkbox"/>	Canolig <input type="checkbox"/>	Gwael <input type="checkbox"/>		
Canlyniad prawf cudynnau					

Face shapes					
					
Oval	Square	Round	Heart	Oblong	Diamond

Personal protective equipment					
PPE	Gown <input type="checkbox"/>	Cutting collar <input type="checkbox"/>	Towel(s) <input type="checkbox"/>	Cotton wool <input type="checkbox"/>	Cape <input type="checkbox"/>
	Neck protection <input type="checkbox"/>	Cap <input type="checkbox"/>	Gloves <input type="checkbox"/>	Apron <input type="checkbox"/>	

Will the contra-indications affect the service	Advice given/actions taken	
Suspected infections	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Suspected infestations	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Medical history	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Medical advice or instructions	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Hair damage	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Cuts and abrasions	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Recent injuries/scarring	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Lifestyle	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Scalp sensitivity	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Head and body shape	Yes <input type="checkbox"/>	No <input type="checkbox"/>
History of allergic reactions to colour	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Piercings	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Incompatibility of products and services	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Presence/quality of added hair	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Amount of re-growth	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Hair style	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Transition	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Removal of extensions/plaits	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Time interval between chemical service	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Testing hair					
Porosity test	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>		
Elasticity test	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>		
Incompatibility test	Negative reaction <input type="checkbox"/>	Positive reaction <input type="checkbox"/>			
Skin test	Negative reaction <input type="checkbox"/>	Positive reaction <input type="checkbox"/>			
Colour test	Achieved target result <input type="checkbox"/>	Other result:			
Development test	Achieved target result <input type="checkbox"/>	Other result:			
Pull test	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>		
Strand test result					

Offer					
Offer a ddefnyddiwyd	Crib torri <input type="checkbox"/>	Crib dannedd llydan <input type="checkbox"/>	Crib cynffon <input type="checkbox"/>	Crib gorffennu <input type="checkbox"/>	Siswrn <input type="checkbox"/>
	Siswrn teneuo <input type="checkbox"/>	Clipiwr <input type="checkbox"/>	Ategolion clipiwr <input type="checkbox"/>	Raseli <input type="checkbox"/>	Gefeilliau <input type="checkbox"/>
	Sythwyr <input type="checkbox"/>	Sychwr llaw <input type="checkbox"/>	Gwasgarwr <input type="checkbox"/>	Ffroenell <input type="checkbox"/>	Clipiau <input type="checkbox"/>
	Brwsh crwn <input type="checkbox"/>	Brwsh padl/fflat <input type="checkbox"/>	Brwsh awyru <input type="checkbox"/>	Sychwr cwfl <input type="checkbox"/>	Rholiau gwres <input type="checkbox"/>
	Rholiau <input type="checkbox"/>	Clipiau pin <input type="checkbox"/>	Stemiwr <input type="checkbox"/>	Gorchudd gwallt plastig <input type="checkbox"/>	Powlen a brwsh <input type="checkbox"/>
	Cyflymydd gwres <input type="checkbox"/>	Gafaelion a phinnau <input type="checkbox"/>			
	Arall:				

Defnyddio system rifo'r ICC i adnabod lliw presennol y gwallt			
	Gwreiddiau	I lawr yr hyd	Gwaelodion

Faint o'r cynnyrch lliw a ddefnyddiwyd	¼ tiwb <input type="checkbox"/>	½ tiwb <input type="checkbox"/>	¾ tiwb <input type="checkbox"/>	Tiwb cyfan <input type="checkbox"/>
Faint o'r cynnyrch goleuo a ddefnyddiwyd				
Cryfder y perocsid a ddefnyddiwyd	2% <input type="checkbox"/>	4% <input type="checkbox"/>	6% <input type="checkbox"/>	9% <input type="checkbox"/>
	12% <input type="checkbox"/>	Arall:		
Cymarebau cymysgu				
Dilyniant				

Cynhyrchion a ddefnyddiwyd yn ystod y gwasanaeth					
Siampwio	Normal <input type="checkbox"/>	Seimlyd <input type="checkbox"/>	Gwaddodion cynnyrch <input type="checkbox"/>	Sych <input type="checkbox"/>	Wed'i niweidio <input type="checkbox"/>
Cyflyru	Arwynebol <input type="checkbox"/>	Treiddiol <input type="checkbox"/>	Triniaeth i groen pen <input type="checkbox"/>		
Steilio a gorffennu/ Setio a gorffennu/ Gwallt a ychwanegwyd	Cynnyrch amddiffyn rhag gwres <input type="checkbox"/>	Chwistrell <input type="checkbox"/>	Mousse <input type="checkbox"/>	Hufen <input type="checkbox"/>	Gel <input type="checkbox"/>
	Serwm <input type="checkbox"/>	Cwyr <input type="checkbox"/>	Hylif setio <input type="checkbox"/>		
	Llawrydd <input type="checkbox"/>	Clipio ymlaen <input type="checkbox"/>	Cudyn <input type="checkbox"/>	Ffrinj <input type="checkbox"/>	
Torri	Chwistrell datglymu <input type="checkbox"/>				
Lliwio	Lled-barhaol <input type="checkbox"/>	Cwasi <input type="checkbox"/>	Parhaol <input type="checkbox"/>	Goleuydd <input type="checkbox"/>	Tynhawyr <input type="checkbox"/>
	Cynhyrchion tynnu lliw <input type="checkbox"/>				
Permio	Eli rhwystrol <input type="checkbox"/>	Triniaeth cyn/ôl perm <input type="checkbox"/>	Ad-drefnydd cemegol <input type="checkbox"/>	Hylif permio <input type="checkbox"/>	Niwtralydd <input type="checkbox"/>
Triniaethau ymlacio	Cynnyrch amddiffyn croen pen <input type="checkbox"/>	Llaciwr sodiwm <input type="checkbox"/>	Llaciwr di-sodiwm <input type="checkbox"/>	Cyn/ôl-driniaethau <input type="checkbox"/>	Siampw normaleiddio <input type="checkbox"/>

Equipment					
Equipment used	Cutting comb <input type="checkbox"/>	Wide tooth comb <input type="checkbox"/>	Tail comb <input type="checkbox"/>	Dressing comb <input type="checkbox"/>	Scissors <input type="checkbox"/>
	Thinning scissors <input type="checkbox"/>	Clipper <input type="checkbox"/>	Clipper attachment <input type="checkbox"/>	Razors <input type="checkbox"/>	Tongs <input type="checkbox"/>
	Straighteners <input type="checkbox"/>	Hand dryer <input type="checkbox"/>	Diffuser <input type="checkbox"/>	Nozzle <input type="checkbox"/>	Clips <input type="checkbox"/>
	Round brush <input type="checkbox"/>	Paddle/flat brush <input type="checkbox"/>	Vent brush <input type="checkbox"/>	Hood dryer <input type="checkbox"/>	Heated rollers <input type="checkbox"/>
	Rollers <input type="checkbox"/>	Pin clips <input type="checkbox"/>	Steamer <input type="checkbox"/>	Plastic hair cover <input type="checkbox"/>	Bowl and brush <input type="checkbox"/>
	Heat accelerator <input type="checkbox"/>	Grips and pins <input type="checkbox"/>			
	Other:				

Using the ICC numbering system, identify the present colour of hair			
	Roots	Mid-lengths	Ends

Quantity of colour product used	¼ tube <input type="checkbox"/>	½ tube <input type="checkbox"/>	¾ tube <input type="checkbox"/>	Whole tube <input type="checkbox"/>
Quantity of lightening product used				
Peroxide strength used	2% <input type="checkbox"/>	4% <input type="checkbox"/>	6% <input type="checkbox"/>	9% <input type="checkbox"/>
	12% <input type="checkbox"/>	Other:		
Mixing ratios				
Sequence				

Products used during service					
Shampooing	Normal <input type="checkbox"/>	Oily <input type="checkbox"/>	Product build-up <input type="checkbox"/>	Dry <input type="checkbox"/>	Damaged <input type="checkbox"/>
Conditioning	Surface <input type="checkbox"/>	Penetrating <input type="checkbox"/>	Scalp treatment <input type="checkbox"/>		
Style and finish/Set and dress/Added hair	Heat protector <input type="checkbox"/>	Spray <input type="checkbox"/>	Mousse <input type="checkbox"/>	Cream <input type="checkbox"/>	Gel <input type="checkbox"/>
	Serum <input type="checkbox"/>	Wax <input type="checkbox"/>	Setting lotion <input type="checkbox"/>		
	Freehand <input type="checkbox"/>	Clip in <input type="checkbox"/>	Strand <input type="checkbox"/>	Fringe <input type="checkbox"/>	
Cutting	Detangling spray <input type="checkbox"/>				
Colouring	Semi <input type="checkbox"/>	Quasi <input type="checkbox"/>	Permanent <input type="checkbox"/>	Lightener <input type="checkbox"/>	Toners <input type="checkbox"/>
	Colour removers <input type="checkbox"/>				
Perming	Barrier cream <input type="checkbox"/>	Pre/post-perm treatment <input type="checkbox"/>	Chemical re-arranger <input type="checkbox"/>	Perm lotion <input type="checkbox"/>	Neutraliser <input type="checkbox"/>
Relaxing treatments	Scalp protectors <input type="checkbox"/>	Sodium relaxer <input type="checkbox"/>	Non-sodium relaxer <input type="checkbox"/>	Pre/post treatments <input type="checkbox"/>	Normalising shampoo <input type="checkbox"/>

Technegau a ddefnyddiwyd					
Siampwio/cyflyru/trin	Effleurage <input type="checkbox"/>	Petrissage <input type="checkbox"/>	Cylchdro <input type="checkbox"/>	Ffrithiant <input type="checkbox"/>	
Steilio a gorffennu gwallt	Chwyth-sychu <input type="checkbox"/>	Sychu gyda'r bysedd <input type="checkbox"/>	Sythu <input type="checkbox"/>	Llyfnu <input type="checkbox"/>	Foliwm <input type="checkbox"/>
	Symudiad <input type="checkbox"/>	Cyrlio <input type="checkbox"/>			
Setio a gorffennu gwallt	Gwallt i fyny <input type="checkbox"/>	Setio <input type="checkbox"/>	Plethi <input type="checkbox"/>	Brediau <input type="checkbox"/>	Clymau <input type="checkbox"/>
	Troelli <input type="checkbox"/>	Gorffennu gwallt <input type="checkbox"/>	Ychwanegu gwallt <input type="checkbox"/>	Setio gan ddefnyddio rholiau <input type="checkbox"/>	Setio lapio <input type="checkbox"/>
	Bric <input type="checkbox"/>	Cyfeiriol <input type="checkbox"/>	Cyrlio troellog <input type="checkbox"/>	Sylfaen ymlaen/i ffwrdd <input type="checkbox"/>	Pincyrlio <input type="checkbox"/>
	O'r gwreiddyn i'r pwynt <input type="checkbox"/>	O'r pwynt i'r gwreiddyn <input type="checkbox"/>	Cyrliu <input type="checkbox"/>	Rholiau <input type="checkbox"/>	Llyfnu <input type="checkbox"/>
	Ôl-gribo <input type="checkbox"/>	Ôl-frwsio <input type="checkbox"/>			
Technegau torri	Gwlyb <input type="checkbox"/>	Sych <input type="checkbox"/>	Toriad clwb <input type="checkbox"/>	Llawrydd <input type="checkbox"/>	Siswrn dros grib <input type="checkbox"/>
	Ychwanegu gwead <input type="checkbox"/>	Torri â rasel <input type="checkbox"/>	Gwaith â chlipiwr <input type="checkbox"/>	Manwl <input type="checkbox"/>	Gyda ffrinj <input type="checkbox"/>
	Datgysylltiad <input type="checkbox"/>				
Lliwio a goleuo	Pencyfan cwasi <input type="checkbox"/>	Ad-dyfiant parhaol <input type="checkbox"/>	Pencyfan parhaol <input type="checkbox"/>	Blaenoleuadau wedi'u plethu <input type="checkbox"/>	Tanoleuadau wedi'u plethu <input type="checkbox"/>
	Blaenoleuadau wedi'u sleisio <input type="checkbox"/>	Adfer dyfnder/tôn <input type="checkbox"/>	Niwtraleiddio tôn lliw <input type="checkbox"/>	Gwallt sy'n gwrthsefyll lliw <input type="checkbox"/>	
Permio	Sylfaenol <input type="checkbox"/>	Cyfeiriol <input type="checkbox"/>	Bric <input type="checkbox"/>		
Llacio	Pen a gwaelod <input type="checkbox"/>	Pen <input type="checkbox"/>	Llaw <input type="checkbox"/>	Gwallt fergin <input type="checkbox"/>	Ad-dyfiant 4-8 wythnos <input type="checkbox"/>
	Ad-dyfiant hyd at 12 wythnos <input type="checkbox"/>	Llacio <input type="checkbox"/>	Sythu <input type="checkbox"/>	Systemau llyfnu <input type="checkbox"/>	
Faint o lacio					
Estyniadau	Byr-dymor <input type="checkbox"/>	Hir-dymor <input type="checkbox"/>	Ffug <input type="checkbox"/>	Dynol <input type="checkbox"/>	Rhannol <input type="checkbox"/>
	Pen cyfan <input type="checkbox"/>	Clipio ymlaen <input type="checkbox"/>	Plethu'r anwe <input type="checkbox"/>	Gludo ymlaen <input type="checkbox"/>	
Torri estyniadau gwallt	Pwynt <input type="checkbox"/>	Blaenfeinio <input type="checkbox"/>	Llawrydd <input type="checkbox"/>	Gyda rasel <input type="checkbox"/>	Ychwanegu gwead <input type="checkbox"/>

Cyngor ac argymhellion	Cyngor a roddwyd		
Sut i gynnal eu hedrychiad	Do <input type="checkbox"/>	Naddo <input type="checkbox"/>	
Ysbaid rhwng gwasanaethau	Do <input type="checkbox"/>	Naddo <input type="checkbox"/>	
Cynhyrchion	Do <input type="checkbox"/>	Naddo <input type="checkbox"/>	
Gwasanaethau	Do <input type="checkbox"/>	Naddo <input type="checkbox"/>	
Technegau datglymu cywir	Do <input type="checkbox"/>	Naddo <input type="checkbox"/>	
Defnyddio offer	Do <input type="checkbox"/>	Naddo <input type="checkbox"/>	
Diblisgo	Do <input type="checkbox"/>	Naddo <input type="checkbox"/>	
Arfer iechyd a diogelwch	Wedi gweithio'n ddiogel ac yn hylan drwy gydol y gwasanaeth		Do <input type="checkbox"/> Naddo <input type="checkbox"/>

Llofnod yr aseswr:	Llofnod y myfyriwr:
Llofnod arall:	Perthynas i'r prentis:

Techniques used					
Shampoo/condition/treat	Effleurage <input type="checkbox"/>	Petrissage <input type="checkbox"/>	Rotary <input type="checkbox"/>	Friction <input type="checkbox"/>	
Style and finish hair	Blow-drying <input type="checkbox"/>	Finger drying <input type="checkbox"/>	Straightening <input type="checkbox"/>	Smoothing <input type="checkbox"/>	Volume <input type="checkbox"/>
	Movement <input type="checkbox"/>	Curl <input type="checkbox"/>			
Set and dress hair	Hair up <input type="checkbox"/>	Setting <input type="checkbox"/>	Plaits <input type="checkbox"/>	Braids <input type="checkbox"/>	Knots <input type="checkbox"/>
	Twist <input type="checkbox"/>	Dress hair <input type="checkbox"/>	Added hair <input type="checkbox"/>	Set using rollers <input type="checkbox"/>	Wrap setting <input type="checkbox"/>
	Brick <input type="checkbox"/>	Directional <input type="checkbox"/>	Spiral curling <input type="checkbox"/>	On/off base <input type="checkbox"/>	Pin curling <input type="checkbox"/>
	Root to point <input type="checkbox"/>	Point to root <input type="checkbox"/>	Curls <input type="checkbox"/>	Rolls <input type="checkbox"/>	Smoothing <input type="checkbox"/>
	Back combing <input type="checkbox"/>	Back brushing <input type="checkbox"/>			
Cutting techniques	Wet <input type="checkbox"/>	Dry <input type="checkbox"/>	Club cutting <input type="checkbox"/>	Freehand <input type="checkbox"/>	Scissor over combs <input type="checkbox"/>
	Texturising <input type="checkbox"/>	Razor cutting <input type="checkbox"/>	Clipper work <input type="checkbox"/>	Precision <input type="checkbox"/>	With fringe <input type="checkbox"/>
	Disconnecting <input type="checkbox"/>				
Colouring and lightening	Full head quasi <input type="checkbox"/>	Re-growth permanent <input type="checkbox"/>	Full head permanent <input type="checkbox"/>	Woven highlights <input type="checkbox"/>	Woven lowlights <input type="checkbox"/>
	Sliced highlights <input type="checkbox"/>	Restore depth/tone <input type="checkbox"/>	Neutralise colour tone <input type="checkbox"/>	Colour resistant hair <input type="checkbox"/>	
Perming	Basic <input type="checkbox"/>	Directional <input type="checkbox"/>	Brick <input type="checkbox"/>		
Relaxing	Top and bottom <input type="checkbox"/>	Top <input type="checkbox"/>	Hand <input type="checkbox"/>	Virgin <input type="checkbox"/>	Re-growth 4-8 weeks <input type="checkbox"/>
	Re-growth up to 12 weeks <input type="checkbox"/>	Relaxing <input type="checkbox"/>	Straightening <input type="checkbox"/>	Smoothing systems <input type="checkbox"/>	
Degree of relaxation					
Extensions	Short term <input type="checkbox"/>	Long term <input type="checkbox"/>	Artificial <input type="checkbox"/>	Human <input type="checkbox"/>	Partial <input type="checkbox"/>
	Full head <input type="checkbox"/>	Clip in <input type="checkbox"/>	Weft-weave in <input type="checkbox"/>	Glue in <input type="checkbox"/>	
Cutting hair extensions	Point <input type="checkbox"/>	Tapering <input type="checkbox"/>	Freehand <input type="checkbox"/>	Razoring <input type="checkbox"/>	Texturising <input type="checkbox"/>

Advice and recommendations	Advice given		
How to maintain their look	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Time interval between services	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Products	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Services	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Correct detangling techniques	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Equipment use	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Exfoliating	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Health and safety practice	Worked safely and hygienically throughout the service		Yes <input type="checkbox"/> No <input type="checkbox"/>

Assessor signature:	Student signature:
Other signature:	Relationship to apprentice: