



EST. 1946

CIDESCO

THE WORLD STANDARD FOR BEAUTY & SPA THERAPY

CIDESCO School Application for Spa Training

This document relates to a training establishment applying for accreditation to offer **CIDESCO International Spa Examinations**.

DATE OF APPLICATION: _____ (d/m/y)

SCHOOL CODE: _____

NAME OF SCHOOL: _____

ADDRESS OF SCHOOL: _____

TEL: _____ **FAX:** _____ **E-MAIL:** _____

WEBSITE ADDRESS: _____

NAME OF PERSON RESPONSIBLE FOR THE SPA COURSE:

Please enclose the following:

- Floor plan of School spa premises **or** spa where spa training is outsourced and used
- Name and address of spa if training is being conducted elsewhere
- List of spa equipment
- Photographs of spa equipment
- Timetable of 600 (or more) hours for Spa Therapy Diploma course
- List of spa textbooks
- Students' attendance details – daily register (example)
- Name of product lines (minimum of 2 brands)
- Exfoliation (minimum 3 types)
- Body wrap (minimum 3 types)
- Body treatment crème/lotion (minimum 2 types)



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	SPA PRACTICAL TRAINING EQUIPMENT		
Office use		Quantity	Remarks
	<p>COMPULSORY EQUIPMENT</p> <p>It is compulsory to have access to the following equipment (on a regular basis). It is compulsory to have sterilisation equipment where the spa training is organized. (Schools may outsource the practical training to a local Spa that has agreed to allow access to the equipment)</p>		
	Hydro Therapy Professional tub (one person only capacity) must not be a jacuzzi		
	Sterilisation equipment		
	3 Vaporizer (steam) with or without ozone.		
	1 Magnifying lamp per 2 stations		
	1 Mechanical Brush cleanse units		
	6 Couches (per 12 students)		
	6 Trolleys		
	6 Stools		
	<p>PREFERABLE EQUIPMENT</p> <p>It is compulsory to have at least one of the preferable equipment</p>		
	Vichy Showers		
	Oxygen baths		
	Wet tables		
	Steam bath		
	Sauna cabin		
	Steam cabinet		
	Showers		
	Swiss Shower		
	Scotch Hose		
	Any other equipment please list		



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DETAILS OF SPA TEACHERS AND THEIR QUALIFICATIONS – Listed in order of Seniority

Name of responsible Spa teacher _____
 Employed since _____
 Number of hours employed per week _____
 Subjects taught _____

 Qualifications _____
 CIDESCO Spa diploma (date & number) _____

Name _____
 Employed since _____
 Number of hours employed per week _____
 Subjects taught _____

 Qualifications _____
 CIDESCO Spa diploma (date & number) _____

Name _____
 Employed since _____
 Number of hours employed per week _____
 Subjects taught _____

 Qualifications _____
 CIDESCO Spa diploma (date & number) _____

TRAINING HOURS

Date Spa course commences: _____
 Number of hours per week: _____ Number of weeks duration: _____
 Total number of hours Training on Spa CIDESCO Course: _____

Please note:
Schools applying for Spa Therapy school status do not have to be accredited CIDESCO Beauty Therapy schools.
Training towards the first CIDESCO Spa examination cannot commence until CIDESCO has given written approval for training.

Signature of School Owner: _____

Date: _____ (day/mth/yr)

The CIDESCO Board may accept or reject an application. The Board decision is final and no further correspondence can be entered into.