Levon Holman
Presents
HOME HAIR CARE
2009

Featuring Influance Hair Care Products!
Hello,
I am Levon Holman and I want you to prepare your mind and heart for the Home Hair Care Mission. More and more we are seeing people styling and chemically servicing their hair as well as their friends and family members at home. This has led to some of the most unwanted damage to their hair and some times they do it so long it may damage the follicle. Myself and the other Licensed Cosmetologist working with me have made a commitment to help and help now!

Get ready to come and also tell a friend about our “Free” Hair & Scalp Consultations every Tuesday and Wednesday you will leave knowing:

- Your porosity level.
- Your elasticity & tensile strength.
- Your true texture.
- Your true density
- What Relaxer strength is proper for your head of hair
- And most of all you will leave with your personal “Hair Care Prescription”

Come by or call today (757) 498-1394 Ambiance Hair Studios 3972 Holland Road suite 121 & 122 Virginia Beach, VA. 23452
What is a Consultation and Analysis of the hair and scalp?

As a National Educator of Influa Hair Care, Inc., I have learned so much about healthy hair and true hair care and I have adopted their principles. At Influa Hair Care, Inc. they strive to provide the highest quality and most innovative products that promote healthy hair, assist in the comprehensive growth of the Cosmetologist and nurture the integrity and professionalism of the Hair Care Industry as a whole and so do I.

They are organizing this training to perform their teams’ technical step-by-step instructions is their way of making sure that they help us achieve the above mentioned goal and so do I.

Please give your self permission to allow our Home Hair Care team educate you with the basics, which is the true foundation to promote healthy hair and this attitude will guarantee your training session to be a successful one.

First order of training must begin with performing a thorough hair, scalp and health consultation. Keep in mind that every question asked will help us determine the best relaxer system (Shea Butter, Sensitive Scalp, or Crème) to choose from the Influa line that best works with your texture and density. It will also help us determine which one of our Shampoos (Deep Cleansing, Stimulating or Moisturizing) services or Proplex Reconstructor is needed instead. This consultation must include, but not limited to the following:

- Perform a Porosity and Elasticity Test on specified strands/areas of hair.
- Time of last relaxer service, professional or unprofessional application, what type (sodium hydroxide, calcium, etc.), strength and brand of relaxer. If they were professional do you know if they have a valid Cosmetology License; to find out visit www.dpor.virginia.gov
- Was the relaxer combed through to the ends and how long was the relaxer in the hair from beginning to rinsing out?
- Was a timer used with your relaxer service?
- Time of last color (bleaching, permanent, demi, semi and temporary), what type (powder, crème, shampoo, gel) and what brand?
- Time of last braiding service, how long were braids in and how often were they serviced?
- Scan hair for the length of split ends to determine if trim or cut is needed, also scan scalp for scabs, red bruises or bumps, cow-licks, bald spots or patches.
- Question Genetic Predisposition; their family’s history of hair loss (mom, dad, grandparents, etc.). Discuss (DHT) dihydrotestosterone which causes the hair follicle to deteriorate.
- Health and Medications: thyroid issues, cancer and it’s treatments, birth control, menopause, medications (blood pressure, thyroids, insulin, etc.) with side effects that can potentially cause hair loss.
- Stress and Trauma levels: increased levels of stress can produce increased levels of testosterone, which will convert to DHT and interrupt the hair growth cycle. If these levels of Stress and/or Trauma continue they can constrict the blood supply to the papilla (which is the blood vessel that supplies the hair follicle all of it’s oxygen and nutrients).
- Nutrition and Diet: Eating too much food with animal fats in them will reduce the amino acids and vitamin assimilation needed for hair growth and deficiencies in Biotin, Iron, Protein, and Zinc are damaging to healthy hair growth.
Environment: make your client aware that our scalps are continuously exposed to air pollutants, chlorine, metals, minerals and water pollution. Let them know that these pollutants can mix with the toxins from our body and play a major role in hair loss. Then let them know your plan to get them back on the right track.

Once you complete your consultation you will know what service is needed or not needed on your client. Then you choose your product of choice as well as the appropriate tools.

H **a**ir and S **c**alp C **ons**ultation F **orm**

All information will be used to customize your Hair Healing Program. Please select the appropriate boxes so that we can fill your Home Hair Care Prescription correctly.

Name __________________________________________________________________________
Address ________________________________________________________________________
City __________________________ State ________ Zip __________
Phone ______________________ Phone ______________________
Email _________________________________________________________________________
Age __________________________ Sex □ Male □ Female

Hair Maintenance
How often do you shampoo your hair? _________________________________________________________________________

Condition of Hair and Scalp
Is your hair dry, brittle, weak or breaking? □ Dry □ Brittle □ Weak □ Breaking
(Please check all that apply)
Are your ends splitting? □ Yes □ No
If Yes, how long is the split from your end to the connected hair shaft? _________ inches

Do you have a sensitive or irritated scalp? □ Sensitive □ Irritated

Do you have dandruff, eczema or psoriasis? □ Yes □ No
If Yes, how often does your scalp flake? ________________________________

Do you have an itchy scalp? □ Yes □ No
If Yes, are you allergic to anything?
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

How many different hair products are you using? ____________________________

How many different hair product lines are you using? __________________________
**Stress and Your Hair**

Do you have a stressful job? □ Yes □ No

Have you recently suffered any physical trauma? □ Yes □ No

If Yes, Please explain: ______________________________________________________

Have you suffered from a psychological trauma? □ Yes □ No

(Such as death of a loved one, depression, emotional despair, etc.)

If Yes, Please explain: ______________________________________________________

If you have suffered physical or psychological trauma, was it in the last 3 months? □ Yes □ No

If Yes, what are you doing to improve your life in that area?

□ Counseling □ Prayer □ Coaching □ Nothing

Has your stress caused any present medical problems? □ Yes □ No

Please check off your medical problems: □ Heart Problems ______________

□ Thyroid (Hypo/Hyper) □ High Blood Pressure □ Diabetes □ Cancer

□ Menopause □ Other: ______________________________________________________

Are you currently taking any medications or birth control? □ Yes □ No

If Yes, please list them:

____________________________________________________________________

____________________________________________________________________

Check the following that best explains your last hair service:

□ Relaxer □ Perm □ Texturizer □ Color □ Bleach □ Streaks/Highlights

□ Color Correction □ None/Natural

What was the date of your last hair service? __________________________________

Describe your hair texture: □ Fine □ Coarse □ Straight □ Curly/Wavy

Is your hair natural (natural means no chemicals including permanent color)? □ Yes □ No
Do you have locks? □ Yes □ No

Describe your hair length: □ Short (above ears) □ Medium (below ears/shoulder length)
□ Long (past shoulders) □ Extra Long (middle of back and below)

How often do you blow dry or use thermal heat on your hair? □ Everyday
□ Once a week □ Every other week □ Once a month □ Never

How much time do you spend in the sun? □ Not much □ Moderate □ A lot

If you swim in the ocean or pool, how often? □ Not much □ Moderate □ A lot

Do you smoke or are you around people that smoke? □ Yes □ No

If Yes, how often do you think the smoke is coating your hair?
□ Not much □ Moderate □ Often

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**Health and Lifestyle**

In your opinion, do you have a good or poor diet? □ Good □ Poor

Are you a person that dwells on what’s right or wrong? □ Right □ Wrong

How well do you deal with fear and phobias? □ Well □ Not too well □ Poorly

How well do you deal with anger (overt or passive)? □ Well □ Not too well □ Poorly

How well do you deal with un-forgiveness? □ Well □ Not too well □ Poorly
Please give any information you feel relevant to assist us in improving your hair and scalp care as well as your inner soul care below:
Home Hair Care Prescription

Featuring Influance Hair Care Products

**Shampoos**
- Scalp and Skin Antiseptic
- Deep Cleansing
- Moisturizing
- Stimulating
- Neutralizing

**Conditioners**
- Leave-In
- Moisturizing
- Hydrating
- Stimulating

**Styling Aids**
- Moisture Lock with Shea Butter
- Styling Foam
- Royal Silk Setting Lotion

**Finishing Aids**
- Hair & Scalp Conditioner
- Stimulating Scalp Oil
- Pressing Crème
- Curling Wax
- Natural Oil
- Rub on Shine
- Shine Spray
- Styling Spray
- Styling Spritz

Prescription Cost: $___________._____

Porosity:  □ Normal  □ Porous  □ Extra Porous

Hair Texture:  □ Fine  □ Medium  □ Coarse/Overly Curly

Hair Density:  □ Fine  □ Medium  □ Thick

Recommended In-Salon Care: ____________________________________________

Next Appointment:  Date ____/____/____  Time: _________

X _____________________________________________

Prescribed By
# Home Hair Care Journal

## Week 1

<table>
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<tr>
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**Notes**

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# Home Hair Care Journal

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**Notes**
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