**RPL TOOLKIT – INSTRUMENT 01 – PRE-SCREENING FORM**

*To be completed by the RPL Candidate with support from the SDP*

1. **Candidate Details**

|  |  |
| --- | --- |
| **Candidate Name** |  |
| **Candidate ID No.** |  |
| **Contact No.** |  |
| **Name of Employer** |  |
| **Current or Previous Job Title** |  |
| **Highest Qualification Achieved** |  |

1. **RPL Qualification Details**

|  |  |
| --- | --- |
| **Occupational Qualification Title** | National Occupational Certificate: Beauty Therapist |
| **SAQA ID** | 121607 |
| **Credits and NQF Level** | 158, L4 |
| **Exit Level Outcomes** | 1. Perform a manual skincare treatment in a professional and ethical manner in accordance with occupational standards. 2. Provide an eye grooming service in a professional and ethical manner in accordance with occupational standards. 3. Provide a make-up service (day or evening or bridal) in a professional and ethical manner in accordance with occupational standards. 4. Provide a make-up service (day or evening or bridal) in a professional and ethical manner in accordance with occupational standards. 5. Provide a temporary hair removal service in a professional and ethical manner in accordance with occupational standards. 6. Perform a body care treatment in a professional and ethical manner in accordance with occupational standards. 7. Perform a body massage in a professional and ethical manner in accordance with occupational standards. 8. Establish and manage a sustainable and compliant enterprise in the beauty and cosmetology industry. 9. Apply integumentary system and human anatomy as applicable to the specific area under treatment. 10. Apply cosmetic chemistry as applicable to beauty therapy treatment. |

1. **Work Experience**

|  |  |
| --- | --- |
| **Years of Relevant Work Experience:** |  |
| **Current Job Role:** |  |
| **Previous Roles (list with duration):** |  |
| **Key Tasks Performed:** |  |

1. **Evidence Checklist (Tick All That Apply and Attach Supporting Documents):**

|  |  |  |
| --- | --- | --- |
| **Evidence Type** | **Applicable** | **Attached** |
| **Certified Copies of Qualifications** | ☐ Yes ☐ No | ☐ Yes ☐ No |
| **Certificates of Short Courses** | ☐ Yes ☐ No | ☐ Yes ☐ No |
| **Confirmation of Work Experience** | ☐ Yes ☐ No | ☐ Yes ☐ No |
| **Reference Letters/Testimonials of Work Experience** | ☐ Yes ☐ No | ☐ Yes ☐ No |
| **Work Experience Samples (reports, projects, images)** | ☐ Yes ☐ No | ☐ Yes ☐ No |
| **Job Descriptions** | ☐ Yes ☐ No | ☐ Yes ☐ No |
| **Performance Appraisals** | ☐ Yes ☐ No | ☐ Yes ☐ No |
| **Portfolio of Evidence (POE)** | ☐ Yes ☐ No | ☐ Yes ☐ No |
| **Membership of Professional Bodies** | ☐ Yes ☐ No | ☐ Yes ☐ No |
| **Other relevant evidence (Specify)** | ☐ Yes ☐ No | ☐ Yes ☐ No |
|  | | |

**RPL Candidate Declaration**

I, the undersigned, declare that all information and evidence submitted for the purposes of Recognition of Prior Learning (RPL) are truthful, accurate and complete. I confirm that all evidence provided is my own and that no material has been falsified, misrepresented, or withheld. I understand that providing false or misleading information may result in disqualification from the RPL process.

**RPL Candidate Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SDP Pre-Screening Declaration**

I, the undersigned, confirm that I have reviewed the information and evidence submitted by the RPL Candidate for the purpose of pre-screening. Based on the documentation provided, the candidate appears to meet the minimum eligibility requirements for enrolment into the RPL Programme. This confirmation does not constitute an assessment decision and does not replace the requirement for full RPL assessment, evaluation or gap analysis. Should the candidate be deemed *not yet ready* to be assessed for RPL, the SDP will provide clear feedback on the learning programmes, development activities and opportunities required to improve readiness for RPL assessment. Post enrolment, the SDP will validate all information for completeness and authenticity.

**SDP Entity Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SDP Representative Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Designation:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_