**RPL TOOLKIT – INSTRUMENT 02 – ASSESSMENT MATRIX (MODULES)**

*To be completed by the accredited SDP*

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| **RPL Candidate Details** | | **SDP Details** | |
| **Candidate Name** |  | **SDP Entity Name** |  |
| **Candidate ID No.** |  | **SDP Representative Name** |  |
| **RPL Occupational Qualification Title** | National Occupational Certificate: Beauty Therapist | **SDP QCTO Accreditation No.** |  |
| **SAQA ID** | 121607 | **Assessor Name** |  |
| **Credits and NQF Level** | 158, L4 | **Assessor Registration No.** |  |

*The assessment matrix gives an outline of the various means of verification for every module across all three components of learning*

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| **Performance Criteria**  **All criteria must be aligned with the curriculum of the SAQA Registered Occupational Qualification** | **SAQA Credits** | **Means of Verification**  **tick √ if applicable, cross x if not** | | | | | **Met/Not Met** | **Gap**  **Credits** |
| **POE** | **Testimonial** | **Questioning/**  **Interview** | **Assessment Task** | **Workplace Observation** |
| **Knowledge Modules (insert/delete rows as per qualification):** | | | | | | | | |
| 514201-001-00-KM-01, Cosmetic Chemistry, Level 4, 5 Credits. |  |  |  |  |  |  |  |  |
| 514201-001-00-KM-02, Professionalism and Business Principles Level 4, 10 Credits. |  |  |  |  |  |  |  |  |
| 514201-001-00-KM-03, Setting up a Salon Business Plan, Level 4, 7 Credits. |  |  |  |  |  |  |  |  |
| 514201-001-00-KM-04, Integumentary System, Level 4, 5 Credits. |  |  |  |  |  |  |  |  |
| 514201-001-00-KM-05, Human Anatomy, Level 4, 5 Credits. |  |  |  |  |  |  |  |  |
| Total number of credits for Knowledge Modules: 32 | | | | | | | | |
| **Practical Skill Modules (insert/delete rows as per qualification):** | | | | | | | | |
| 514201-001-00-PM-01, Provide a Manual Skincare Treatment, Level 4, 20 Credits. |  |  |  |  |  |  |  |  |
| 514201-001-00-PM-02, Provide Eyelash and Eyebrow Tinting and Eyebrow Shaping Treatment, Level 4, |  |  |  |  |  |  |  |  |
| 4 Credits. |  |  |  |  |  |  |  |  |
| 514201-001-00-PM-03, Apply day, Evening and Bridal Make-Up, Level 4, 12, Credits. |  |  |  |  |  |  |  |  |
| 514201-001-00-PM-04, Provide a Manicure and Pedicure Service, Level 4, 12 Credits. |  |  |  |  |  |  |  |  |
| 514201-001-00-PM-05, Provide Temporary Hair Removal Services, Level, 4, 12 Credits. |  |  |  |  |  |  |  |  |
| 514201-001-00-PM-06, Provide a Manual Body Care Treatment, Level 4, 10 Credits. |  |  |  |  |  |  |  |  |
| 514201-001-00-PM-07, Perform a Body Massage, NQF Level 4, 24 Credits. |  |  |  |  |  |  |  |  |
| Total number of credits for Practical Skill Modules: 94 | | | | | | | | |
| **Work Experience Modules (insert/delete rows as per qualification):** | | | | | | | | |
| 514201-001-00-WM-01, Processes and Procedures for a Manual Skincare Routine, Level 4, 8 Credits. |  |  |  |  |  |  |  |  |
| 514201-001-00-WM-02, Processes and Procedures for a Manicure and Pedicure Treatment, Level 4, 3 Credits. |  |  |  |  |  |  |  |  |
| 514201-001-00-WM-03, Processes and Procedures for a Temporary Hair Removal Routine, Level 4, 4 Credits. |  |  |  |  |  |  |  |  |
| 514201-001-00-WM-04, Processes and Procedures for a Make-Up Application, Level 4, 3 Credits. |  |  |  |  |  |  |  |  |
| 514201-001-00-WM-05, Processes and Procedures for an Eyelash and Eyebrow Tint and Eyebrow Shaping Treatment, Level 4, 2 Credits. |  |  |  |  |  |  |  |  |
| 514201-001-00-WM-06, Processes and Procedures for a Body Massage, Level 4, 4 Credits. |  |  |  |  |  |  |  |  |
| 514201-001-00-WM-07, Processes and Procedures for a Body Treatment, Level 4, 8 Credits. |  |  |  |  |  |  |  |  |
| Total number of credits for Work Experience Modules: 32 | | | | | | | | |
| **TOTALS** |  |  | | | | |  |  |

**Assessor Declaration**

I, the undersigned RPL Assessor and registered Subject Matter Expert, confirm that the assessment matrix has been completed accurately and reflects my professional judgement of the candidate’s competence against the requirements of the registered Occupational Qualification. All decisions recorded are based on valid, authentic, current and sufficient evidence, supported by appropriate means of verification and documentary proof. I declare that the assessment was conducted fairly, transparently and in accordance with Services SETA and QCTO assessment requirements.

**Assessor/SME Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Services SETA Constituent Registration No.:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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