**RPL TOOLKIT – INSTRUMENT 03 – MAPPING MATRIX (EXIT LEVEL OUTCOMES)**

*To be completed by the SDP RPL Assessor*

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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.** |  |

*This matrix maps the modules to the assessment criteria for all SAQA registered occupational qualification exit level outcomes*

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| **Exit Level Outcomes Competency** | **Evidence Provided** | **Portfolio Reference** | **Assessor Comments** |
| 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. |  |  |  |

**Assessment Decision**

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| --- | --- |
| **Competent / Not Yet Competent** |  |
| **Recommendations for Gap Training** |  |
| **RPL Assessor/SME Name** |  |
| **Signature** |  |
| **Date** |  |

**Assessor Declaration**

I, the undersigned RPL Assessor and registered Subject Matter Expert, confirm that the mapping 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 mapping was conducted fairly, transparently and in accordance with Services SETA and QCTO assessment requirements.

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

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

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

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