

**021204T41ND**

**INTERIOR DESIGN LEVEL 5**

**CONS/OS/ID/CR/03/5**

**Perform Interior Design Finishing**

**July/August 2025**



**TVET CURRICULUM DEVELOPMENT, ASSESSMENT AND CERTIFICATION  
COUNCIL (TVET CDACC)**

**PRACTICAL ASSESSMENT**

**INSTRUCTIONS TO ASSESSOR**

1. Assess the candidate as the practical progresses observing the critical areas
2. You are required to mark the practical as the candidate perform the tasks
3. You are required to take video clips at critical points
4. Ensure the candidate has a name tag and registration code at the back and front

## OBSERVATION CHECKLIST

|                                                                                                                                                                                                              |                        |                       |                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-----------------------|-----------------|
| <b>Candidate's Name &amp; Registration Code</b>                                                                                                                                                              |                        |                       |                 |
| <b>Assessors Name &amp; Registration Code</b>                                                                                                                                                                |                        |                       |                 |
| <b>Venue of Assessment</b>                                                                                                                                                                                   |                        |                       |                 |
| <b>Date of Assessment</b>                                                                                                                                                                                    |                        |                       |                 |
| <b>Items to be Evaluated:</b> <i>Please award marks as appropriate. Give a brief comment on your observation.</i>                                                                                            | <b>Marks Available</b> | <b>Marks Obtained</b> | <b>Comments</b> |
| <b>TASK 1: CUT THE STENCILS PROVIDED</b>                                                                                                                                                                     |                        |                       |                 |
| <b>PREPARATION</b>                                                                                                                                                                                           |                        |                       |                 |
| <ul style="list-style-type: none"> <li>Prepared the work surface</li> <li>Assembled all the tools and paints</li> <li>Worn the right attire as per the PPE's<br/>(Award 2 marks each)</li> </ul>             | 2<br>2<br>2            |                       |                 |
| <b>APPLICA BASE COAT</b>                                                                                                                                                                                     |                        |                       |                 |
| <ul style="list-style-type: none"> <li>Sanded the board lightly</li> <li>Used correct application technique</li> <li>Applied the base coat evenly<br/>(Award 3 marks each)</li> </ul>                        | 3<br>3                 |                       |                 |
| <b>STENCIL CUTTING &amp; SETUP</b>                                                                                                                                                                           |                        |                       |                 |
| <ul style="list-style-type: none"> <li>Cut the stencil clean</li> <li>Cut the shapes correctly</li> <li>Aligned the size correctly</li> <li>Secured the stencil properly<br/>(Award 3 marks each)</li> </ul> | 3<br>3<br>3<br>3       |                       |                 |
| <b>Sub-Total 1</b>                                                                                                                                                                                           | <b>29</b>              |                       |                 |

**TASK 2: COMPLETE A WALL PAINTING(MURALS) USING THE STENCIL WITH THE FOLLOWING TECHNIQUES.**

**a. MASKING OFF WITH COLOR 1**

**b. BLOCKING-IN WITH COLOR 2**

**c. PAINT THE AREA AROUND THE STENCIL WITH COLOR 3**

**MASKING OFF TECHNIQUE WITH COLOR 1**

|                                                            |   |  |  |
|------------------------------------------------------------|---|--|--|
| • Applied tape neatly                                      | 3 |  |  |
| • Positioned tape correctly                                | 3 |  |  |
| • Applied paint within the taped area correctly            | 3 |  |  |
| • Removed the tape with no damages<br>(Award 3 marks each) | 3 |  |  |

**BLOCKING-IN TECHNIQUE WITH COLOR 2**

|                                                    |   |  |  |
|----------------------------------------------------|---|--|--|
| • Selected colors clearly                          | 3 |  |  |
| • Planned where each block of color beg and ends   |   |  |  |
| • Applied even and smooth stokes                   |   |  |  |
| • Matched brush scale with the area being filled   | 3 |  |  |
| • Applied paint consistently                       | 3 |  |  |
| • Neatly filled each shape<br>(Award 3 marks each) | 3 |  |  |

**PAINTING AROUND THE SHAPE WITH COLOR 3**

|                                                         |   |  |  |
|---------------------------------------------------------|---|--|--|
| • Applied background color evenly                       | 3 |  |  |
| • Filled the background fully with no visible base coat | 3 |  |  |
| • Neatly painted around the stencil paint               | 3 |  |  |
| • Controlled bleeding around the colors                 | 3 |  |  |
| • Controlled the brushes                                | 3 |  |  |
| • Visually distinct each color zoned                    | 3 |  |  |

|                                                                                                                                                                                                                                                                      |                  |              |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------|--|
| (Award 3 marks each)                                                                                                                                                                                                                                                 |                  |              |  |
| <b>Sub-Total 2</b>                                                                                                                                                                                                                                                   | <b>48</b>        |              |  |
| <b>PRODUCT CHECKLIST</b>                                                                                                                                                                                                                                             |                  |              |  |
| <ul style="list-style-type: none"> <li>Used three different colors</li> <li>Allocated one color for each zone</li> <li>Maintained clear and clean edges</li> <li>Cleaned the work area</li> </ul>                                                                    | 3<br>3<br>3<br>3 |              |  |
| <b>Sub-Total 3</b>                                                                                                                                                                                                                                                   | <b>12</b>        |              |  |
| <b>GRAND TOTAL</b>                                                                                                                                                                                                                                                   | <b>89</b>        |              |  |
| <b>ASSESSMENT OUTCOME</b>                                                                                                                                                                                                                                            |                  |              |  |
| <p>The candidate was found to be:</p> <p style="text-align: center;">Competent <input type="checkbox"/> Not yet Competent <input type="checkbox"/></p> <p>(Please tick as appropriate)</p> <p>(The candidate is competent if the candidate obtains at least 50%)</p> |                  |              |  |
| <b>Feedback from the Candidate:</b>                                                                                                                                                                                                                                  |                  |              |  |
| <b>Feedback to the Candidate:</b>                                                                                                                                                                                                                                    |                  |              |  |
| <b>Candidate Signature</b>                                                                                                                                                                                                                                           |                  | <b>Date:</b> |  |
| _____                                                                                                                                                                                                                                                                |                  | _____        |  |
| <b>Assessor's Signature</b>                                                                                                                                                                                                                                          |                  | <b>Date</b>  |  |
| _____                                                                                                                                                                                                                                                                |                  | _____        |  |

