

## Faculty of Law

### TESTIMONIAL AND CHARACTERISATION REQUEST UNDERGRADUATE PROGRAMMES

Surname and Initials:										
Student Number:									Campus:	
Qualification:										
Contact Number:										
Email Address:										
Year of Studies Completed:										
Year of Studies ( <i>if not yet completed</i> ):										

<b>Type of Application:</b>					
Characterisation			Testimonial		
<b>Language:</b>					
English			Afrikaans		
<b>Application for:</b>					
Advocate		Attorney		Bursary	
Candidate Attorney		Law School		Other (motivate)	

**Motivation for Application:**

Date of Application

Signature

**PLEASE NOTE: THE ISSUE OF THIS TESTIMONIAL/CHARACTERISATION CAN TAKE UP TO TWO (2) WEEKS TO BE PREPARED.**

Please email your completed application form to: [stephanie.kotze@nwu.ac.za](mailto:stephanie.kotze@nwu.ac.za)

#### FOR OFFICE USE

Academic Record (behaviour form)

Feedback Date