REFERENCE ONE

CONFIRMATION OF COMPETENCE AT FELLOW LEVEL

Please see the fellow criteria for details of referees required.

Name of applicant (block capitals please):

Name of referee (block capitals please):

Position:

Firm/name of chambers:

Address:

Postcode:

Telephone: 0 Fax: 0

Number of years you have known the applicant:

Supporting comments

Referees should comment on the applicant's personal skills in negotiation and representation, giving advice and leadership, paying particular attention to their commitment to sharing knowledge outside of the firm.

(Please continue overleaf as required)

Signed: **Date:**