

CONFIDENTIAL

International Municipal Lawyers Association Local Government Fellows Program

Phone: (202) 466-5424 E-Mail: info@imla.org

RECERTIFICATION REFERENCE FORM You MUST submit this form electronically.

Application of: _____

City of Practice:

The attorney named above has applied for recertification as an IMLA certified Local Government Fellow.

The IMLA Local Government Fellows Certification Committee solicits your cooperation in completing the statement of reference below in a thorough, forthright, and objective manner. The information will be treated confidentially by the Certification Committee and the applicant has specifically waived any right to review this statement of reference form. If you require additional space to list an item of information, please attach a

separate sheet. After completing the statement, please email document as a PDF with the applicants name in the subject line to info@imla.org.

1. Name:

2. Office or Firm:

3. Position (Please indicate if you are the Chief Legal Officer of a municipality or county):

4. Check or complete one or more of the following statements applicable to you:

- a) _____ I am a lawyer practicing in the same geographical area as the applicant.
- b) _____ I am a lawyer with whom or against whom the applicant has been involved with on local government matters.
- c) _____ I am a Judge before whom the applicant has appeared on matters the applicant was primarily responsible for and personally handled involving significant local government law issues.
- d) _____ I am a local elected official or city or county manager or administrator from the same geographical area as the applicant.

5. If you have applied for certification as a Local Government Fellow, have you submitted this applicant's name as a reference on your application?

Yes
No

] N/A

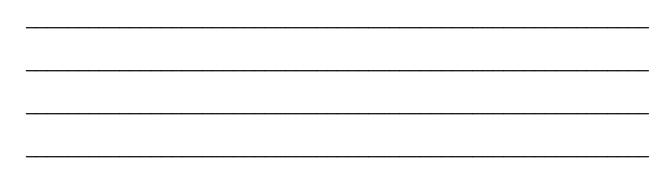
6. Are you related by blood or marriage to the applicant?

	Yes
	No
	If yes, explain:
7. I have	e been acquainted with the applicant since
8. The p	primary areas of my legal practice are:
9. If you	are in a position to do so, please estimate the percentage of the
applicar	nt's practice devoted to local government law %
had to f	e how well you know the applicant and what opportunity you have orm an opinion of the applicant's knowledge, skills, and proficiency ractice of local government law:

11. Please rate the applicant as to the criteria listed below in comparison with other local government attorneys whose practices you are familiar with by checking the appropriate space(s):

	Above Average	Average	Below Average	Poor	Unknown
a. Technical Knowledge					
 b. Ability to apply technical knowledge to factual problems 	e				
c. Consideration of client's interests					
d. Preparation and completion of matters taken on					
e. Ethical conduct in legal community					

12. Please provide additional explanations and comments where possible with respect to any category in which you have rated the applicant "below average" or "poor."



12. Do you consider the applicant by reason of training and ability to be a competent specialist in local government law?

Yes No
If no, explain:

13. Are you aware of anything which would impair the applicant's present ability to practice law, such as, addiction to narcotics, intoxicating liquors, emotional, mental, or nervous disorders?

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Yes

No

If yes, explain:

14. In your opinion are there any incidents in the applicant's law practice which reflect a lack of knowledge, skill, and proficiency in the practice of law?

Yes
No

No

If yes, please describe each incident:

15. Would you recommend this applicant for certification as an IMLA Local Government Fellow, thereby acknowledging their knowledge, skill, and proficiency in the field of local government law?

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Yes No

Additional comments:

I hereby certify that the information provided in the foregoing answers is, given my knowledge, correct, and where given from information received from others, has been obtained from sources which I believe to be reliable, and has not been secured from the applicant, the applicants family, or any other person submitting a reference on this applicant.

Signature

Date