**Association of Insolvency and Restructuring Advisors** **221 Stewart Ave., Suite 207**

**CIRA**

Certified Insolvency and  **Medford, OR 97501**

Restructuring Advisor **Phone 541.858.1665**

**Confidential Character and Experience Reference**

*Name of Applicant*

has submitted an application to the **Association of Insolvency and Restructuring Advisors** for the Certified Insolvency and Restructuring Advisor designation, and asks that you serve as a character and experience reference. Your answers should pertain to the applicant’s qualifications to satisfy the bankruptcy and reorganization experience requirement and to maintain professional and ethical standards. Please answer the following questions to the best of your knowledge and return this form to Michele Michael, Director of Membership Services, at the address shown above or by email to mmichael@aira.org or fax to 541.858.9187.

1. How long have you known the applicant?

2. In what capacity have you known the applicant?

3. Are you related to the applicant?

4. Is the applicant's character of good repute?  Yes  No; Comment:

5. Is there any reason to question the applicant’s integrity?  Yes  No; Comment:

6. Does the applicant's past conduct reflect favorably upon the applicant as a professional person?

Yes  No; Comment:

7. To receive CIRA, the applicant must have at least 4000 hours related to the areas of business turnaround, restructuring, and bankruptcy. Please comment on the nature and quality of the experience of the applicant.

*Please use the back of this page for additional comments.*

Your Name: *(print or type)*

Firm: Title:

Street Address:

City: State: Zip:

Phone: Fax:

Date: Signature ***Thank you.***