APPLICANT INFORMATION

Full Name:	
Title/Position:	
Firm/Organization Name:	
Business Address:	
Phone Number:	
Email Address:	
Years in Bankruptcy Practice:	
Bankruptcy Court Liaison Committee	
The Bankruptcy Court Liaison Committee was formed to promote communication about Court procedures, etiquette, filings and other issues, and to assist the Court attorneys in creating a more efficient environment. Additionally, the Committee develops and sponsors education programs concerning issues affecting the bendattorneys, financial institutions and consumers. The Committee also creates soc opportunities to allow greater interaction between the Court and those who apperbefore it. The Committee provides an opportunity to relay issues, concerns or ideas to the Committee –anonymously – through any of the Committee Members. The informative than the presented to the Bankruptcy Judges for their review and consideration	rt and ch, ial ar
AREAS OF BANKRUPTCY PRACTICE	
(✓ Check all that apply or fill in as appropriate)	
□ Debtor Representation – Chapter 7□ Debtor Representation – Chapter 11	
□ Debtor Representation – Chapter 13	
☐ Creditor Representation	
☐ Chapter 7 Trustee	
□ Chapter 11 Subchapter V	
☐ Consumer Bankruptcy	
☐ Business Reorganization	
□ Other:	

BRIEF STATEMENT OF INTEREST (Attach additional page if needed)

Please describe why you are interested in serving on the Bankruptcy Liaison Committee and what unique experience or perspective you would bring:		

ATTACHMENTS

(Please include with your application)

• Current Resume or CV

CERTIFICATION

I hereby certify that the information provided in this application is true and correct to the best of my knowledge. I understand the responsibilities associated with serving on the Bankruptcy Liaison Committee and commit to actively participating if selected.

Signature: ₋	
Date:	