

RECOMMENDATION OF PROFESSIONAL QUALIFICATIONS

The Lawyer Referral and Information Service of the San Diego County Bar Association is considering _____ for participation on its _____ panel. Your input is crucial in determining this applicant's qualifications. You must have firsthand knowledge of the applicant's qualifications in the area of law which the applicant is applying. Please fill out this form and return it to the applicant or the San Diego County Bar Association.

PLEASE PRINT YOUR NAME, ADDRESS & PHONE NUMBER BELOW:

Name: _____
(Last) (First) (Middle Initial)

Email: _____ Telephone: _____

Firm Name: _____

Office Address: _____

City: _____ State: _____ Zip Code: _____

State Bar Number: _____ Years in practice: _____

My specialty is _____
(must be in the same area of practice which the applicant is applying)

- I am a member of the judiciary.
- I am a current member of LRIS. On the following panels _____
- I am not a member of the LRIS.

1. Have you referred clients to this Applicant? Yes _____ No _____
 - a. If so, what types of matters have you referred and why did you refer the matter to this Applicant? _____

2. Have you retained this Applicant to perform legal services for you and/or a family member? Yes _____ No _____

a. If so, what services did Applicant perform for you and/or your family member (e.g., draft a trust and/or will, represent you in a family law matter [dissolution, child custody], etc.)? _____

b. Were you satisfied with Applicant’s services and would you retain Applicant again? Yes ____ No ____

3. If you have not retained Applicant to perform legal services in the past, would you retain Applicant yourself to perform legal services for you or a family member? Yes ____ No ____

a. What legal services would you retain Applicant to perform? _____

4. Please explain what legal services you have observed Applicant perform on behalf of and/or provide a client that enables you to provide meaningful opinion on the Applicant’s abilities: _____

5. I have reviewed this written work of the applicant that enables me to provide meaningful opinion on the Applicant's work product: : _____

I understand that I may be contacted to verify information or questions about the application by the LRIS Committee.

I hereby declare under penalty of perjury that the above is true and accurate:

Signed: _____

**Please return to:
San Diego County Bar Association- LRIS Program
401 West A Street, Suite 1100
San Diego, CA 92101**