

UNITED STATES TRUSTEE DISTRICT OF  
APPLICATION OF INDIVIDUAL  
FOR APPOINTMENT

- AS A CHAPTER 7 TRUSTEE
- AS A CHAPTER 11 TRUSTEE/EXAMINER
- AS A CHAPTER 12 STANDING TRUSTEE
- AS A CHAPTER 13 STANDING TRUSTEE

If more space is needed for any item, complete the response in the "REMARKS" section of this application, identifying the number referred to.

**1. GENERAL INFORMATION:**

**NAME:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Resident Address:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Phone:** ( ) \_\_\_\_\_

**Business Address:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Business Phone:** ( ) \_\_\_\_\_

**2. EDUCATION:**

Give the name and address of each college or university attended, dates of enrollment, field of concentration, and degree received. If you completed any courses in a business-related field, identify them.

School Dates of Field of Degree Year of Enrollment Concentration Degree

| School | Dates of Enrollment | Field of Concentration | Degree |  |
|--------|---------------------|------------------------|--------|--|
|        |                     |                        |        |  |
|        |                     |                        |        |  |
|        |                     |                        |        |  |
|        |                     |                        |        |  |

3. HAVE YOU EVER BEEN ARRESTED, TAKEN INTO CUSTODY, HELD FOR INVESTIGATION OR QUESTION, OR CHARGED BY ANY LAW ENFORCEMENT AUTHORITY? (you may omit: (1) traffic violations for which you paid a fine of \$100 or less; and (2) anything that happened before your 16th birthday. All other incidents must be included, even though they were dismissed or you merely forfeited collateral.) If your answer is "YES", give full details in the "REMARKS" section.

Yes ( ) No ( )

4. HAVE YOU EVER FILED A BANKRUPTCY PETITION ON YOUR OWN BEHALF OR FOR ANY BUSINESS ENTITY UNDER YOUR CONTROL? If the answer is "YES", give full details in the "REMARKS" section.

Yes ( ) No ( )

5. PROFESSIONAL AND OCCUPATIONAL BACKGROUND.

(a) List all professional or occupational licenses which you have ever held. If license is still current, so indicate by checking "C".

LICENSE ISSUING AUTHORITY DATE C

|       |       |       |       |
|-------|-------|-------|-------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

(b) If any such license has ever been revoked or suspended, or if your conduct has been the subject of other discipline or complaint to the licensing authority or its disciplinary body, state fully in the "REMARKS" section the facts and circumstances and the disposition.

6. (a) IF YOU ARE AN ATTORNEY, ARE YOU A MEMBER IN GOOD STANDING OF THE BAR OF THE STATE IN WHICH YOU ARE MAKING APPLICATION TO SERVE? If "YES", specify the date you were admitted to the bar. Please note that bar membership is not a requirement for appointment as trustee.

Yes ( ) No ( ) DATE: \_\_\_\_\_

(b) Has your license or right to practice before or in any court tribunal, or agency been denied, revoked or suspended? If "YES", give full details in the "REMARKS" section.

Yes ( ) No ( )

7. (a) Are you now or have you ever been appointed to serve as a trustee or examiner in a case under title 11 of the United States Code? If the answer is "YES", give full details in the "REMARKS" section.

Yes ( ) No ( )

(b) Have ever been removed as a trustee or examiner by the court? If the answer is "YES", give full details in the "REMARKS" section.

Yes ( ) No ( )

8. Has a tax lien or other collection procedure ever been instituted against you personally or a business entity under your control? If the answer is "YES", give full details in the "REMARKS" section.

Yes ( ) No ( )

9. PRESENT PROFESSIONAL PRACTICE OR OCCUPATIONAL STATUS.

Describe your current title, position, duties or type of practice or occupation, inception date, and list names and current phone numbers of partners, associates, or persons with whom you work or share offices.

Practice/Occupation: \_\_\_\_\_  
\_\_\_\_\_

Partners/Association/etc.: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**10. WORK EXPERIENCE OR SKILLS.**

If your present or previous experience included work in the field of bankruptcy law, please so indicate and describe fully, also indicate previous work experience using skills of a nature which you believe are required of a trustee.

Description: \_\_\_\_\_  
\_\_\_\_\_

**11. (a) ARE YOU RELATED BY AFFINITY OR CONSANGUINITY WITHIN THE DEGREE OF FIRST COUSIN TO ANY JUDICIAL OFFICER OR EMPLOYEE OF ANY FEDERAL COURT SERVING THE DISTRICT IN WHICH YOU ARE MAKING APPLICATION, OR TO ANY OFFICIAL OR EMPLOYEE OF THE DEPARTMENT OF JUSTICE? If answer is "YES", give full details in the "REMARKS" section.**

Yes ( ) No ( )

**(b) ARE YOU OR ANY MEMBER, ASSOCIATE OR PROFESSIONAL EMPLOYEE OF YOUR FIRM, PARTNERSHIP OR CORPORATION RELATED TO ANY DISTRICT COURT JUDGE, BANKRUPTCY COURT JUDGE, UNITED STATES TRUSTEE OR ASSISTANT UNITED STATES TRUSTEE SERVING IN THE REGION OR JUDICIAL DISTRICT IN WHICH YOU ARE MAKING APPLICATION? If the answer is "YES", give full details in the "REMARKS" section.**

Yes ( ) No ( )

**12. REFERENCES: List three persons who are not related to you and who have definite knowledge of your qualifications or fitness for the position for which you are applying.**

**NAME ADDRESS PHONE OCCUPATION**

| NAME  | ADDRESS | PHONE | OCCUPATION |
|-------|---------|-------|------------|
| _____ | _____   | _____ | _____      |
| _____ | _____   | _____ | _____      |
| _____ | _____   | _____ | _____      |
| _____ | _____   | _____ | _____      |
| _____ | _____   | _____ | _____      |
| _____ | _____   | _____ | _____      |

**CHAPTER 7 PANEL TRUSTEES**

**AND**

**CHAPTER 12 AND 13 STANDING TRUSTEES**

**1) ARE THERE ANY LIMITATIONS ON YOUR WILLINGNESS OR ABILITY TO SERVE AS A CHAPTER 7, 12 OR 13 TRUSTEE (such as type and number of cases, travel, time availability, conflicts)?**

If "YES", please describe fully in the "REMARKS" section.

Yes ( ) No ( )

2) LOCATION(S) AT WHICH YOU WOULD BE WILLING TO SERVE AS A TRUSTEE:

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

3) DO YOU PLAN TO DEVOTE FULL TIME TO ACTING AS A TRUSTEE? If the answer is no, please describe other activities in which you plan to engage.

Yes ( ) No ( )

REMARKS

ITEM NUMBER COMMENT(S)

CERTIFICATION

I hereby certify, under penalty of perjury, that I have not solicited or accepted, and that I will not solicit or accept any gratuity, gift, or other remuneration of thing of value from any person, if such is intended or offered to influence any of my actions as a trustee/examiner, or as an employee of trustee/examiner, in any bankruptcy case.

\_\_\_\_\_

TRUSTEE

\_\_\_\_\_

EMPLOYEE

Title or Position: \_\_\_\_\_

\_\_\_\_\_

EMPLOYEE

Title or Position: \_\_\_\_\_

\_\_\_\_\_

EMPLOYEE

Title or Position: \_\_\_\_\_

This certification is to be signed by the chapter 7, 11, 12 or 13 trustee/examiner and all the employees in the office of the trustee/examiner.