

**QUESTIONNAIRE FOR REFERENCES FOR APPLICANT TO THE  
AMERICAN ACADEMY OF ADOPTION ATTORNEYS AND/OR AMERICAN  
ACADEMY OF ASSISTED REPRODUCTIVE TECHNOLOGY ATTORNEYS**

Please reply to Membership Chair (applicant should indicate with a checkmark the appropriate chair to receive the response):

Adoption Membership Chair  
Greg Franklin  
[gfranklin@afylaw.com](mailto:gfranklin@afylaw.com)  
585-442-0540

ART Membership Chair  
Meryl Rosenberg  
[membership@aaarta.org](mailto:membership@aaarta.org)  
301-217-0074

You are being asked to provide a reference for \_\_\_\_\_, who is seeking membership in the American Academy of Adoption Attorneys and/or the American Academy of Assisted Reproductive Technology Attorneys (collectively referred to as the “Academy”). Ms./Mr. \_\_\_\_\_ is providing you this form seeking information from you as to his/her suitability and qualifications for membership in the Academy.

Membership in the Academy is by invitation only. Prior to extending an invitation to a prospective member, it is our policy to conduct a thorough background investigation. We would therefore appreciate your help by completing this questionnaire in order to assist in our evaluation of this Applicant.

Please know that any information you provide will be strictly confidential and will not be shared with any person, including the Applicant, other than committee members performing the investigation and the Board of Trustees making the decision.

1. Have you ever heard of the above named applicant? \_\_\_\_\_
2. How long have you known the applicant? \_\_\_\_\_
3. Please describe the nature of the relationship and/or association with the applicant.

4. Have you had any adoption and/or assisted reproductive technology (“ART”) cases together with the applicant? \_\_\_\_\_ If so, approximately how many? \_\_\_\_\_
5. What was your experience with or impression of the applicant, including what you observed of the applicant’s work with adoptions and/or ART and what it was like to work with the applicant on a personal level?

6. What other knowledge do you have about the applicant’s work in the field of adoption and/or ART, including the applicant’s reputation in the legal community (or elsewhere) for honesty, integrity and professional competence?

7. Describe the applicant’s legal abilities, civility, collegiality, and effectiveness.

8. Do you believe the applicant would make positive contributions to the Academy?  
\_\_\_\_\_ Please explain.

9. To your knowledge, are there other attorneys, agencies, programs or clinics with whom the applicant has closely worked? \_\_\_\_\_  
If yes, please list the name and contact information.

10. To the best of your knowledge, has the applicant ever been professionally disciplined, disbarred, sued for malpractice in an adoption, ART or other civil matter? \_\_\_\_\_  
If yes, please give specifics.

11. To the best of your knowledge, has the applicant ever been convicted of a crime involving moral turpitude? \_\_\_\_\_  
If yes, please give specifics.

Thank you for assisting us in our membership application process. Please complete the information requested below and sign the form. Should you care to discuss any further matters pertaining to this applicant with us, please call the designated Membership Committee Chair checked at the top of this form.

Reference Name: \_\_\_\_\_

Firm/Company/Business Name: \_\_\_\_\_

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

Phone (please include a number where it would be convenient for a member of our committee to call should we desire elaboration or clarification: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date