



**CERTIFICATION OF QUALIFYING GOVERNMENT EMPLOYMENT UNDER  
LOCAL BANKRUPTCY RULE 2090-1(E)(4)(a)**

Full Printed Name (First, Middle, Last): \_\_\_\_\_

Qualifying Government Employment (please check the applicable box):

- Federal government attorney appearing pursuant to the authority of the United States Attorney's Office for the Eastern District of Virginia
- Federal government attorney appearing pursuant to the authority of the United States Trustee for Region 4
- Other federal government attorney representing the United States government, or any agency or employee thereof

Office Address: \_\_\_\_\_

Office Telephone No.: \_\_\_\_\_ Office Email Address: \_\_\_\_\_

State(s) of License and Bar Number(s): \_\_\_\_\_

Principal Division of Practice:  Alexandria     Richmond     Norfolk/Newport News

I certify that I am currently employed as stated above and may appear in this Court in performance of my official duties as provided under Local Bankruptcy Rule 2090-1(E)(4)(a)(i), (ii) or (iii).

I further certify that I am a member in good standing of the Bar of my state(s) and have paid all necessary license fees.

*[If applicable]* I understand that my ability to practice in this Court in performance of my official duties as a Federal government attorney appearing pursuant to the authority of the United States Trustee for Region 4 excludes the filing of a notice of appeal or litigation of an appeal from a judgment, order or decree from this Court unless I am authorized to practice law in the court to which the appeal is taken.

*[If applicable]* I understand that my ability to practice in this Court in performance of my official duties as an other federal government attorney representing the United States government, or any agency or employee thereof requires me to secure local counsel by either working with an Assistant United States Attorney assigned to the Eastern District of Virginia or local counsel who is a member in good standing of the Bar of this Court, who shall accompany me in appearances before the Court and also sign all pleadings and other filings.

I hereby swear (or affirm) under the penalty of perjury that the foregoing is true and correct. I understand that falsification of this certification may result in sanctions, including suspension of my privilege to practice before the United States Bankruptcy Court for the Eastern District of Virginia.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_