



INSTITUTE OF REAL ESTATE MANAGEMENT

IREM® Headquarters

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PROFESSIONAL REFERENCES FOR ACoM CERTIFICATION

To become a ACoM, you must submit three Professional References. It is highly recommended that you obtain your reference letters today so that you can get this requirement completed and it will not delay your approval as a ACoM at a later date.

The reference letter form is attached. Two of the recommendation letters must be from, in any combination: CPM® Members, ARM® Members, ACoM Members, current/former clients, or current/former employers. The remaining one should be from someone who can attest to your integrity and business reputation.

Complete the top part on each Professional Reference. The letters should be enclosed in a sealed and signed envelope when completed by your references and returned to you – as a courtesy, you might want to stamp the envelopes. Submit the returned, sealed envelopes to Membership Admissions at IREM® Headquarters.

Note: *References cannot be dated more than 12 months prior to receipt at IREM® Headquarters*

**To the individual completing this
Professional Reference:**

Thank you for agreeing to provide a reference for the person whose name appears on the front of this form. This individual has applied to become an ACCREDITED COMMERCIAL MANAGER (ACoM) Member of the Institute of Real Estate Management.

Please answer the questions in as specific and candid a manner as possible. When the form is complete:

- Place the recommendation in the envelope addressed to the applicant.
- Sign your name across the seal.
- Return the sealed envelope to the applicant. Your signature across the seal of the envelope ensures that the letter will be kept confidential.

You can be assured that the applicant will not have access to this form unless your permission is granted or unless the Institute is compelled to provide the letter by subpoena or court order. Completing this reference form is a qualified privilege which attaches and absolves you and the Institute of liability, provided your communication is made in good faith and is limited to the issue at hand.

Reference's Signature

Professional Reference

ACoM Application • Institute of Real Estate Management

Applicant's Name		Daytime Telephone Number ()
Address		
To the individual completing this form: Please read the information on the reverse side first.		
Name of Person Completing This Form	Daytime Telephone Number ()	
Firm/Organization	Position/Job Title	
Address		
City/State/Zip		
I am: (check all that apply)		
<input type="checkbox"/> A CPM®	<input type="checkbox"/> A current or former client of the applicant <i>(Or someone hired to provide a service, i.e. a vendor)</i>	
<input type="checkbox"/> An ARM®	<input type="checkbox"/> A current or former employer of the applicant	
<input type="checkbox"/> An ACoM	<input type="checkbox"/> Other (please specify) _____	
How long have you known the applicant?		
Under what circumstances have you known the applicant?		
How would you describe the applicant's moral character and integrity, sincerity of commitment to real estate management as a profession?		
If you are a current or former employer, how do you rate the applicant's ability as a real estate manager?		
Additional comments:		
I <input type="checkbox"/> can <input type="checkbox"/> cannot recommend this applicant for the ACoM certification.		
Signature	Date	