



INSTRUCTIONS:

- 1. This form is required pursuant to section 18(2)(e), 29(2)(c), 105 and 289(3)(a) and (b) of the Financial Institutions Act, and section 11(3)(e) and 108(2)(a) and (b) of the Credit Union Incorporation Act.
2. This form must be typewritten or printed.
3. All applicable information must be provided. Attach additional typed/printed sheets as necessary.
4. Upon completion, please forward this form together with all attachments to the Financial Institutions Commission, Suite 1200, 13450 - 102nd Avenue, Surrey, British Columbia, V3T 5X3.
5. All material requested must be submitted at the same time.

Freedom of Information and Protection of Privacy Act
The Information requested on this form is collected under the authority of and used for the purpose of administering the Financial Institutions Act and Credit Union Incorporation Act. If you have any questions about the collection or use of this information, contact the Freedom Of Information Coordinator, 604-953-5300, Suite 1200, 13450 - 102nd Avenue, Surrey, BC V3T 5X3

A. GENERAL INFORMATION

1. Personal Information for a: (Check all Applicable)

- Director Senior Officer Subscriber Shareholder controlling 10% or more of the voting shares

2. Name of Financial Institution:

3. Full Legal Name: Surname Full Given Names

4. All Previous Names: Surname Full Given Names

5. Residential Address (include postal code):

Area Code YY/MM/DD

6. Telephone Number: () 7. Date of Birth:

8. Place of Birth: City Country 9. Citizenship: YY/MM/DD

10. If you were born outside of Canada, indicate date of your arrival in Canada:

11. Driver's Licence No: Issued by: (Prov./Territory):

B. EMPLOYMENT

1. Present Position or Occupation:

2. Start Date of Present Employment: YY/MM/DD

3. (i) Name of Present Employer:

(ii) Address: (include postal code)

(iii) Telephone Number: Area Code ()

C. OTHER INFORMATION:

1. List memberships in professional societies or associations (if none, please indicate):

2. List any Directorates held (if none, please indicate): _____

3. List any companies in which you own or control more than 10% of the voting shares (if none, please indicate): _____

4. Have you at any time resided in a country outside of Canada?

YES NO

If yes, indicate the dates and locations (country, and if applicable, state, province or territory) of those periods of residency:

5. Have you ever been convicted of, or currently charged with an offence, under the Criminal Code of Canada, provincial/territorial legislation or any jurisdiction outside of Canada? (This includes impaired driving but not minor traffic offences.)

YES NO

If yes, please provide details of the conviction:

YY/MM/DD

(i) Date of conviction: _____

(ii) Type of conviction: _____

6. Has a civil judgement been made or disciplinary action taken against you, by professional organizations or self-regulatory bodies?

YES NO

If yes, please provide details of the judgement or action:

YY/MM/DD

(i) Date of judgement or action: _____

(ii) Type of judgement or action: _____

7. Under the law of any province, territory, state or country have you ever been petitioned into bankruptcy or made a voluntary assignment in bankruptcy?

YES NO

If yes, please provide details of bankruptcy:

YY/MM/DD

(i) Date of Assignment or Receiving Order: _____

YY/MM/DD

(ii) Date of Absolute Discharge: _____

YY/MM/DD

(iii) If conditional discharge, date of conditional discharge: _____

and description of conditions: _____

(iv) Cause of bankruptcy: _____

CERTIFICATION

I, the undersigned, hereby certify that the foregoing statements are true, correct and complete to the best of my knowledge, information and belief, and hereby undertake to notify the Financial Institutions Commission immediately in writing of any material change therein.

I consent to the Financial Institutions Commission making such enquiries as it sees fit of government institutions, credit bureaus or others for the purpose of investigating my suitability to be a person in a position to control or influence a financial institution, including, but not limited to, a criminal records search with the Royal Canadian Mounted Police or other law enforcement bodies.

I acknowledge and agree that the information contained in this return and attachments will be used for the purposes described above. I understand that it is an offence under the *Financial Institutions Act* and the *Credit Union Incorporations Act* to make a false statement and that it may also be an offence under the CRIMINAL CODE of Canada.

I understand that the Financial Institutions Commission may also request additional information from me.

I am aware that I have duties and obligations under the *Company Act*, *Business Corporations Act*, *Financial Institutions Act* and *Credit Union Incorporation Act* and that is my responsibility to fully understand these duties and obligations.

SIGNATURE	TITLE	DATE SIGNED		
		YYYY	MM	DD