

S-42.2 REG 1

SECURITIES

FORM 4
(sections 41 and 59 of *The Securities Regulations*)
The Securities Act, 1988

Uniform Application for Registration Approval

Form 1-U-85
Canadian Securities and
Commodity Futures Legislation

Uniform Application for
Registration/Approval

General Instructions

1. This form is to be used by every individual seeking registration or approval from a Canadian Securities Commission or similar authority and/or a self-regulatory organization, or submitting an application for registration or approval as a partner, director or officer of a dealer, broker or adviser to a Canadian Securities Commission or similar authority.
2. This form may also be used by any individual submitting an application for registration as a dealer, broker or adviser to a Canadian Securities Commission or similar authority.
3. All applicable questions must be answered. Failure to do so may cause delays in the processing of the application form.
4. This form and all attachments added thereto **must be** typewritten. Any form or attachment completed by any other means may be considered not properly filed.
5. All attachments pertaining to any question must be made exhibits to the form and each one must be so marked. **All signatures must be originals.** The Commissioner of Oaths before whom the application is sworn, as well as the applicant, is required to initial all attachments.
6. In completing the application, applicants should seek advise from an authorized officer of the sponsoring firm or from a legal adviser, if necessary.
7. Number of originally-signed copies of the form to be filed with the self-regulatory organization and/or Securities Commission or similar authority varies from province to province. If unsure of the procedure, please consult the Registration Department of the self-regulatory organization through which you are applying or the applicable Securities Commission, or similar authority.
8. Applicants for registration in Quebec need only disclose information for the past 10 years in respect of Questions 15 B), 15 D), 17 A), 17 B), 18 and 19.

FOR INTERNAL USE ONLY

Confirmation of Question 7	Other Confirmation
Application approved by	Date

1. APPLICANT:

Last Name	First, Second & Third Names
Residential address (with postal code)	Area Code: Telephone:
Address for service in province of registration (with postal code)	Social Insurance Number (not required for applications in Ontario)
Present Position in the Firm	Commenced Employment On Day Month Year

2. FIRM:

Name	Area Code: Telephone:
Address where applicant will be working (street, city, province, postal code)	

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3. TYPE OF REGISTRATION OR APPROVAL REQUESTED:

INSTRUCTION: Check **ALL** applicable boxes to indicate the registration or approval requested. The "Types of Registration or Approval Requested" have the meaning attributed to them in the applicable securities act, commodity futures act, or regulation and in by-laws, rules and regulations of exchanges, the Investment Dealers Association of Canada and other self-regulatory organizations. Applicants filing for restricted registration should file under OTHER, specifying the nature of the restricted registration applied for.

REGISTERED REPRESENTATIVE OR SALESPERSON REGISTRATION:		OTHERS:	
<input type="checkbox"/> Securities		<input type="checkbox"/> Partner	
<input type="checkbox"/> Commodity Futures		<input type="checkbox"/> Director	
<input type="checkbox"/> Commodity Futures Options		<input type="checkbox"/> Officer (title) _____	
<input type="checkbox"/> Options		– Trading	<input type="checkbox"/>
<input type="checkbox"/> Mutual Funds		– Non-Trading	<input type="checkbox"/>
<input type="checkbox"/> Floor Trader – Securities	<input type="checkbox"/>	– Counselling	<input type="checkbox"/>
<input type="checkbox"/> – Commodity Futures	<input type="checkbox"/>	<input type="checkbox"/> Branch Manager	
<input type="checkbox"/> Individual Member		<input type="checkbox"/> Director, Investor, or Officer of approved affiliated company (delete designation not applicable)	
<input type="checkbox"/> Scholarship Plans		<input type="checkbox"/> Industry Investor	
<input type="checkbox"/> Other (specify)		<input type="checkbox"/> Non-Industry Investor	
		<input type="checkbox"/> Portfolio Manager	
		<input type="checkbox"/> Designated/Alternate Registered Options Principal	
		<input type="checkbox"/> Designated/Alternate Registered Futures Principal	
		<input type="checkbox"/> Designated/Alternate Registered Futures Option Principal	
		<input type="checkbox"/> Other (specify) _____	

4. APPLYING FOR REGISTRATION/APPROVAL FROM THE FOLLOWING:

INSTRUCTION: Check all appropriate boxes to indicate the Canadian Securities Commissions or similar authority and/or self-regulatory organizations with which the applicant is seeking registration or approval.

SECURITIES COMMISSION OR SIMILAR AUTHORITIES			
<input type="checkbox"/> Alberta	<input type="checkbox"/> New Brunswick	<input type="checkbox"/> Nova Scotia	<input type="checkbox"/> Quebec
<input type="checkbox"/> British Columbia	<input type="checkbox"/> Newfoundland	<input type="checkbox"/> Ontario	<input type="checkbox"/> Saskatchewan
<input type="checkbox"/> Manitoba	<input type="checkbox"/> Northwest Territories	<input type="checkbox"/> Prince Edward Island	<input type="checkbox"/> Yukon Territory
SELF-REGULATORY ORGANIZATIONS			
<input type="checkbox"/> Alberta Stock Exchange	<input type="checkbox"/> Toronto Stock Exchange		
<input type="checkbox"/> Investment Dealers Association of Canada	<input type="checkbox"/> Vancouver Stock Exchange		
<input type="checkbox"/> Montreal Exchange	<input type="checkbox"/> Winnipeg Commodity Exchange		
<input type="checkbox"/> Toronto Futures Exchange	<input type="checkbox"/> Winnipeg Stock Exchange		
	<input type="checkbox"/> Other (specify)		

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5. PERSONAL DESCRIPTION OF APPLICANT:

(A)

DATE OF BIRTH Day Month Year		PLACE OF BIRTH City		Province	Country	SEX
Height	Weight	Colour of eyes	Colour of hair	Name of spouse & nature of his/her employment		
Citizenship			If NOT a Canadian citizen, answer question 5(B) below.			

(B)

Are you a permanent resident?	Number of years of continuous residence in Canada	Passport			
		Country	Place of issue	Date of issue	Number

6. PHOTOGRAPH:

INSTRUCTION: Attach hereto two copies of a black and white photograph, full face, showing a true likeness of the applicant as the applicant now appears and **taken within the last 6 months**; they must measure 2" x 2", be of passport quality and bear on the back the date on which the photographs were taken, **the signature of the applicant and that of the Commissioner of Oaths or that of an officer, director, partner or branch manager of the sponsoring firm.**

7. EDUCATION

(A)

INSTRUCTION: State the last school attended in each level	Degree or Diploma	Date Obtained
High School or Secondary Level		
Post-Secondary, College CEGEP or University		
Professional Education		
Other		

Have you successfully completed:

	Yes	No	Exempt*	Date Completed
Canadian Securities Course Examination based on Manual for Registered Representatives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Partners/Directors/Officers Qualifying Examination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Canadian Investment Finance (course 2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Part I	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Part II	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
F.C.S.I.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Chartered Financial Analyst Course	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Qualifying Examination for Registered Options Principal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Canadian Options Course	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Canadian Investment Funds Course	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
National Commodity Futures Examination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Canadian Commodity Futures Examination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Canadian Futures Examination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Commodity Supervisors' Examination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Branch Managers' Examination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other (specify) _____				_____

*If you have been granted exemption, attach full particulars.

10. REFERENCES:

Give three names as references, excluding relatives and persons associated with the sponsoring firm. References must include a bank or trust company at which you have an account (give account number)

Name	Firm Name	Business Address (with postal code) & Telephone (with area code)	Occupation

Account No. at reference bank or trust co.: _____

Note: Account No. need not be given if this form is accompanied by a reference from a bank or trust co. with which the applicant has an account.

ANSWER "YES" OR "NO" TO EACH OF QUESTIONS 11 TO 20 INCLUSIVE.
IF THE ANSWER TO ANY OF THE FOLLOWING QUESTIONS IS "YES"
COMPLETE DETAILS **MUST BE** ATTACHED BY WAY OF EXHIBIT.

11. CHANGE OF NAME:

INSTRUCTION: Name changes resulting from marriage, divorce, court order or any other process should be listed here giving appropriate dates.

Have you **ever** had, used, operated under, or carried on business under any name other than the name mentioned in Question 1 of this form, or have you ever been known under any other name?

12. PRIOR REGISTRATION OR LICENSING:

A) Are you now or have you **ever** been registered or licensed, or applied for registration or a licence in any capacity under any act or regulation thereof, regulating trading in securities, commodities or commodity futures contracts of any province, territory, state or country?

List all authorities with whom you were registered and the dates of registration. State whether the registration is currently in effect.

B) Are you now, or have you **ever** been a partner, shareholder, director or officer of any company or of a partnership which has been registered or licensed, or is now registered or licensed (except as an issuer if you are or have been solely a shareholder) in any capacity under any act or regulation thereof, regulating trading in securities, commodities or commodity futures contracts of any province, territory, state or country?

C) Are you now or have you **ever** been registered or licensed, or applied for registration or a licence under any legislation which requires registration or licensing to deal with the public, in any capacity **other than trading in securities, commodities or commodity futures contracts** in any province, territory, state or country?

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QUESTIONS 13 TO 18 INSTRUCTION: In answering Questions 13 to 18, and particularly Question 15, you may need assistance from an authorized officer of the sponsoring firm or from a legal adviser. Full details are required as attachments in respect of any question to which the applicant answers "yes". These details must include the circumstances, the relevant dates, the names of the parties involved and the final determination if known.

13. REFUSAL, SUSPENSION, CANCELLATION OR DISCIPLINARY MEASURE

- A) Have you **ever** been refused registration or a licence, or has your registration or licence been suspended or cancelled, under any act or regulation thereof, regulating trading in securities, commodities or commodity futures contracts of any province, territory, state or country? _____
- B) Are you now or have you **ever** been a partner, shareholder, director or officer of a company or of a partnership which has, during the time of your association with it, been refused registration (except a registration as an issuer if you are or have been solely a shareholder) or a licence, or whose registration has been suspended or cancelled under any act, or regulation thereof, regulating trading in securities, commodities or commodity futures contracts of any province, territory, state or country? _____
- C) Have you **ever** been refused registration or a licence, or has your registration or licence been suspended or cancelled, under any legislation which requires registration or licensing to deal with the public any capacity **other than trading in securities, commodities or commodity futures contracts**, in any province, territory, state or country? _____
- D) Have you been denied the benefit of any exemption from registration or licensing provided by any act or regulation thereof regulating trading in securities, commodities or any commodity futures contracts of any province, territory, state or country? _____
- E) Has any prior or current registration or licensing to deal or trade in securities, commodities or commodity futures contracts held by you or any partnership or company which you were at the time of such event a partner, officer or director or holder of voting securities carrying more than 5 percent of the votes carried by all outstanding voting securities **ever** been the subject of disciplinary action undertaken by an authority regulating or supervising trading in securities, commodities, or commodity futures contracts? _____

14. SELF-REGULATORY ORGANIZATIONS:

Have you or has any partnership or company of which you are or were at the time of such event a partner, director, officer or holder of voting securities carrying more than 5% of the votes carried by all outstanding voting securities:

- A) **Ever** been a member of any stock exchange, commodities exchange, commodity futures exchange, association of investment bankers, brokers, broker-dealers, mutual fund dealers, commodity futures dealers, investment counsel, other professional association or any similar organization in any province, territory, state or country? _____
- B) **Ever** been refused registration or licensing or approval for membership or approval in any other capacity by/in any of the institutions or associations described in Question 14A? _____
- C) **Ever** been the subject of disciplinary action undertaken by any authority as described in question 14A? _____

15. OFFENCES UNDER THE LAW

INSTRUCTION: Offences under such federal statutes as the **Income Tax Act (Canada)** and the **Immigration Act (Canada)** constitute criminal offences and must be disclosed when answering this question. It should be noted that pleas or findings of guilt for impaired driving are **Criminal Code (Canada)** matters and must be disclosed. Where you have pleaded guilty or been found guilty of an offence, such offence must be reported even though an absolute or conditional discharge has been granted.

You are not required to disclose any offence for which a pardon has been granted under the **Criminal Records Act (Canada)** and such pardon has not been revoked. Under such circumstances, the appropriate response would be: "No".

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If you are in doubt as to previous dealings you have had with law enforcement agencies and the applicability of this question with respect to such encounters, you should obtain the advice of an authorized officer of your sponsor or a legal adviser.

A) Past Offences Involving Securities or Commodities –

Have you **ever** pleaded guilty or been found guilty under any law of any province, territory, state or country of any offence relating to trading in securities, commodities, commodity futures contracts or options or with the theft thereof, or with any related offence, or been a party to any proceedings taken on account of fraud arising out of any trade in or advice in respect thereof? _____

B) Past Offences Involving Other Criminal Offences or Contraventions –

Have you **ever** pleaded or been found guilty under any law of any province, territory, state or country for contraventions or other criminal offences not noted in A) above? _____

C) Current Charges or Indictments –

Are you **currently the subject of a charge or indictment**, under any law of any province, territory, state or country for contraventions, criminal offences or other conduct of the type described in A) or B) above (see also instructions above)? _____

D) Partnership or Company Offences or Current Charges or Indictments –

Has any partnerships or company of which you are or were at the time of such event a partner, officer, director or a holder of voting securities carrying more than 5% of the votes carried by all outstanding voting securities, **ever** pleaded guilty or been found guilty, or is any such partnership or company currently the subject of a **charge or indictment**, under any law of any province, territory, state or country for contraventions, criminal offences or other conduct of the type described in A) or B) above (see also instructions above)? _____

16. CIVIL PROCEEDINGS

Has any claim been made successfully or, to your knowledge, is any claim pending in any civil proceedings before a court or other tribunal in any province, territory, state or country which was, or is, based in whole or in part on fraud, theft, deceit, misrepresentation or similar conduct? _____

A) Against you? _____

B) Against any partnership or company of which you are or were at the time of such event, or at the time such proceedings were commenced, a partner, director, officer or holder of voting securities carrying more than 5% of the votes carried by all outstanding voting securities? _____

17. BANKRUPTCY

A) Under the law of any province, territory, state or country have you **ever**:

(a) been declared bankrupt or made a voluntary assignment in bankruptcy? _____

(b) made a proposal under any legislation relating to bankruptcy or insolvency? _____

(c) been subject to or instituted any proceedings, arrangement or compromise with creditors including, without limitation, produced a declaration under the Quebec Voluntary Deposit of Salary Wages Law or had a receiver and/or manager appointed to hold your assets? _____

If yes, and if applicable, attach copy of any discharge, release or document with similar effect.

B) Has any partnership or corporation of which you are or were at the time of such event a partner, director, officer or holder of voting securities carrying more than 5% of the votes carried by all outstanding voting securities **ever**:

(a) been declared bankrupt or made a voluntary assignment in bankruptcy? _____

(b) made a proposal under any legislation relating to bankruptcy or insolvency? _____

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(c) been subject to proceedings under any legislation relating to the winding up, dissolution or companies' creditors arrangements? _____

(d) been subject to or instituted any proceedings, arrangement or compromise with creditors or had a receiver and/or manager appointed to hold its assets? _____

If yes, and if applicable, attach copy of any discharge, release or document with similar effect.

18. JUDGMENT OR GARNISHMENT:

Has any judgment or garnishment **ever** been rendered against you or is any judgment or garnishment outstanding against you, in any civil court in any province, state or country for damages or other relief in respect of a fraud or for any reason whatsoever? _____

19. SURETY BOND OR FIDELITY BOND

A) Have you **ever** applied for a surety bond or fidelity bond and been refused? _____

If yes, attach name and address of bonding company, and when and why the bond was refused.

B) Are you presently bonded? _____

20. BUSINESS ACTIVITIES

A) Will you be actively engaged in the business of the firm with which you are now applying and devote the major portion of your time thereto? _____

B) Are you engaged in any other business or have any other employment for gain except your occupation with the firm with which you are not applying? _____

If so, **attach full details** including the full name and address of the business, the nature of the business, your title or position and the amount of time you devote to the business.

C) Are you a partner, director, officer, shareholder or other contributor of capital of a partnership or of a company having as its principal business that of a broker, dealer or adviser in securities, commodities, commodity futures contracts or options other than the firm with which you are now applying? If so, **attach full details**. _____

21. A) State the number, value, class and percentage of shares or the amount of partnership interest you own or propose to acquire upon approval. If acquiring shares upon approval, state source, i.e. treasury shares, or if upon transfer, state name of transferor.

B) State the value of subordinated debentures or bonds of the firm to be held by you or any other subordinated loan to be made by you to the firm.

C) Are you or will you upon approval be the beneficial owner of the shares, bonds, debentures, partnership interest or other notes held by you? If no, state name, residential address and occupation of the beneficial owner.

CAUTION

FILING OF ANY FALSE INFORMATION OR FAILURE TO DISCLOSE FULL INFORMATION REQUIRED BY OR ON THIS APPLICATION MAY RESULT IN ITS REJECTION OR IN DISCIPLINARY ACTION TAKEN AGAINST THE APPLICANT AND/OR THE SPONSORING FIRM WITHIN THE PROVISIONS OF THE APPLICABLE SECURITIES AND/OR COMMODITY FUTURES LEGISLATION, REGULATIONS AND POLICY STATEMENTS OF THE SECURITIES REGULATORY AUTHORITIES AND WITHIN THE TERMS OF THE BY-LAWS, RULINGS, RULES AND/OR REGULATIONS OF ANY ONE OF THE SELF-REGULATORY ORGANIZATIONS TO WHICH THIS APPLICATION IS SUBMITTED OR MAY RESULT IN A REFUSAL TO REGISTER THE APPLICANT.

CERTIFICATE AND AGREEMENT OF APPLICANT AND SPONSORING FIRM

The undersigned hereby certify that the foregoing statements are true and correct to the best of our knowledge, information and belief and hereby undertake to notify the self-regulatory organization in writing of any material change therein as prescribed by any by-law or rule of the respective self-regulatory organizations.

We agree that we are conversant with the by-laws, rulings, rules and regulations of the self-regulatory organizations listed in Question 4.

We agree to be bound by and to observe and comply with them as they are from time to time amended or supplemented, and we agree to keep ourselves fully informed about them as so amended and supplemented. We submit to the jurisdiction of the self-regulatory organizations and, wherever applicable, the Governors, Directors and committees thereof, and we agree that any approval granted pursuant to this application may be revoked, terminated or suspended at any time in accordance with the then applicable by-laws, rulings, rules and regulations. In the event of any such revocation or termination, the undersigned applicant agrees forthwith to terminate his association with the undersigned sponsoring firm and thereafter not to accept employment with or perform services of any kind for any member or member house, in each case if and to the extent provided in the then applicable by-laws, rulings, rules and regulations of the self-regulatory organizations. Our obligations above are joint and several.

We agree to the transfer of this application form, without amendment, to another of the self-regulatory organizations listed in Question 4 of this application form in the event that at some time in the future the undersigned applicant applies to such other self-regulatory organization.

The undersigned applicant has discussed the questions in this application and in particular Questions 15 and 16 with an office or branch manager of this firm. The undersigned authorized officer is satisfied that the applicant fully understands the questions, and further certifies on behalf of the sponsoring firm that the applicant will be engaged as registered or approved.

The undersigned applicant acknowledges and consents that any of the self-regulatory organizations may obtain any information whatsoever from any source, as permitted by law in any jurisdiction in Canada or elsewhere.

Dated at _____ this _____ day of _____ 19 _____

(Signature of Applicant)

(Name of Sponsoring Firm)

By _____
(Partner or Authorized Officer)

AFFIDAVIT

I, the undersigned applicant, do depose and say that I have read and understand the questions in this application form as well as the answers made by myself thereto and the Caution set out above, and that statements of fact made therein and in the attachments, if any, are true.

Sworn before me _____
(Commissioner of Oaths, etc) _____
(Signature of Deponent)

at the city of _____, Province of _____

this _____ day of _____ 19 _____

The Provinces of Saskatchewan & Manitoba require this affidavit to be sworn before a notary public or barrister or solicitor where the applicant is outside the province at the time of application.

It is an offence under applicable Canadian securities and commodity futures legislation to file an application which contains a statement that, at the time and in light of the circumstances in which it is made, is false or misleading, or which fails to state any material fact.

- PRINT CLEARLY - COMPLETE APPLICABLE SECTION
- ÉCRIRE CLAIREMENT EN CARACTÈRES D'IMPRIMERIE - REMPLIR LA PARTIE PERTINENTE

ENQUIRING AGENCY USE - À L'USAGE DE L'ORGANISME DEMANDEUR

AGENCY NAME - NOM DE L'ORGANISME	DATE
----------------------------------	------

A					
GIVEN 1 - 1 ^{er} PRÉNOM	GIVEN 2 - 2 ^e PRÉNOM	MAIDEN NAME - NOM DE JEUNE FILLE	SEX - SEXE		
ADDRESS - ADRESSE		BIRTHDATE - DATE DE NAISSANCE	BIRTHPLACE - LIEU DE NAISSANCE		
IF FOREIGN BORN, INDICATE DATE OF ENTRY EN CAS DE NAISSANCE À L'ÉTRANGER, INDIQUER LA DATE D'ENTRÉE	DATE	HEIGHT - TAILLE	WEIGHT - POIDS	HAIR - CHEVEUX	EYES - YEUX
<p>Have you ever been charged and/or convicted under the law of any Province, State or Country for which you have not been pardoned? Avez-vous déjà fait l'objet d'une accusation ou d'une condamnation en vertu de la loi d'une province, d'un État ou d'un pays, pour laquelle vous n'avez pas obtenu un pardon?</p> <p>If yes, provide details - Dans l'affirmative, donnez des précisions.</p> <p>NO <input type="checkbox"/> NON</p>					

<p>"I understand that the information on my application for registration or license, or renewal thereof, will be used to conduct a suitability investigation regarding my application. I understand that if I fail to accurately disclose my criminal history information, it may constitute an offence under the Provincial Securities Act or equivalent, or under section 132 of the CRIMINAL CODE if made under oath."</p>	<p>Je reconnais que les renseignements inscrits sur ma demande d'enregistrement ou de permis, ou de renouvellement de ce dernier, serviront à effectuer une enquête d'admissibilité en ce qui a trait à ma demande. Je reconnais également que si je ne divulgue pas exactement les renseignements contenus dans mon dossier judiciaire, je risque de commettre une infraction à la loi provinciale des valeurs mobilières ou l'équivalent, ou à l'article 132 du CODE CRIMINEL si la déclaration est faite sous serment.</p>
Applicant's Signature - Signature du candidat	Date

B AGENCY - ORGANISME
<p>FOREIGN ENQUIRY REQUESTED <input type="checkbox"/> NO / ENQUÊTE À L'ÉTRANGER DEMANDÉE <input type="checkbox"/> NON</p> <p>If yes, provide foreign residential/business history. (attach separate sheet) Dans l'affirmative, fournir les antécédents résidentiels ou commerciaux à l'étranger. (annexer une feuille distincte)</p>

<p>If the check performed by the Royal Canadian Mounted Police reveals a failure by the applicant to accurately disclose his/her criminal history, release of the applicant's criminal record is hereby requested for the purpose of conducting an investigation of an offence: such release being authorized by Section 8(2) (a) of the Privacy Act.</p>	<p>Si la vérification effectuée par la Gendarmerie royale du Canada révèle que le candidat n'a pas divulgué exactement les renseignements contenus dans son dossier judiciaire, une copie du casier judiciaire du candidat est nécessaire pour mener une enquête sur une infraction, ainsi que l'autorise l'al. 8(2) (a) de la LOI SUR LA PROTECTION DES RENSEIGNEMENTS PERSONNELS.</p>
Agency Official's Signature - Signature du représentant de l'organisme	Date

C S.F.I.C. - C.I.F.V.M.
<p>RCMP FILE DOSSIER DE LA G.R.C. <input type="checkbox"/> YES OUI <input type="checkbox"/> NO NON</p> <p>CRIMINAL RECORD CASIER JUDICIAIRE <input type="checkbox"/> YES OUI <input type="checkbox"/> NO NON</p> <p>CRIMINAL RECORD IS AS DISCLOSED LE CASIER JUDICIAIRE EST TEL QUE DIVULGUÉ <input type="checkbox"/> YES OUI <input type="checkbox"/> NO NON</p> <p>FOREIGN ENQUIRIES BEING CONDUCTED ENQUÊTES À L'ÉTRANGER EN COURS <input type="checkbox"/> YES OUI <input type="checkbox"/> NO NON</p> <p>PLEASE COMPLETE C-483 AND RETURN VEUILLEZ REMPLIR LA FORMULE C-483 ET LA RETOURNER</p> <p>CRIMINAL RECORD FOR FPS NO. CASIER JUDICIAIRE AUX FINS DU N° FPS</p> <p>S.F.I.C. FILE NO. - N° DE DOSSIER DU C.I.F.V.M.</p>