Form 33-109F4 Registration of Individuals and Review of Permitted Individuals (section 2.2)

General Instructions

Complete and submit this form to the relevant regulator(s) or in Québec, the securities regulatory authority, or self-regulatory organization (SRO) if an individual is seeking registration in individual categories or is seeking to be reviewed as a permitted individual. You only need to complete and submit one form regardless of the number of categories you are seeking to be registered in.

Terms

In this form, "you", "your" and "individual" mean the individual who is seeking registration or the individual who is filing this form as a permitted individual under securities legislation or derivatives legislation or both.

"Sponsoring firm" means the registered firm where you will carry out your duties as a registered or permitted individual.

"Derivatives" means financial instruments, such as futures contracts (including exchange traded contracts), futures options and swaps whose market price, value or payment obligations are derived from, or based on, one or more underlying interests. Derivatives can be in the form of instruments, agreements or securities.

"Major shareholder" and "shareholder" mean a shareholder who, in total, directly or indirectly owns voting securities carrying 10 per cent or more of the votes carried by all outstanding voting securities.

"Approved person" means, in respect of a member of the IIROC (Member), an individual who is a partner, director, officer, employee or agent of a Member who is approved by the IIROC or another Canadian SRO to perform any function required under any IIROC or another Canadian SRO By-law, Regulation, or Policy.

Several terms used in this form are defined in the securities legislation of your province or territory. Please refer to those definitions.

How to submit this form NRD format

Submit this form at the National Registration Database (NRD) website in NRD format at www.nrd.ca. You are only required to submit one form regardless of the number of registration categories you are seeking. If you have any questions, contact the compliance, registration or legal department of the sponsoring firm or a legal adviser, or visit the NRD information website at www.nrd-info.ca.

Format, other than NRD format

If you are relying on the temporary hardship exemption in section 5.1 of National Instrument 31-102 *National Registration Database*, you may submit this form in a format other than NRD format.

If you need more space, use a separate sheet of paper. Clearly identify the Item and question number. Complete and sign the form, and send it to the relevant regulator(s) or, in Québec, the securities regulatory authority, SRO(s) or similar authority. The number of originally signed copies of the form you are required to submit depends on the province or territory, and on the regulator, the securities regulatory authority or SRO.

To avoid delays in processing this form, be sure to answer all of the questions that apply to you. If you have questions, contact the compliance, registration or legal department of the sponsoring firm or a legal adviser, or visit the National Registration Database information website at www.nrd-info.ca.

	currently es due to		e you ever been, known by any names other than your full legal name above, for example, nicknames e?
Yes		No	
If "yes",	complete	e Sched	ule A.
3.	Use of	other r	names
			re you ever used, operated under, or carried on business under any name other than the name(s) ample, trade names for sole proprietorships or team names?
Yes		No	
If "yes",	complete	e Sched	ule A.
Item 2	Reside	ntial ad	dress
Provide	all of you	ur reside	ential addresses, including any foreign residential addresses, for the past 10 years.
1.	Curren	t and p	revious residential addresses
/numbo	r otroot	oity pro	vince, territory or state, country, postal code)
(Humbe	r, sireet,	city, pro	virice, territory or state, country, postar code)
Telepho	one numb	oer	
Lived at	this add	lress sin	ce (YYYY/MM)
If you ha	ave lived	at this a	address for less than 10 years, complete Schedule B.
2.	Mailing	g addres	es s
		here if yo	our mailing address is the same as your current residential address provided above. Otherwise, llowing:
(numbe	r, street,	city, pro	vince, territory or state, country, postal code)
Item 3	Person	nal infor	mation
1.	Date of	birth	
			(YYYY/MM/DD)
2.	Place o	of birth	(city, province, territory or state, country)
3.	Gender	r	Female Male
4.	Eye col	lour	
5.	Hair co	lour	
6.	Height		in. or cm
7.	Weight		

Other personal names

2.

Item 4	Citizenship
1.	Citizenship information
What is	your country of citizenship?
	Canada
	Other, specify:
2.	If you are a citizen of a country other than Canada, complete the following for that citizenship.
	Check here if you do not have a valid passport. Otherwise, provide:
_	rt number:
•	
Date of	issue:(YYYY/MM/DD)
Place of	f issue:(city, province, territory or state, country)
Item 5	Registration jurisdictions
1.	Are you filing this form under the passport system / interface for registration?
	Only choose "no" if:
	(a) you are seeking registration only in your principal jurisdiction,
	(b) you are seeking review as a permitted individual only in your principal jurisdiction
	and you are not currently registered under securities legislation in any jurisdiction of Canada,
	Yes No D
2.	Check each jurisdiction where you are seeking registration or review as a permitted individual:
П	All jurisdictions
	Alberta
Ħ	British Columbia Manitoba
	New Brunswick Newfoundland and Labrador
Ħ	Northwest Territories
\exists	Nova Scotia Nunavut
	Ontario Prince Edward Island
$\overline{\mathbb{R}}$	Québec Saskatchewan
	Yukon
Item 6	Individual categories
1.	On Schedule C, check each category for which you are seeking registration as an individual or review as a permitted individual. If you are seeking review as a permitted individual, check each category that describes your position with your sponsoring firm.
2.	If you are seeking registration as a representative of a mutual fund dealer or of a scholarship plan dealer in Québec, are you covered by your sponsoring firm's professional liability insurance?
Yes	□ No □

If "No",	state:
The nar	me of your insurer
Your po	olicy number
Item 7	Address and agent for service
1.	Address for service
a busin	ist have one address for service in each province or territory where you are submitting this form. A residential address cless address is acceptable. A post office box is not acceptable. Complete Schedule D for each additional address for you are providing.
Addres	s for service:
(numbe	er, street, city, province or territory, postal code)
Telepho	one number
Fax nur	mber, if applicable
E-mail a	address, if available
2.	Agent for service
have ar agent fo	ave appointed an agent for service, provide the following information for the agent in each province or territory where you agent for service. The address of your agent for service must be the same as the address for service above. If your por service is not an individual, provide the name of your contact person. If agent for service:
Contact	t person:
	Last name, First name
Item 8	Proficiency
1.	Course or examination information and other education
	ete Schedule E to indicate each course and examination that is required for registration or approval and that you have sfully completed or have been exempted from.
	Check here if you are not required under securities legislation or derivatives legislation or both, or the rules of an SRO to satisfy any course or examination requirements.
2.	Student numbers
If you h	ave a student number for a course that you successfully completed with one of the following organizations, provide it
CSI GIO	obal Education (formerly Canadian Securities Institute):
IFSE In	stitute (formerly IFIC):
Institute	e of Canadian Bankers (ICB):
CFA Ins	stitute (formerly AIMR):
Advocis	s (formerly CAIFA):

3. Exemption refusal

Has any securities regulator, derivatives regulator or SRO refused to grant you an exemption from a course, examination or experience requirement?

Yes	□ No □								
If "Yes",	", complete Schedule F.								
Item 9	Location of employment								
1.	Provide the following information for your new sponsoring firm. If you will be working out of more than one location, provide the following information for the location out of which you will be doing most of your business.								
	NRD location number:								
	Unique Identification Number (optional) :								
	Business address:								
	Business address: (number, street, city, province, territory or state, country, postal code)								
	Telephone number: () Fax number: ()								
2.	If the firm has a foreign head office, and/or you are not a resident of Canada, provide the address for the location in which you will be conducting business.								
	Business address:(number, street, city, province, territory or state, country, postal code)								
	Telephone number: () Fax number: ()								
[The foli	lowing under #3 "Type of location", #4 and #5 is for a Format other than NRD format only]								
3.	Type of location - for Format other than NRD format only:								
	☐ Head office ☐ Branch or Business Location ☐ Sub-branch								
4.	Name of branch manager:								
5.	Check here if the mailing address of the location is the same as the business address provided above. Otherwise, complete the following:								
	Mailing address:								
	(number street site was ince touritary or state security, postal and a)								
	Mailing address:								
	Current employment, other business activities, officer positions held and directorships								
Comple busines include									
Comple busines include compen	Current employment, other business activities, officer positions held and directorships te a separate Schedule G for each of your current business and employment activities, including employment and s activities with your sponsoring firm and any employment and business activities outside your sponsoring firm. Also all business related officer or director positions and any other equivalent positions held, whether you receive								
Comple busines include compen	Current employment, other business activities, officer positions held and directorships te a separate Schedule G for each of your current business and employment activities, including employment and s activities with your sponsoring firm and any employment and business activities outside your sponsoring firm. Also all business related officer or director positions and any other equivalent positions held, whether you receive sation or not.								
Comple busines include compen Item 11	Current employment, other business activities, officer positions held and directorships te a separate Schedule G for each of your current business and employment activities, including employment and sactivities with your sponsoring firm and any employment and business activities outside your sponsoring firm. Also all business related officer or director positions and any other equivalent positions held, whether you receive sation or not. Previous employment and other activities								
Comple busines include compen Item 11 On School	Current employment, other business activities, officer positions held and directorships te a separate Schedule G for each of your current business and employment activities, including employment and sactivities with your sponsoring firm and any employment and business activities outside your sponsoring firm. Also all business related officer or director positions and any other equivalent positions held, whether you receive sation or not. Previous employment and other activities edule H, complete your employment and other activities history for the past 10-years.								
Comple busines include compens Item 11 On Scholltem 12 Have you	Current employment, other business activities, officer positions held and directorships te a separate Schedule G for each of your current business and employment activities, including employment and sactivities with your sponsoring firm and any employment and business activities outside your sponsoring firm. Also all business related officer or director positions and any other equivalent positions held, whether you receive sation or not. Previous employment and other activities edule H, complete your employment and other activities history for the past 10-years. Resignations and terminations								
Comple busines include compens Item 11 On Scholtem 12 Have yo you:	Current employment, other business activities, officer positions held and directorships te a separate Schedule G for each of your current business and employment activities, including employment and s activities with your sponsoring firm and any employment and business activities outside your sponsoring firm. Also all business related officer or director positions and any other equivalent positions held, whether you receive is action or not. Previous employment and other activities edule H, complete your employment and other activities history for the past 10-years. Resignations and terminations ou ever resigned, been terminated or been dismissed for cause by an employer from a position following allegations that								
Comple busines include compens Item 11 On Scholtem 12 Have yo you:	Current employment, other business activities, officer positions held and directorships te a separate Schedule G for each of your current business and employment activities, including employment and separate substitutions are activities outside your sponsoring firm and any employment and business activities outside your sponsoring firm. Also all business related officer or director positions and any other equivalent positions held, whether you receive isation or not. Previous employment and other activities edule H, complete your employment and other activities history for the past 10-years. Resignations and terminations ou ever resigned, been terminated or been dismissed for cause by an employer from a position following allegations that Violated any statutes, regulations, rules or standards of conduct?								
Comple busines include compens Item 11 On Scholtem 12 Have yo you:	Current employment, other business activities, officer positions held and directorships te a separate Schedule G for each of your current business and employment activities, including employment and sactivities with your sponsoring firm and any employment and business activities outside your sponsoring firm. Also all business related officer or director positions and any other equivalent positions held, whether you receive station or not. Previous employment and other activities edule H, complete your employment and other activities history for the past 10-years. Resignations and terminations ou ever resigned, been terminated or been dismissed for cause by an employer from a position following allegations that Violated any statutes, regulations, rules or standards of conduct? Yes No								

	If "Yes", complete Schedule I Item 12.2.						
3.	Commit	ted fraud	or the wr	ongful taking of property, including theft?			
	Yes		No				
	If "Yes",	complete	Schedul	le I Item 12.3.			
Item 13	Regula	tory disc	losure				
1.	Securit	ies and d	erivative	es regulation			
a)	Other than a registration or permitted individual status that has been recorded under this NRD number, are you now, have you ever been, registered or licensed with any securities regulator or derivatives regulator or both in any provin territory, state or country to trade in or advise on securities or derivatives or both?						
	Yes		No				
	If "Yes",	complete	Schedul	le J, Item 13.1(a).			
b)		ou ever be e, territory		ed registration or a licence to trade in or advise on securities or derivatives or both in any country?			
	Yes		No 🗌				
	If "Yes",	complete	Schedul	le J, Item 13.1(b).			
c)				d the benefit of any exemption from registration provided in any securities or derivatives or any province, territory, state or country, other than what was disclosed in Item 8(3) of this			
	Yes		No				
	If "Yes",	complete	Schedul	le J, Item 13.1(c).			
d)				ever been subject to any disciplinary proceedings or any order resulting from disciplinary curities legislation or derivatives legislation or both in any province, territory, state or country?			
	Yes		No				
	If "Yes",	complete	Schedul	le J, Item 13.1(d).			
2.	SRO re	gulation					
a)				at has been recorded under this NRD number, are you now, or have you ever been, an O or similar organization in any province, territory, state or country?			
	Yes		No 🗌				
	If "Yes",	complete	Schedul	le J, Item13.2(a).			
b)	Have yo		en refuse	ed approved person status by an SRO or similar organization in any province, territory, state			
	Yes		No				
	If "Yes",	complete	Schedul	le J, Item 13.2(b).			
c)				ever been, subject to any disciplinary proceedings conducted by any SRO or similar ce, territory, state or country?			
	Yes		No				
	If "Yes",	complete	Schedul	le J, Item 13.2(c).			

3.

Non-securities regulation

a)	licensin	Are you now, or have you ever been, registered or licensed under any legislation which requires registration or licensing to deal with the public in any capacity other than to trade in or advise on securities or derivatives or both in any province, territory, state or country (e.g. insurance, real estate, accountant, lawyer, teacher)?					
	Yes		No				
	If "Yes"	, complet	te Schedu	ule J, Item 13.3(a)			
b)				sed registration or a licence under any legislation relating to your professional activities derivatives in any province, territory, state or country?			
	Yes		No				
	If "Yes"	, complet	te Schedu	ule J, Item 13.3(b).			
c)				ever been, a subject of any disciplinary actions conducted under any legislation relating to surrelated to securities or derivatives in any province, territory, state or country?			
	Yes		No				
	If "Yes"	, complet	te Schedu	ule J, Item 13.3(c).			
Item 14	Crimin	al disclo	sure				
You mu criminal (Canada Control you hav	st disclos offences a), <i>Immig</i> <i>Act</i> (Can	s under fe gration Ad ada)). Th ound guil	ninal offer ederal sta ot (Canad nis include	nces committed in any province, territory, state or country. This includes, but is not limited to, tutes such as the <i>Criminal Code</i> (Canada), <i>Income Tax Act</i> (Canada), <i>the Competition Act</i> a) and the <i>Controlled Drugs and Substances Act</i> (Canada) (or its predecessor, the <i>Narcotic</i> es pleas or findings of guilt for impaired driving, which are <i>Criminal Code</i> (Canada) matters. If minal offence, you must disclose the offence even if you have been granted an absolute or			
Alternat discharg	ive Meas ge has be	ures Pro een grant	gram with ted, or the	d 14.4, if you or your firm has been found guilty of a criminal offence, or participated in the nin the past three years, you must disclose that offence even if an absolute or conditional e charge has been dismissed, withdrawn or stayed. Some exceptions apply to stayed charges gram which are outlined below.			
Justice .	Act (Can	ada), reg		fence under any statute other than the Young Offenders Act (Canada) or the Youth Criminal r, in Québec, the securities regulatory authority or self regulatory organization may treat it as a tion.			
	-		ve to dis e is "No" i	close f any of the following circumstances apply.			
You are	not requ	ired to di	isclose:				
accspeandstaystay	accordance with the <i>Criminal Records Act</i> (Canada) speeding, parking violations or any offence for which a pardon has been granted under the <i>Criminal Records Act</i> (Canada) and the pardon has not been revoked stayed charges for summary conviction offences that have been stayed for six months or more stayed charges for indictable offences that have been stayed for a year or more, and						
	-	-		d 14.4, you are not required to disclose an offence for which you or your firm was found guilty a Alternative Measures Program more than three years ago for that offence.			
1.				g or stayed charges against you alleging a criminal offence that was committed in any or country?			
	Yes		No				
	If "Yes"	, complet	te Schedu	ule K, Item 14.1.			

2.	Have you ever been found guilty, pleaded no contest to, or granted an absolute or conditional discharge from any criminal offence that was committed in any province, territory, state or country?					
	Yes		No			
	If "Yes",	complete	e Schedu	le K, Item 14.2.		
3.	criminal		was alleg	edge, are there any outstanding charges against any firm of which you were, at the time the ed to have taken place in any province, territory, state or country, a partner, director, officer		
	Yes		No			
	If "Yes",	complete	e Schedu	le K, Item 14.3.		
4.	found gu	uilty, plea	ded no c	edge, has any firm, when you were a partner, officer, director or major shareholder, ever been ontest to or granted an absolute or conditional discharge from a criminal offence that was e, territory, state or country?		
	Yes		No			
	If "Yes",	complete	e Schedu	le K, Item 14.4.		
Item 15	Civil dis	sclosure				
1.	Are there currently any outstanding civil actions alleging fraud, theft, deceit, misrepresentation or similar miscond against you or a firm where you are or were a partner, director, officer or major shareholder in any province, territ state or country?					
	Yes		No			
	If "Yes",	complete	e Schedu	le L, Item 15.1.		
2.	respond	ent in an	y civil pro	you are or were a partner, director, officer or major shareholder ever been a defendant or ceeding in which fraud, theft, deceit, misrepresentation or similar misconduct is, or was, a judgment in any province, territory, state or country?		
	Yes		No			
	If "Yes",	complete	e Schedu	le L, Item 15.2.		
Item 16	Financia	al disclo	sure			
1.	Bankruj	otcy				
	e laws of		licable ju	risdiction, have you or has any firm when you were a partner, director, officer or major		
a)	Had a pe	etition in	bankrupto	cy issued or made a voluntary assignment in bankruptcy or any similar proceeding?		
	Yes		No			
	If "Yes",	complete	e Schedu	le M, Item 16.1(a).		
b)	Made a	proposal	under an	y legislation relating to bankruptcy or insolvency or any similar proceeding?		
	Yes		No			
	If "Yes",	complete	e Schedu	le M, Item 16.1(b).		
c)				gs under any legislation relating to the winding up or dissolution of the firm, or under the angement Act (Canada)?		
	Yes		No			

	11 165,	complete	e Scriedo	ile ivi, item 10.1(c).
d)	receiver	, receive	r-manage	d any proceedings, arrangement or compromise with creditors? This includes having a er, administrator or trustee appointed by or at the request of creditors, privately, through court egulatory authority, to hold your assets.
	Yes		No	
	If "Yes",	complete	e Schedu	ıle M, Item 16.1(d).
2.	Debt ob	ligations	s	
knowled	lge, has a	any firm,	while you	ailed to meet a financial obligation of \$5,000 or more as it came due or, to the best of your were a partner, director, officer or major shareholder of that firm, failed to meet any financial ame due?
Yes		No		
If "Yes",	complete	e Schedu	ıle M, Iteı	m 16.2.
3.	Surety	bond or	fidelity b	oond
Have yo	u ever be	een refus	ed for a	surety or fidelity bond?
Yes		No		
If "Yes",	complete	e Schedu	ıle M, Iteı	n 16.3.
4.	Garnish	ments,	unsatisfi	ed judgments or directions to pay
indebted		to the be		ial, state authority or court ever issued any of the following against you regarding your r knowledge, the indebtedness of a firm where you are or were a partner, director, officer or
Garnish	ment		Yes	No □
Unsatist	ied judgn	nent		
Directio	n to pay			
If "Yes",	complete	e Schedu	ıle M, Iteı	n 16.4.
Item 17	Owners	hip of se	ecurities	and derivatives firms
				en, a partner or major shareholder of any firm (including your sponsoring firm) whose business es or derivatives or both?
Yes		No		
If "Yes",	complete	e Schedu	ile N.	
Item 18	Agent f	or servic	e	
				that in each jurisdiction of Canada where you have appointed an agent for service, you have nt for service required in that jurisdiction.

Item 19 Submission to jurisdiction

By submitting this form, you agree to be subject to the securities legislation or derivatives legislation or both of each jurisdiction of Canada, and to the by-laws, regulations, rules, rulings and policies (collectively referred to as "rules" in this form) of the SROs to which you have submitted this form. This includes the jurisdiction of any tribunals or any proceedings that relate to your activities as a registrant or a partner, director or officer of a registrant under that securities legislation or derivatives legislation or both or as an Approved Person under SRO rules.

Item 20 Notice of collection and use of personal information

The personal information required under this form is collected on behalf of, and used by, the securities regulatory authorities in the jurisdictions set out in Schedule O to administer and enforce certain provisions of their securities legislation or derivatives legislation or both.

By submitting this form, the individual consents to the collection by the securities regulatory authorities of this personal information, and any police records, records from other government or non-governmental regulators or SROs, credit records and employment records about the individual that the securities regulatory authorities may need to complete their review of the information submitted in this form relating to the individual's continued fitness for registration or approval, if applicable, in accordance with the legal authority of the securities regulatory authorities while the individual is registered with or approved by it. Securities regulatory authorities may contact government and private bodies or agencies, individuals, corporations and other organizations for information about the individual.

If you have any questions about the collection and use of this information, contact the securities regulatory authority in any jurisdiction in which the required information is submitted. See Schedule O for details. In Québec, you can also contact the Commission d'accès à l'information at 1-888-528-7741 or visit its website at www.cai.gouv.gc.ca.

SROs

The principal purpose for the collection of personal information is to assess your suitability for registration or approval and to assess your continued fitness for registration or approval in accordance with the applicable securities legislation and the rules of the SROs.

By submitting this form, you authorize the SROs to which this form is submitted to collect any information from any source whatsoever. This includes, but is not limited to, personal confidential information about you that is otherwise protected by law such as, police, credit, employment, education and proficiency course completion records, and records from other government or non-governmental regulatory authorities, securities commissions, stock exchanges, or other SROs, private bodies, agencies, individuals or corporations, as may be necessary for the SROs to complete their review of your form or continued fitness for registration or approval in accordance with their rules for the duration of the period you remain so registered or approved. You further consent to and authorize the transfer of confidential information between SROs, securities commissions or stock exchanges from whom you now, or may in the future, seek registration or approval, or with which you are currently registered or approved for the purpose of determining fitness or continued fitness for registration or approval or in connection with the performance of an investigation or other exercise of regulatory authority, whether or not you are registered with or approved by them.

By submitting this form, you certify that you understand the rules of the applicable SROs of which you are seeking registration or approval or of which your sponsoring firm is a member or participating organization. You also undertake to become conversant with the rules of any SROs of which you or your sponsoring firm becomes a member or participating organization. You agree to be bound by, observe and comply with these rules as they are from time to time amended or supplemented, and you agree to keep yourself fully informed about them as they are amended and supplemented. You submit to the jurisdiction of the SROs from whom you are seeking registration or approval, or of which your sponsoring firm is now or in the future becomes a member or participating organization and, wherever applicable, their Governors, Directors and Committees. You agree that any registration or approval granted pursuant to this form may be revoked, terminated or suspended at any time in accordance with the then applicable rules of the respective SROs. In the event of any such revocation or termination, you must terminate all activities which require registration or approval and, thereafter, not perform services that require registration or approval for any member of the SROs or any approved affiliated company or other affiliate of such member without obtaining the approval of or registration with the SROs, in accordance with their rules.

By submitting this form, you undertake to notify the SROs from whom you are seeking registration or approval or with which you are currently or may in the future be registered or approved of any material change to the information herein provided in accordance with their respective rules. You agree to the transfer of this form, without amendment, to other SROs in the event that at some time in the future you seek registration or approval from such other SROs.

You certify that you have discussed the questions in this form, together with this Agreement, with an Officer or Branch Manager of your sponsoring member firm and, to your knowledge and belief, the authorized Officer or Branch Manager was satisfied that you fully understood the questions and the terms of this Agreement. You further certify that your business activities that are subject to securities rules and derivatives rules or both will be limited strictly to those permitted by the category of your registration or approval.

Item 21 Warning

It is an offence under securities legislation and/or derivatives legislation, including commodity futures legislation to give false or misleading information on this form.

Item 22 Certification

1. Certification - NRD format

best of	rm I have discussed the questions in this form with an officer, branch manager or supervisor of my spon- f my knowledge, the officer, branch manager or supervisor was satisfied that I fully understood the ques- les to those permitted by my category of registration.	soring firm. To the tions. I will limit my					
	I am making this submission as agent for the individual identified in this form. By checking this box, individual provided me with all of the information on this form.						
2.	Certification - Format other than NRD format						
	dual ning below, I certify to the regulator, or in Québec the securities regulatory authority, in each jurisdiction mitting this form, either directly or through the principal regulator, that:	where I am filing					
	have read this form and understand the questions, and Il of the information provided on this form is true, and complete.						
Signat	ture of individual Date						
By sigr	orized partner or officer of the firm ning below, I certify to the regulator, or in Québec the securities regulatory authority, in each jurisdiction tting this form, either directly or through the principal regulator, for the individual that:	where I am					
ind • I h	the individual identified in this form will be engaged by the sponsoring firm as a registered individual or a permitted individual, and I have, or a branch manager, or supervisor, or another officer or partner has, discussed the questions set out in this form with the individual and, to the best of my knowledge, the individual fully understands the questions.						
Name	of firm						
Name	of authorized signing officer or partner						
Title of	f authorized signing officer or partner						
Signat	ture of authorized signing officer or partner						
Date s	signed(YYYY/MM/DD)						

Schedule A Names (Item 1)

Item 1.2 Other personal names

Name 1:				
Last name	First name	Second nam	ne (N/A 🔲)	Third name (N/A)
Provide the reasons for th	ne use of this nar	ne (for example, marriag	e, divorce, court o	rder, commonly used name or nickname)?
When did you use this na	me?	From:	То:	
		(YYYY/MM)	(YYYY/	MM)
Name 2:				
Last name	First name	Second nam	ne (N/A 🔲)	Third name (N/A)
Provide the reasons for th	ne use of this nar	ne (for example, marriag	e, divorce, court o	rder, commonly used name or nickname)?
When did you use this na	me?	From:	То:	
		(YYYY/MM)	(YYYY/	MM)
Name 3:				
Last name	First name	Second nam	ne (N/A 🔲)	Third name (N/A)
Provide the reasons for th	ne use of this nar	me (for example, marriag	e, divorce, court o	rder, commonly used name or nickname)?
When did you use this na	me?	From:	To:	
		(YYYY/MM)	(YYYY/	MM)
Item 1.3 Use of other	er names			
Name 1:				
Name:				
Provide the reasons for th	ne use of this oth	er name (for example, tra	ade name or team	name)?:
If this other name is or wa	as used in conne	ction with any sponsoring	g firm, did the spor	nsoring firm approve the use of the name?
Yes No				
When did you use this na	me?	From:	То:	
		(YYYY/MM)	(YYYY/	MM)
Name 2:				
Name:				

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Provide the reasons for the use of this other name (for example, trade name or team name):

	(YYYY/MM)	(YYYY/MM)
When did you use this name?	From:	То:
Yes No		
If this other name is or was used in con	nection with any sponsoring	firm, did the sponsoring firm approve the use of the name?
Provide the reasons for the use of this	other name (for example, tra	de name or team name):
Name:		
Name 3:		
	(YYY/MM)	(YYY/MM)
When did you use this name?	From:	To:
Yes		
If this other name is or was used in con	nection with any sponsoring	firm, did the sponsoring firm approve the use of the name?

Schedule B Residential address (Item 2)

Item 2.1 Current and previous residential addresses

If you have lived at your current address for less than 10 years, list all previous addresses for the past 10 years.

You do not have to include a postal code or ZIP code, or a telephone number for any previous address.

Address 1:			
Residential address:(number_stree	t, city, province, territory or s	tate country)	
(nambor, stree	t, oity, province, territory or e	tato, oddrary)	
When did you live at this address?	From:	То:	
	(YYYY/MM)	(YYYY/MM)	
Address 2:			
Residential address:			
(number, stree	t, city, province, territory or s	tate, country)	
When did you live at this address?	From:	То:	
	(YYYY/MM)	(YYYY/MM)	
Address 3:			
Residential address:			
(number, stree	t, city, province, territory or s	tate, country)	
When did you live at this address?	From:	То:	
	(YYYY/MM)	(YYY/MM)	

Schedule C Individual Categories (Item 6)

Check each category for which you are seeking registration, approval or review as a permitted individual.

Categories common to all jurisdictions under securities legislation Firm categories [Format other than NRD format only] [] Investment Dealer [] Mutual Fund Dealer [] Scholarship Plan Dealer [] Exempt Market Dealer [] Restricted Dealer [] Portfolio Manager [] Restricted Portfolio Manager [] Investment Fund Manager Individual categories and permitted activities [] Dealing Representative [] Advising Representative [] Associate Advising Representative [] Ultimate Designated Person [] Chief Compliance Officer [] Officer – Specify title: [] Director [] Partner [] Shareholder [] Branch Manager (MFDA members only) [] IIROC approval only **Investment Industry Regulatory Organization of Canada** Approval categories [] Executive [] Director (Industry) [] Director (Non-Industry) [] Supervisor [] Investor [] Registered Representative [] Investment Representative [] Trader Additional approval categories [] Chief Compliance Officer

[] Chief Financial Officer

[] Ultimate Designated Person
Products
[] Non-Trading
[] Securities
[] Options
[] Futures Contracts and Futures Contract Options
[] Mutual Funds only
Customer type
[] Retail
[] Institutional
[] Not Applicable
Portfolio management
[] Portfolio Management
Catagorian under land commedity futures and derivatives larislation
Categories under local commodity futures and derivatives legislation
Ontario
Firm categories
[] Commodity Trading Adviser
[] Commodity Trading Counsel
[] Commodity Trading Manager
[] Futures Commission Merchant
Individual categories and permitted activities
[] Advising Representative
[] Salesperson
[] Branch Manager
[] Officer – Specify title:
[] Director
[] Partner
[] Shareholder
[] IIROC approval only
<u>Manitoba</u>
Firm categories
[] Dealer (Merchant)
[] Dealer (Futures Commission Merchant)
[] Dealer (Floor Broker)
[] Adviser
[] Local
Individual categories and permitted activities

[] Floor Trader		
[] Salesperson		
[] Branch Manager		
[] Adviser		
[] Officer – Specify title:		
[] Director		
[] Partner		
[] Futures Contracts Portfolio Manager		
[] Associate Futures Contracts Portfolio Manager		
[] IIROC approval only		
[] Local		
Québec - activities relating to derivatives		
For information purposes, indicate whether you will carry on activities as a representative of:		
[] An Investment Dealer Acting as a Derivatives Dealer		
[] A Portfolio Manager Acting as a Derivatives Portfolio Manager		

Schedule D Address and agent for service (Item 7)

Item 7.1 Address for service

Last name, First name

registered individual or permitted individual. A post office box is not an acceptable address for service.
Address for service: (number, street, city, province or territory, postal code)
Telephone number: ()Fax number: ()
E-mail address:
Item 7.2 Agent for service
If you have appointed an agent for service, provide the following information about the agent. The address for service provided above must be the address of the agent named below.
Name of agent for service:
(if applicable)
Contact person:

Schedule E Proficiency (Item 8)

Item 8.1 Course or examination information and other education

Course or examination or other education	Date completed (YYYY/MM/DD)	Date exempted (YYYY/MM/DD)	Regulator / securities regulatory authority granting the exemption

Schedule F Proficiency (Item 8.3)

Item 8.3 Exemption refusal

Complete the following for each exemption that was refused.
Which securities regulator, derivatives regulator or SRO refused to grant the exemption?
State the name of the course, examination or experience requirement:
State the reason given for not being granted the exemption:
Date exemption refused:(YYYY/MM/DD)
2. Which securities regulator, derivatives regulator or SRO refused to grant the exemption?
State the name of the course, examination or experience requirement:
State the reason given for not being granted the exemption:
Date exemption refused:(YYYY/MM/DD)
3. Which securities regulator, derivatives regulator or SRO refused to grant the exemption?
State the name of the course, examination or experience requirement:
State the reason given for not being granted the exemption:
Date exemption refused:(YYYY/MM/DD)

Schedule G Current employment, other business activities, officer positions held and directorships (Item 10)

Complete a separate Schedule G for each of your current business and employment activities with your sponsoring firm and with all other organizations. This includes any business related officer or director positions held, or any other equivalent positions held, whether you receive compensation or not.

1. Start date(YYYY/MM/DD)
2. Firm information
☐ Check here if this activity is employment with your sponsoring firm.
If the activity is with your sponsoring firm, you are not required to indicate the firm name and address information below:
Name of business or employer:
Address of business or employer:
Name and title of your immediate supervisor:
3. Description of duties
Describe all employment and business activities related to this employer. Include the nature of the business and your duties, title or relationship with the business. If you are seeking registration that requires specific experience, include details with this firm such as level of responsibility, value of accounts under direct supervision, number of years of experience, and percentage of time spent on each activity.
4. Number of work hours per week
How many hours per week do you devote to this business or employment?
If this activity is employment with your sponsoring firm and you work less than 30 hours per week, explain why.
5. Conflicts of interest
If you have more than one employer or are engaged in business related activities, disclose any potential for confusion by clients and any potential for conflicts of interest arising from your multiple employment or business related activities or proposed business related activities. Include whether or not any of your employers or organizations where you engage in business related activities are listed on an exchange. Confirm whether the firm has procedures for minimizing potential conflicts of interest and if so, confirm that you are aware of these procedures.
If you do not perceive any conflicts of interest arising from this employment, explain why.

Schedule H Previous employment and other activities (Item 11)

Provide the following information for each of your employment and other activities in the past 10-years. Account for all of your time, including full-time and part-time employment, self-employment or military service. Include your status for each, such as unemployed, full-time student, or other similar statuses. Do not include short-term employment of four months or less while a student, unless it was in the securities, derivatives or financial industry.

In addition to the information required in the paragraph above, if you were employed or had business activities in the securities or derivatives industry or both during and before the 10-year period, disclose all your securities and derivatives or both employment or business activities (both before and during the 10-year period).

☐ Full-	mployed time student loyed or self-employed		
From:	(YYYY/MM)		
То:	(YYYY/MM)		
Comple	te the following only if you are	e, or were, employed or self-employed during this period.	
Name o	f business or employer:		
Address	s of business or employer:		
(numbe	r, street, city, province, territo	ry or state, country)	
Name a	nd title of immediate supervis	sor, if applicable:	
of regist	ration that requires specific e	sition, duties and your relationship to the firm. If you are s xperience, include details of that experience. Examples in number of years of that experience and research experience	nclude level of responsibility, value
Reason	why you left the firm:		

Schedule I Resignations and terminations (Item 12)

Item 12.1

For each allegation of violation of any statutes, regulations, rules or internal/external standards of conduct, state below (1) the name of the firm from which you resigned, were terminated or dismissed for cause, (2) whether you resigned, were terminated or dismissed for cause, and (4) the circumstances relating to your resignation, termination or dismissal for cause.

Item 12.2

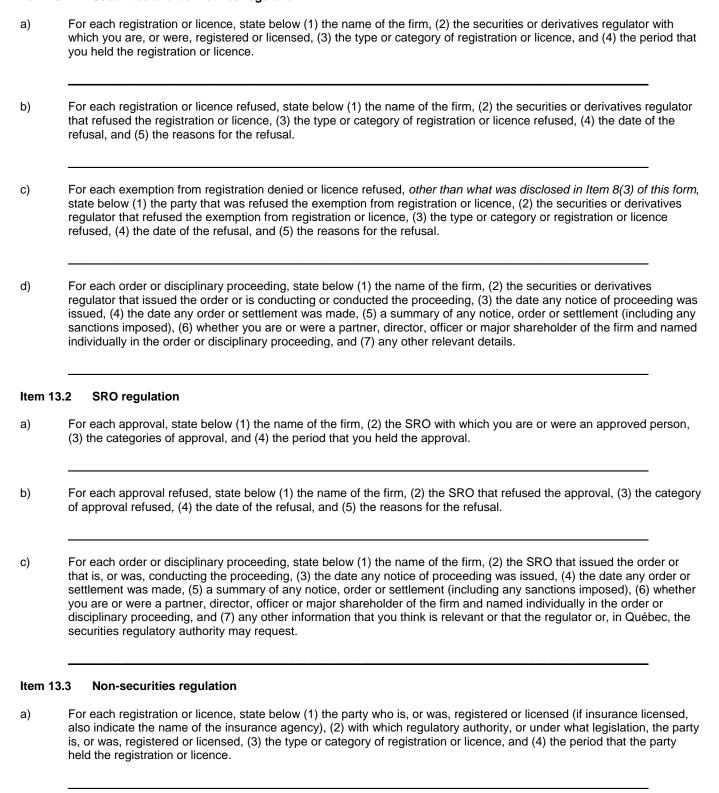
For each allegation of failure to supervise compliance with any statutes, regulations, rules or standards of conduct, state below, (1) the name of the firm from which you resigned, were terminated or dismissed for cause, (2) whether you resigned, were terminated or dismissed for cause, (3) the date you resigned, were terminated or dismissed for cause, and (4) the circumstances relating to your resignation, termination or dismissal for cause.

Item 12.3

For each allegation of fraud or the wrongful taking of property, including theft, state below (1) the name of the firm from which you resigned, were terminated or dismissed for cause, (2) whether you resigned, were terminated or dismissed for cause, (3) the date you resigned, were terminated or dismissed for cause, and (4) the circumstances relating to your resignation, termination or dismissal for cause.

Schedule J Regulatory disclosure (Item 13)

Item 13.1 Securities and derivatives regulation



- b) For each registration or licence refused, state below (1) the party that was refused registration or licensing (if insurance licensed, also indicate the name of the insurance agency), (2) with which regulatory authority, or under what legislation, the registration or licence was refused, (3) the type or category of registration or licence refused, (4) the date of the refusal, and (5) the reasons for the refusal.
- c) For each order or disciplinary proceeding, indicate below (1) the party against whom the order was made or the proceeding taken (if insurance licensed, indicate the name of the insurance agency), (2) the regulatory authority that made the order or that is, or was, conducting the proceeding, or under what legislation the order was made or the proceeding is being, or was conducted, (3) the date any notice of proceeding was issued, (4) the date any order or settlement was made, (5) a summary of any notice, order or settlement (including any sanctions imposed), (6) whether you are or were a partner, director, officer or major shareholder of the firm and named individually in the order or disciplinary proceeding and (7) any other information that you think is relevant or that the regulatory authority may request.

Schedule K Criminal disclosure (Item 14)

Item 14.1

For each charge, state below (1) the type of charge, (2) the date of the charge, (3) any trial or appeal dates, and (4) the court location.

Item 14.2

For each finding of guilty, pleading no contest to, or granting of an absolute or conditional discharge from a criminal offence state below (1) the offence, (2) the date found guilty, and (3) the disposition (any penalty or fine and the date any fine was paid).

Item 14.3

For each charge, state below (1) the name of the firm, (2) the type of charge, (3) the date of the charge, (4) any trial or appeal dates, and (5) the court location.

Item 14.4

For each finding of guilty, pleading no contest to, or granting of an absolute or conditional discharge from a criminal offence state below (1) the name of the firm, (2) the offence, (3) the date of the conviction, and (4) the disposition (any penalty or fine and the date any fine was paid).

Schedule L Civil disclosure (Item 15)

Item 15.1

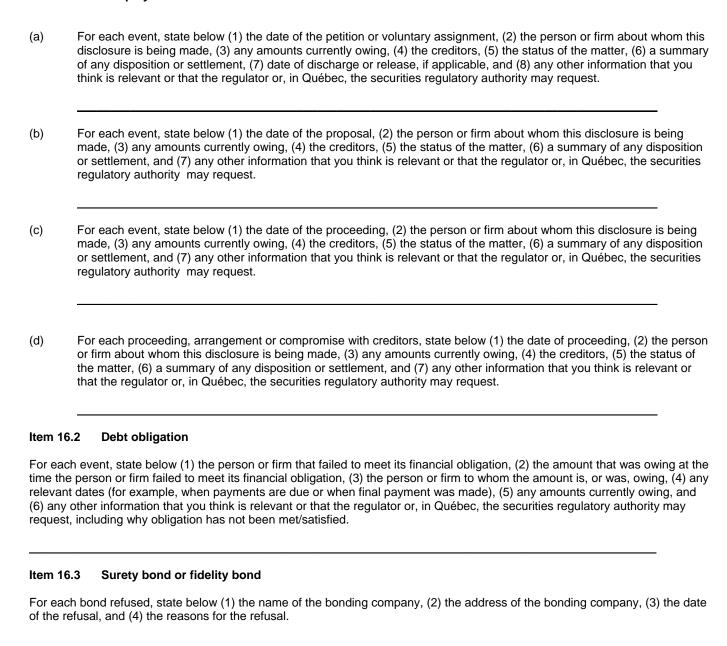
For each outstanding civil proceeding, state below (1) the dates the statement of claim and statement of defence were issued, (2) the name of the plaintiff(s) in the proceeding, (3) whether the proceeding is pending or on appeal, (4) whether the proceeding was against a firm where you are, or were, a partner, director, officer or major shareholder and whether you have been named individually in the allegations, and (5) the jurisdiction where the action is being pursued.

Item 15.2

For each civil proceeding, state below (1) the dates the statement of claim and statement of defence were issued, (2) each plaintiff in the proceeding, (3) the jurisdiction where the action was pursued, (4) whether the proceeding was about a firm where you are, or were, a partner, director, officer or major shareholder and whether you have been named individually in the allegations and (5) a summary of any disposition or any settlement over \$10,000. You must disclose any actions settled without admission of liability.

Schedule M Financial Disclosure (Item 16)

Item 16.1 Bankruptcy



Item 16.4 Garnishments, unsatisfied judgments or directions to pay

For each garnishment, unsatisfied judgment or direction to pay regarding your indebtedness, indicate below (1) the amount that was owing at the time the garnishment, judgment or direction to pay was rendered, (2) the person or firm to whom the amount is, or was, owing, (3) any relevant dates (for example, when payments are due or when final payment was made), (4) the percentage of earnings to be garnished or the amount to be paid, (5) any amounts currently owing, and (6) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request.

Schedule N Ownership of securities and derivatives firms (Item 17)

Firm na	me:					
What is	your relationship to the	firm? Partner	Major shareholder			
What is	the period of this relation	nship?				
	From:	То:	(if applicable)			
	(YYYY/MM)	(YYYY/MM)				
Provide	the following informatio	n:				
a)	State the number, value, class and percentage of securities, or the amount of partnership interest you own or propose to acquire when you are registered or approved as a result of the review of this form. If acquiring shares when you are so approved or registered, state the source (for example, treasury shares, or if upon transfer, state name of transferor)					
b)	State the market value (approximate, if necessary) of any 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)	If another person or firm has provided you with funds to invest in the firm, provide the name of the person or firm and state the relationship between you and that person or firm:					
d)	Are the funds to be inv	rested (or proposed to be	invested) guaranteed directl	y or indirectly by any person or firm?		
	If "Yes", provide the na	ame of the person or firm	and state the relationship be	tween you and that person or firm:		
e)	when you are registered	ed or approved as a resu	It of the review of this form, ir	s or this partnership interest, or do you, natend to give up any of these rights as or partnership interest with any firm or		
	Yes 🗌 No					
	If "Yes", provide the name of the person or firm, state the relationship between you and that person or firm and describe the rights that have been or will be given up:					
f)	Is a person other than you?	you the beneficial owner	of the shares, bonds, deben	tures, partnership units or notes held by		
	Yes 🗌 No					
	If "Yes", complete (g), (h) and (i).					
g)	Name of beneficial owner:					
	Last name	First name	Second name (if applicable)	Third name (if applicable)		
h)	Residential address:					
	(number, street, city, p	rovince, territory or state	, country, postal code)			

Schedule O **Contact information for** Notice of collection and use of personal information

Alberta

Alberta Securities Commission, 4th Floor, 300 - 5th Avenue SW Calgary, AB T2P 3C4 Attention: Information Officer

Telephone: (403) 355-4151

British Columbia

British Columbia Securities Commission P.O. Box 10142. Pacific Centre 701 West Georgia Street Vancouver, BC V7Y 1L2

Attention: Freedom of Information Officer Telephone: (604) 899-6500 or (800) 373-6393

Manitoba

The Manitoba Securities Commission 500 - 400 St. Mary Avenue Winnipeg, MB R3C 4K5 Attention: Director of Registrations Telephone (204) 945-2548 Fax (204) 945-0330

New Brunswick

New Brunswick Securities Commission Suite 300, 85 Charlotte Street Saint John, NB E2L 2J2 Attention: Director, Regulatory Affairs

Telephone: (506) 658-3060

Newfoundland and Labrador

Securities NL

Financial Services Regulation Division Department of Government Services P.O. Box 8700, 2nd Floor, West Block Confederation Building St. John's, NL A1B 4J6 Attention: Manager of Registrations

Tel: (709) 729-5661

Nova Scotia

Nova Scotia Securities Commission 2nd Floor, Joseph Howe Building 1690 Hollis Street P.O. Box 458 Halifax, NS B3J 2P8

Attention: Deputy Director, Capital Markets

Telephone: (902) 424-7768

Northwest Territories

Government of the Northwest Territories P.O. Box 1320 Yellowknife, NWT X1A 2L9

Attention: Deputy Superintendent of Securities

Telephone: (867) 920-8984

Nunavut

Legal Registries Division Department of Justice Government of Nunavut P.O. Box 1000 Station 570 Igaluit, NU X0A 0H0

Attention: Deputy Registrar of Securities

Telephone: (867) 975-6590

Ontario

Ontario Securities Commission Suite 1903, Box 55 20 Queen Street West Toronto, ON M5H 3S8 Attention: FOI Coordinator Telephone: (416) 593-8314

Prince Edward Island

Securities Registry Office of the Attorney General B Consumer, Corporate and Insurance Services Division P.O. Box 2000 Charlottetown, PE C1A 7N8 Attention: Deputy Registrar of Securities Telephone: (902) 368-6288

Québec

Autorité des marchés financiers 800, square Victoria, 22e étage C.P. 246, tour de la Bourse Montréal (Québec) H4Z 1G3

Attention: Responsable de l'accès à l'information

Telephone: (514) 395-0337 or (877) 525-0337 (in Québec)

Saskatchewan

Saskatchewan Financial Services Commission Suite 601, 1919 Saskatchewan Drive Regina, SK S4P 4H2 Attention: Director

Telephone: (306) 787-5842

Yukon

Yukon Securities Office Department of Community Services P.O. Box 2703 C-6 Whitehorse, YT Y1A 2C6 Attention: Superintendent of Securities

Telephone: (867) 667-5225

Self-regulatory organization

Investment Industry Regulatory Organization of Canada 121 King Street West, Suite 1600 Toronto, Ontario M5H 3T9 Attention: Privacy Officer Telephone: (416) 364-6133 E-mail: PrivacyOfficer@iiroc.ca