Proposed Form 33-109F4 – Application for Registration of Individuals and Review of Permitted Individuals

In this form, "you", "your" and "applicant" mean the person who is applying for registration or approval as an individual under [the national registration rule].

- "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, 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" means a shareholder who, in total, directly or indirectly holds 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 IDA (Member), an individual who is a partner, director, officer, employee or agent of a Member who is approved by the IDA or another Canadian self-regulatory organization to perform any function required under any IDA 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 local definitions.

[Online version]

If you have questions, please contact an authorized officer of your sponsoring firm or a legal adviser, or visit the national registration database (NRD) information website at www.nrd-info.ca.

[Paper version]

Complete this form if you are relying on the temporary hardship exemption in NI 31-102. Otherwise, complete and submit this form online at the national registration database (NRD) website at www.nrd-info.ca.

If you need more space, use a separate sheet of paper, clearly identifying the section and item. Please complete and sign the form, and send it to the appropriate Canadian securities regulator(s), self-regulatory organization (SRO) or similar authority. The number of originally signed copies of the form you are required to submit depends on the province or territory, and jurisdiction.

Failure to answer all applicable questions may cause delays in the processing of the application form.

If you have questions, please contact an authorized officer of your sponsoring firm or a legal adviser, or visit the national registration database (NRD) information website at www.nrd-info.ca.

Item 1 – Name			
1. Legal name			
Last Name	First Name	Second Name (N/A) Third	Name (N/A)
2. Other person Are you currently name above?		been, known by any names other tha	nn your full legal
Yes] No [
If "yes", complet	e Schedule A		
	y, or have you ever	used, operated under, or carried on bames) other than the name(s) mention	
Yes	No 🗌		
If "yes", complet	e Schedule A		
Item 2 – Resider	ntial Address		
Provide all reside 10 years.	ential addresses, inc	cluding any foreign residential address	sses, for the past
1. Current resid	ential address		
number, street			•
city, province, te	rritory or state, cou	intry, postal code	
Telephone numb	er:		
Lived at this add	ress since (YYYY/	MM)	

If you have resided at this address for less than 10 years, complete Schedule B.

Check here if your mailing address is the same as your current residential address
provided above. Otherwise, complete the following:
number, street
city, province, territory or state, country, postal code
Item 3 – Personal Information
1. Date of birth (YYYY/MM/DD)
2. Place of birth
city, province, territory or state, country
3. Gender
Female
4. Eye colour
5. Hair colour
6. Height in cm.
7. Weight lbs kg.
Item 4 – Citizenship
Citizenship Information What is your citizenship? Canadian Other, specify:
If you are a citizen of any other countries besides Canada, complete the following for those other citizenships.
Passport number:
Country of citizenship:
Date of issue: (YYYY/MM/DD)

Place of issue:
(city, province, territory or state, country)
☐ Check here if you do not have a valid passport
Item 5 – Registration Jurisdictions Indicate, by checking the appropriate box, each province or territory to which you are submitting this form:
☐ Alberta
☐ British Columbia
☐ Manitoba
☐ New Brunswick
☐ Newfoundland and Labrador
☐ Northwest Territories
☐ Nova Scotia
☐ Nunavut
Ontario
☐ Prince Edward Island
☐ Québec
☐ Saskatchewan
☐ Yukon

Item 6 – Individual Categories

Indicate, by checking the appropriate box in Schedule C, each registration category for which you are applying. If you are a permitted individual, indicate each category that describes your position with your sponsoring firm.

Item 7 – Address and Agent for Service

1. Address for service

You must have one address for service in each province or territory where you are submitting this form. A post office box is not an acceptable address for service. A residential address is acceptable. Complete Schedule D for each additional address for service you are providing.

Address for service:
number, street
city, province or territory, postal code
Telephone number Fax number, if applicable
E-mail address, if available
2. Agent for service If you have appointed an agent for service, provide the following information for the agent in each province or territory where you have an agent for service. The address of your agent for service must be the same as the address for service above. If your agent for service is a firm, also provide the name of your contact person.
Name for agent for service:
Contact person: Last name, First name
Item 8 - Proficiency
1. Course or examination information Complete Schedule E to indicate each course and examination that you have successfully completed or have been exempted from. Under "Other", include all post-secondary education, degrees and diplomas.
2. Student numbers If you have a student number for a course that was successfully completed with one of the following institutions, provide it below:
Canadian Securities Institute (CSI):
Investment Funds Institute of Canada (IFIC):
Institute of Canadian Bankers (ICB):
CFA Institute:
Advocis:

3. Exemption refusal Has any securities regulatory authority or self-regulatory organization refused to grant
you an exemption from a course, examination or experience requirement?
Yes
If "Yes", complete Schedule F.
Item 9 – Location of Employment Provide the following information for the location of the sponsoring firm at which you will be working. 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)
Branch Transit number/Cost Centre number, if applicable:
Business address:
(number, street, city, province, territory or state, country, postal code)
Telephone number() Fax number ()
[The following is for the paper version only]
Type of Location: Head Office Branch Sub-branch
Name of Branch Manager:
Effective date:
☐ 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, city, province, territory or state, country, postal code)

Item 10 - Current Employment and other Business Activities

On Schedule G, provide the information requested for each of your current business and employment activities, including those with your sponsoring firm and outside of your sponsoring firm. If you are applying for a type of registration that requires specific

experience, include details of that experience (for example, level of responsibility, value of accounts under direct supervision, number of years of that experience and research experience, as well as percentage of time spent on each activity).

Item 11 - Previous Employment

Item 12 – Resignations and Terminations

On Schedule H, provide complete employment history for the 10-year period before the date of this application.

•	_	been terminated or discharged by an employer for just cause for following allegations that you:
a) Violated a	ny statutes,	regulations, rules or standards of conduct?
Yes		No
If "Yes", cor	mplete Sche	dule I
b) Failed to s conduct?	supervise co	mpliance with any statutes, regulations, rules or standards of
Yes		No
If "Yes", cor	nplete Sche	dule I
c) Committee	d fraud or tl	ne wrongful taking of property, including theft?
Yes		No 🗌
If "Yes", cor	nplete Sche	dule I
Item 13 – R	egulatory I	visclosure
	ow, or have	authorities you ever been, registered or licensed with any securities e, territory, state or country to trade in or advise on securities or
Yes		No
Check he	re if the infe	ormation has been recorded on NRD under the NRD number you

are using to make this submission. Otherwise, complete Schedule J, section 1(a)

b) Have you ever been refused registration or a license to trade in or advise on securities or derivatives in any province, territory state or country?
Yes No
If "Yes", complete Schedule J, section 1(b)
c) Have you ever been denied the benefit of any exemption from registration provided by any securities regulator in any province, territory, state or country, other than what was disclosed in Item 8(3) of this form?
Yes No
If "Yes", complete Schedule J, section 1(c)
d) Are you now, or have you ever been subject to any disciplinary proceedings or any order resulting from disciplinary proceedings under any securities legislation or derivatives legislation in any province, territory, state or country?
Yes No No
If "Yes", complete Schedule J, section 1(d)
2. Self-regulatory organizations a) Are you now, or have you ever been, an approved person of a self-regulatory organization or similar organization in any province, territory, state or country?
Yes No
Check here if the information has been recorded on NRD under the NRD number you are using to make this submission. Otherwise, complete Schedule J, section 2(a).
b) Have you ever been refused becoming an approved person of a self-regulatory organization or similar organization in any province, territory, state or country?
Yes No
If "Yes", complete Schedule J, section 2(b).
c) Are you now, or have you ever been, subject to any disciplinary proceedings conducted by any self-regulatory organization or similar organization in any province, territory, state or country?
Yes No
If "Yes", complete Schedule J, section 2(c).

a) 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 in any province, territory, state or country (e.g. insurance, accountant, lawyer, teacher)?
Yes No
If "Yes", complete Schedule J, section 3(a)
b) Have you ever been refused registration or a license under any legislation relating to your professional qualifications unrelated to securities in any province, territory, state or country?
Yes No
If "Yes", complete Schedule J, section 3(b)
c) Are you now, or have you ever been a subject of any disciplinary actions conducted under any legislation relating to your professional qualifications unrelated to securities in any province, territory, state or country?
Yes No
If "Yes", complete Schedule J, section 3(c)

Item 14 – Criminal Disclosure

Offences under federal statutes such as the *Income Tax Act (Canada)*, the Competition 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 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 report crimes for which you received an absolute or conditional discharge provided that it has been purged from the criminal records in accordance with the *Criminal Records Act (Canada)*. Under such circumstances, the appropriate response would be "No". You are not required to disclose speeding, parking violations or 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".

If you do not tell us about an offence under any statute other than the *Young Offenders Act (Canada)* or the *Young Criminal Justice Act (Canada)*, we may treat it as a non-disclosure of material information.

With respect to questions (b) and (d) below, if you or your firm have been found guilty of an offence, or participated in the Alternative Measures Program, that offence must be reported even if an absolute or conditional discharge has been granted or the charge has been dismissed or withdrawn with respect to the offence. You are not required to disclose an offence for which you were found guilty if you participated in the Alternative Measures Program for the offence if your participation in the Alternative Measures program occurred more than three years ago.

a) Are there any outstanding or stayed charges against you alleging an offence that was committed in any province, territory, state or country?
Yes No No
If "Yes", complete Schedule K, section (a).
b) Have you ever been found guilty or pleaded no contest to, or were granted an absolute or conditional discharge from, any offence that was committed in any province, territory, state or country?
Yes No No
If "Yes", complete Schedule K, section (b).
c) To the best of your knowledge, are there any outstanding charges against any firm of which you were, at the time the offence was alleged to have taken place in any province, territory, state or country, a partner, director, officer or major shareholder?
Yes No No
If "Yes", complete Schedule K, section (c).
Check here if the firm is your sponsoring firm or a firm that is or was registered in a Canadian jurisdiction and identified in response to Item 13(1)(a) and/or recorded on NRD. Otherwise, complete Schedule K, section (c).
d) To the best of your knowledge, has any firm, when you were a partner, officer, director or major shareholder, ever been found guilty or pleaded no contest to, or was granted an absolute or conditional discharge from, an offence that was committed in any province, territory, state or country?
Yes No No
If "Yes", complete Schedule K, section (d).

☐ Check here if the firm is your sponsoring firm or a firm that is or was registered in a Canadian jurisdiction and identified in response to Item 13(1)(a) and/or recorded on NRD. Otherwise, complete Schedule K, section (d).		
Item 15 – Civil Disclosure a) Are there currently any outstanding civil actions alleging fraud, theft, deceit, misrepresentation, or similar misconduct against you or a firm where you are or were a partner, director, officer or major shareholder in any province, territory, state or country?		
Yes No No		
If "Yes", complete Schedule L, section (a).		
b) Have you or a firm where you are or were a partner, director, officer or major shareholder ever been a defendant or respondent in any civil proceeding in which fraud, theft, deceit, misrepresentation, or similar misconduct is, or was, successfully established in a judgement in any province, territory, state or country?		
Yes		
If "Yes", complete Schedule L, section (b).		
Item 16 – Financial Disclosure		
1. Bankruptcy Under the laws of any applicable jurisdictions, have you, or has any firm when you were a partner, director, officer or major shareholder of that firm:		
a) Had a petition in bankruptcy issued or made a voluntary assignment in bankruptcy?		
Yes No		
If "Yes", complete Schedule M, section 1(a)		
b) Made a proposal under any legislation relating to bankruptcy or insolvency?		
Yes No		
If "Yes", complete Schedule M, section 1(b)		

c) Been subject to proceedings under any legislation relating to the winding up, the dissolution or the companies' creditors arrangement?		
Yes No No		
If "Yes", complete Schedule M, section 1(c)		
d) Been subject to or initiated any proceedings, arrangement or compromise with creditors. This includes having a receiver, receiver-manager, administrator or trustee appointed by or at the request of creditors, privately, through court process or by order of a regulator, to hold your assets?		
Yes No		
If "Yes", complete Schedule M, section 1(d)		
2. Debt Obligations For the past ten years, have you failed to meet a financial obligation of \$5,000 or more as it came due, or to the best of your knowledge, has any firm, while you were a partner, director, officer or major shareholder of, failed to meet a financial obligation as it came due?		
Yes No No		
If "Yes", complete Schedule M, section 2.		
3. Surety bond or fidelity bond Have you ever been refused for a surety or fidelity bond?		
Yes No No		
If "Yes", complete Schedule M, section 3.		
4. Garnishments, unsatisfied judgements or directions to pay Has any federal, provincial, territorial or state authority ever issued any of the following against you or a firm where you are or were a partner, director, officer or major shareholder:		
Yes No		
Garnishment		
Unsatisfied judgement		
Direction to pay		

If "Yes", complete Schedule M, section 4.

Item 17 – Ownership of Securities Firms

Are you now, or have you ever been, a partner or major shareholder of any firm
(including your sponsoring firm) whose business is trading in or advising on securities or
derivatives?

Yes	No 🗌
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If "Yes", complete Schedule N

Agent for service

By submitting this form, you certify that in each Canadian jurisdiction where you have appointed an agent for service, you have completed the appointment of agent for service required in that jurisdiction.

Submission to jurisdiction

By submitting this form, you:

• are subject to the securities and/or derivatives legislation of each Canadian jurisdiction and you agree that you are subject to the by-laws, regulations, rules, rulings and policies (hereunder collectively referred to as "rules") of the self regulatory organizations (SROs) to which you have submitted this form, including 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 and/or derivatives legislation or as an Approved Person under those SRO rules.

Collection and use of personal information

Securities regulators require personal information about you as part of the review of your application for registration or approval, and if you are approved, to assess whether you continue to meet the registration requirements. This includes information that your sponsoring firm may disclose to the regulators concerning your conduct or alleged conduct.

This information is collected under the requirements set out in securities and/or derivatives legislation and SRO rules and will only be used to administer and enforce provisions of this legislation or SRO rules. In addition to personal information collected on this form, securities regulators may also need to collect personal information from other government organizations, law enforcement bodies, self regulatory bodies and private sector organizations. This information may include police records, regulatory records, credit records and other employment records.

By submitting this form, you consent to the collection and disclosure of your personal information (i) by securities regulators, (ii) by your sponsoring firm, in each case, for registration and other related regulatory purposes.

If you have any questions about the collection and use of your personal information, contact the securities regulator in the relevant jurisdiction. Please 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.qc.ca.

Self-Regulatory Organizations

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 self-regulatory organizations.

By submitting this application, you authorize the self-regulatory organizations to which this application is submitted to collect any information from any source whatsoever, including, but 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 nongovernmental regulatory authorities, securities commissions, stock exchanges, or other self-regulatory organizations, private bodies, agencies, individuals or corporations, as may be necessary for the self-regulatory organizations to complete their review of your application 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 self-regulatory organizations, securities commissions or stock exchanges to which you now, or may in the future, apply for 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 application, you certify that you are conversant with the rules of the applicable self-regulatory organizations 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 self-regulatory organizations 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 iurisdiction of the self-regulatory organizations to which you are applying for 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 application may be revoked, terminated or suspended at any time in accordance with the then applicable rules of the respective self-regulatory organizations. 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 self-regulatory organizations or any approved affiliated

company or other affiliate of such member without obtaining the approval of or registration with the self-regulatory organizations, in accordance with their rules.

By submitting this application, you undertake to notify the self-regulatory organizations to which you are applying for 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 application form, without amendment, to other self-regulatory organizations in the event that at some time in the future you apply to such other self-regulatory organizations for registration or approval.

You certify that you have discussed the questions in this application, 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 will be limited strictly to those permitted by the category of your registration or approval.

It is an offence under securities and/or derivatives legislation to provide false or misleading information on this form.

[Online version]	
Certification	
☐ I am making this submission as agent for the applic that the applicant provided me with all of the information	•
[Paper version]	
Signatures	
Applicant	
By signing below, you confirm that:	
• you have read and understand the questions in t	his form
• you understand that it is an offence under the se legislation to provide false or misleading inform	
• all of the information provided on this form is t	rue.
Signature of applicant	Date

Authorized partner or officer

By signing below, you confirm that:

- the applicant will be engaged by the sponsoring firm as a registered individual or a permitted individual
- you have discussed the questions set out in this form with the applicant and are satisfied that he or she fully understands the questions.

Name of firm	
Name of authorized signing officer	
Title of authorized signing officer	
Signature	Date signed (YYYY/MM/DD)

Schedule A Name

α		
Other	personal	names

Last Name	First Name	Second 1	Name (N/A)	Third Name (N/A)
Provide the reaso commonly used n			example, marriaş	ge, divorce, court order,
When did you use	this name?	From:	To:	
when did you us	tins name:	(YYYY/MM)	(YYYY/I	MM)
Last Name	First Name	Second 1	Name (N/A)	Third Name (N/A)
Provide the reaso commonly used n			example, marriaş	ge, divorce, court order,
X71 1: 1		E	T	
When did you use	e uns name?	From: (YYYY/MM)	To: (YYYY/I	MM)
Last Name	First Name	Second 1	Name (N/A 🔲)	Third Name (N/A L)
Provide the reaso commonly used n		,	example, marriag	ge, divorce, court order,
When did you use	e this name?	From: (YYYY/MM)	To: (YYYY/I	MM)

Business names Name:		
Provide the reason(s) for the use	e of this name (for e	example, trade name):
When did you use this name?	From: (YYYY/MM)	To: (YYYY/MM)
If the name is/was used in conneapprove the use of the name?	ection with your spo	onsoring firm, did the sponsoring firm
Name:		
Provide the reason(s) for the use	e of this name (for e	example, trade name):
When did you use this name?	From:	То:
Name:		
Provide the reason(s) for the use	e of this name (for e	example, trade name):
When did you use this name?	From:	То:
If the name is/was used in connapprove the use of the name?		onsoring firm, did the sponsoring firm

Schedule B Residential Address

A postal code (or ZIP code) and a tel address.	lephone number are r	not required for any previous	
Residential address:			
(number, street, city, province, territo	ory or state, country)		
When did you live at this address?	From: (YYYY/MM)	To: (YYYY/MM)	
Residential address:			
(number, street, city, province, territo	ory or state, country)		
When did you live at this address?	From: (YYYY/MM)	To: (YYYY/MM)	
Residential address:			
(number, street, city, province, territo	ory or state, country)		
When did you live at this address?	From: (YYYY/MM)	To: (YYYY/MM)	

Schedule C Individual Categories

Item 6

Categories

Indicate, by checking the appropriate box, each category for which you are applying.

Firm Categories Common to all Jurisdictions

Under which firm category(ies) are you applying?
□ Investment Dealer
□ Mutual Fund Dealer
□ Scholarship Plan Dealer
□ Exempt Market Dealer
□ Restricted Dealer
□ Portfolio Manager
□ Restricted Portfolio Manager
□ Investment Fund Manager
Registration Categories and Permitted Activities
□ Dealing Representative
□ Advising Representative
☐ Associate Advising Representative
□ Ultimate Designated Person
□ Chief Compliance Officer
□ Officer
□ Director
□ Partner
□ Shareholder
□ Branch Manager (MFDA members only)
□ Supervisor (IDA members only)

Firm Categories Unique to Ontario
Under which firm category(ies) are you applying?
□ Commodity Trading Adviser
☐ Commodity Trading Counsel
☐ Commodity Trading Manager
☐ Futures Commission Merchant
Registration Categories and Permitted Activities
□ Advising Representative
□ Salesperson
☐ Branch Manager
□ Officer
□ Director
□ Partner
□ Shareholder
□ Supervisor (IDA members only)
Firm Categories Unique to Manitoba
Under which firm category(ies) are you applying?
☐ Dealer (Merchant)
☐ Dealer (Futures Commission Merchant)
☐ Dealer (Floor Broker)
□ Adviser
Registration Categories and Permitted Activities
□ Floor Trader
□ Floor Broker
□ Salesperson
□ Branch Manager
□ Adviser
□ Officer
□ Director
□ Partner
□ Supervisor (IDA members only)

<u>Investment Dealers Association of Canada – Additional Information</u>

Approval Categories
□ Executive
□ Director (Non-Industry)
□ Supervisor
□ Investor
□ Registered Representative
□ Investment Representative
□ Trader
Designated Persons
□ Chief Compliance Officer
□ Chief Financial Officer
☐ Ultimate Designated Person
☐ Designated Registered Options Principal
☐ Designated Registered Futures Options Principal
Trading Activity
□ Non-Trading
□ Equities
□ Options
□ Futures
□ Mutual Funds only
□ Portfolio Management
□ Portfolio Management (Supervised)
Account Type
□ Retail
□ Non-Retail
□ Not Applicable

Schedule D Address and Agent for Service

Item 7

1. Address for service

You must have one address for service in each province or territory in which you are now, or are applying to become, a 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:
2. Agent for service If you have appointed an agent for service, provide the following information for 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:
Last name, First name

Schedule E Proficiency

Item 8
Course or examination date (YYYY/DD/MM) completed
Date (YYYY/DD/MM) exempted and by which jurisdiction or regulator
Other

Schedule F Proficiency

Item 8

Exemption refusal

Complete the following for each exemption that was refused.

Which securities regulatory authority or self-regulatory organization 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)

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)

State the name of the course, examination or experience requirement:

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 and Other Business Activities

Item 10
☐ Full-time student ☐ Employed or self-employed
From: (YYYY/MM/DD)
You are only required to fill in the following if you have indicated above that you are employed or self-employed.
Current employment information Check here if your employment is with your sponsoring firm. If not, you are required to provide the firm name and address information for your current employer:
Name of business or employer:
Address of business or employer:
(number, street, city, province, territory or state, country)
Name and title of your immediate supervisor:
For your <u>sponsoring firm</u> , include a description of the duties you currently perform and intend to perform.
Describe all <u>other employment or business activities related to this employer or business</u> , whether or not the activities are related to investments. Include the nature of the business, your duties, start date, title or relationship with the business (including director or officer positions).
-

Indicate the number of hours per week you will be devoting to this business or employment.
☐ Check here if you are working more than 30 hours per week for the sponsoring firm. Otherwise, explain why you are working less than 30 hours per week for the sponsoring firm.
Disclose any potential for confusion by clients and any potential for conflicts of interest arising from your proposed activities as a registrant with affiliated or unaffiliated sponsoring firm(s) and with the other business described above (include whether the other business is listed on an exchange). Confirm whether the firm has procedures for minimizing potential conflicts of interest and confirm that you are aware of these procedures.

Schedule H Previous Employment

Item 11

Provide the information requested for your previous business and employment activities for the 10-year period before the date of this application. Account for all time including full and part-time employment, self-employment, military service and homemaking. Include statuses such as unemployed, full-time education, extended travel, or other similar statuses. (Please do not include short-term employment (four months or less) while a student unless it was in the securities industry.)

In addition, provide the information requested for all of your securities or derivatives (including exchange contracts and options) business and employment activities during and prior to the ten-year period.

Unemployed

Full-time student

Employed or self-employed

From: (YYYY/MM)

To: (YYYY/MM)

You are only required to fill in the following if you have indicated above that you are, or were, employed or self-employed.

Name of business or employer:

Address of business or employer:

city, province, territory or state, country

Name and title of immediate supervisor, if applicable.

Describe the firm's business, your position, duties and your relationship to the firm. If you are applying for a type of registration that requires specific experience, include details of that experience (for example, level of responsibility, value of accounts under direct supervision, number of year of that experience and research experience, as well as percentage of time spent on each activity):
Reason why you left the firm:

Schedule I Resignations and Terminations

a) For each allegation of violation of any statutes, regulations, rules or standards of conduct, indicate below, (1) the name of the firm from which you resigned, were terminated or discharged for just cause for dismissal, (2) whether you resigned, were terminated or discharged for just cause for dismissal, (3) the date you resigned, were terminated or discharged for just cause for dismissal, and (4) the circumstances relating t your resignation, termination or discharge for just cause for dismissal.
b) For each allegation of failure to supervise compliance with any statutes, regulations, rules or standards of conduct, indicate below, (1) the name of the firm from which you resigned, were terminated or discharged for just cause for dismissal, (2) whether you resigned, were terminated or discharged for just cause for dismissal, (3) the date you resigned, were terminated or discharged for just cause for dismissal, and (4) the circumstances relating to your resignation, termination or discharge for just cause for dismissal.
c) For each allegation of fraud or the wrongful taking of property, including theft, indicate below, (1) the name of the firm from which you resigned, were terminated or discharged for just cause for dismissal, (2) whether you resigned, were terminated or discharged for just cause for dismissal, (3) the date you resigned, were terminated or discharged for just cause for dismissal, and (4) the circumstances relating to your resignation, termination or discharge for just cause for dismissal.

Schedule J Regulatory Disclosure

1. Securities regulatory authorities a) For each registration or license, indicate below (1) the name of the firm, (2) the securities regulatory authority with which you are, or were, registered or licensed, (3) the type or category of registration or license, and (4) the dates between which you held the registration or license.
b) For each registration or license refused, indicate below (1) the name of the firm, (2) the securities regulatory authority that refused the registration or license, (3) the type or category of registration or license refused, (4) the date of the refusal, and (5) the reasons for the refusal.
c) For each exemption from registration denied or license refused, <i>other than what was disclosed in Item 8(3) of this form</i> , indicate below (1) the party that was refused the registration or license, (2) the securities regulatory authority that refused the registration or license, (3) the type or category or registration or license refused, (4) the date of the refusal, and (5) the reasons for the refusal.
d) For each order or disciplinary proceeding, indicate below (1) the name of the firm, (2) the securities regulatory authority that issued the order or is conducting or conducted the proceeding, (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 relevant details.

2. Self-regulatory organizations a) For each approval, indicate below (1) the name of the firm, (2) the self-regulatory organization which you are or were an approved person, (3) the categories of approval, and (4) the dates you held the approval.				
b) For each approval refused, indicate below (1) the name of the firm, (2) the self-regulatory organization that refused the approval, (3) the category of approval 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 name of the firm, (2) the self-regulatory organization that issued the order or that is, or was, conducting the proceeding, (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 is requested by the regulator.				
3. Non-securities regulation a) For each registration or license, indicate below (1) the party who is, or was, registered or licensed (if insurance licensed, also indicate the name of the insurance agency), (2) with which regulatory authority, or under what legislation, the party is, or was, registered or licensed, (3) the type or category of registration or license, and (4) the dates between which the party held the registration or license.				
b) For each registration or license refused, indicate 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 license was refused, (3) the type or category of registration or license 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 is requested by the regulator.

Schedule K Criminal Disclosure

Criminal offences a) For each charge, indicate below (1) the type of charge, (2) the date of the charge, (3) any trial or appeal dates, and (4) the court location.
b) For each finding of guilty, pleading no contest to, or granting of an absolute or conditional discharge indicate below (1) the offence, (2) the date found guilty, and (3) the disposition (state any penalty or fine and the date any fine was paid).
c) For each charge, indicate 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.
d) For each conviction, indicate below (1) the name of the firm, (2) the offence, (3) the date of the conviction, and (4) the disposition (state any penalty or fine and the date any fine was paid).

Schedule L Civil disclosure

a) For each current and outstanding civil proceeding, state below (1) the dates the statement of claim and statement of defence were issued, (2) each plaintiff in the proceeding, (3) whether the proceeding is pending or on appeal, (4) whether the civil 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) the jurisdiction where the action is being pursued.
b) 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 civil 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. (Disclosure must include those actions settled without admission of liability.)

Schedule M Financial Disclosure

1. Bankruptcy a) For each event, indicate below (1) the date of the petition or voluntary assignment, (2) the person or firm about whom this disclosure is being made, (3) any amounts currently owing, (4) the creditors, (5) the status of the matter, (6) a summary of any disposition or settlement, (7) date of discharge or release, if applicable, and (8) any other information that you think is relevant or that is requested by the regulator.
b) For each event, indicate below (1) the date of the proposal, (2) the person or firm abou whom this disclosure is being made, (3) any amounts currently owing, (4) the creditors, (5) the status of the matter, (6) a summary of any disposition or settlement, and (7) any other information that you think is relevant or that is requested by the regulator.
c) For each event, indicate below (1) the date of the proceeding, (2) the person or firm about whom this disclosure is being made, (3) the status of the matter, (4) a summary of any disposition or settlement, and (5) any other information that you think is relevant or that is requested by the regulator.
d) For each proceeding, arrangement or compromise with creditors, indicate below (1) the date of proceeding, (2) the person or firm about whom this disclosure is being made, (3) the status of the matter, (4) a summary of any disposition or settlement, and (5) any other information that you think is relevant or that is requested by the regulator.

2. Debt Obligation For each event, indicate below (1) the person or firm that failed to obligation, (2) the amount that was owing at the time the person or financial obligation, (3) the person or firm to whom the amount is, relevant dates (for example, when payments are due or when final (5) any amounts currently owing, and (6) any other information that or that is requested by the regulator.	firm failed to meet its or was, owing, (4) any payment was made),
3. Surety Bond or Fidelity Bond For each bond refused, indicate below (1) the name of the bonding address of the bonding company, (3) the date of the refusal, and (4 refusal.	
4. Garnishments, Unsatisfied Judgements or Directions to Pay For each garnishment, unsatisfied judgement or direction to pay, ir amount that was owing at the time the garnishment, judgement or rendered, (2) the person or firm to whom the amount is, or was, ow dates (for example, when payments are due or when final payment percentage of earnings to be garnished or the amount to be paid, (5 currently owing, and (6) any other information that you think is related by the regulator.	direction to pay was ving, (3) any relevant was made), (4) the b) any amounts

Schedule N Ownership of Securities Firms

Indicate below (a) the name of the firm and (b) your relationship to the firm.
a) Firm name:
b) Relationship to the firm and period of relationship: Partner From: / To: / (if applicable)
(YYYY/MM) (YYYY/MM)
☐ Major Shareholder (as defined in Item 13 of this form) From: / To: / (if applicable)
(YYYY/MM) (YYYY/MM)
If you are a partner or major shareholder of the firm, provide the following information:
a) State the number, value, class and percentage of securities or the amount of partnership interest you own or propose to acquire upon approval. If acquiring shares upon approval, state source (for example, treasury shares, or if upon transfer, state name of transferor).
b) State the value (approximate, if necessary) 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 (<i>if applicable</i>):
c) If another person or firm has provided you with funds to invest in the firm, identify the person or firm and state the relationship between you and that person or firm:
d) Are the funds to be invested (or proposed to be invested) guaranteed directly or indirectly by any person or firm?
Yes No
If "Yes", identify the person or firm and state the relationship between you and that person or firm:
e) Have you either directly or indirectly given up any rights with respect to such securities or partnership interest, or do you, on approval of this application, intend to give

up any such rights (including by hypothecation, pledging or depositing as collateral the securities or partnership interest with any institution or person?					
Yes	No 🗌				
If "Yes", identify 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 the beneficial owner of the shares, bonds, debentures, partnership units or other notes held by you?					
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, province, territory or state, country, postal code)					
i) Occupation:			-		

Schedule O

Who to contact if you have questions about the collection and use of your personal information.

Contact Information

Alberta

Alberta Securities Commission, 4th Floor, 300 B 5th Avenue S.W. Calgary, AB T2P 3C4

Attention: Information Officer Telephone: (403) 297-6454

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 (in BC)

Manitoba

The Manitoba Securities Commission 500 – 400 St. Mary Avenue Winnipeg, MB R3C 4K5 Attention: Director – Legal Telephone: (204) 945-0605

New Brunswick

New Brunswick Securities Commission Suite 300, 85 Charlotte Street Saint John, NB E2L 2J2

Attention: Director, Market Regulation

Telephone: (506) 658-3021

Newfoundland and Labrador

Securities Commission of Newfoundland and Labrador P.O. Box 8700, 2nd Floor, West Block Confederation Building St. John's, NF A1B 4J6 Attention: Director of Securities

Tel: (709) 729-4189

Nova Scotia

Nova Scotia Securities Commission 2nd Floor, Joseph Howe Building 1690 Hollis Street P.O. Box 458 Halifax, NS B3J 3J9

Attention: FOI Officer Telephone: (902) 424-7768

Northwest Territories

Government of the Northwest Territories

P.O. Box 1320

Yellowknife, NWT X1A 2L9

Attention: Deputy Registrar of Securities

Telephone: (867) 920-8984

Nunavut

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

Attention: Deputy Registrar of Securities

Telephone: (867) 975-6190

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) 368-4569

Québec

Autorité des marchés financiers Stock Exchange Tower P.O. Box 246, 22nd Floor 800 Victoria Square Montréal, PQ 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 800 B1920 Broad Street Regina, SK S4P 3V7 Attention: Director

Telephone: (306) 787-5842

Yukon

Department of Community Services Yukon P.O. Box 2703 Whitehorse, YU Y1A 2C6 Attention: Registrar of Securities

Telephone: (867) 667-5225