

SECURITIES COMMISSION OF THE BAHAMAS

Poinciana House North Building 2nd Floor, 31A East Bay Street P.O. Box N-8347 Nassau, Bahamas Tel: (242) 397-4100 Fax: (242) 356-7530 E-mail: info@scb.gov.bs Website: www.scb.gov.bs

INVESTMENT FUNDS REGULATIONS 2020

Application for Approval as CEO, Compliance Officer or MLRO Regulation 65, 67 and 70

General Instructions: Please complete all relevant sections; where the allocated space is insufficient, you may continue on a separate page and attach to the completed form. All supporting information and attached pages should be appropriately numbered and referenced in the form with the reference index also attached.

Completed applications should be submitted to:

The Supervision Department Securities Commission of The Bahamas Poinciana House 31A East Bay Street North Building, 2nd Floor P.O. Box N-8347 Nassau, Bahamas

WARNING Intentional misstatement or failure to disclose information may constitute an offence.

Section A – Personal Details					
1.	Name of Investment Fund Administrator	Full legal name			
2.	Name of Applicant	Full legal name of Applicant - (Surname, First, Middle)			
3.	Previous Names	List any previous names of the Applicant – (Surname, First, Middle)			
4.	Job Title	A clear and specific written designation or title of the post to which the application relates			
5.	Type of Registration Application	(Indicate role(s) for which approval is sought):			
		Chief Executive Officer :			
		Compliance Officer:			
		Money Laundering Reporting Officer:			

PROPERTY OF THE SECURITIES COMMISSION



6.	Previous Registration	(Indicate if this is an application for reinstatement of a previous registration – If yes, provide full details)				
		Yes:		No:		
		Details:		1		
7.	Home	Provide current home address:				
1.	Address					
		Street Address 1:		Country:		
		Street Address 2:		Telephone: ()		
		P.O. Box Number:		Fax:		
		State::		Email Address:		
8.	Previous Home	Provide all previous home addresses during the last ten years – with relevant dates				
	Address	Previous Address 1		Previous Address 2		
		Street Address 1:		Street Address 1:		
		Street Address 2:		Street Address 2:		
		P.O. Box Number:		P.O. Box Number:		
		State:		State:		
		Country:		Country:		
		Dates at this Address:		Dates at this Address:		
		Previous Address 3		Previous Address 4		
		Street Address 1:		Street Address 1:		
		Street Address 2:		Street Address 2:		
		P.O. Box Number:		P.O. Box Number:		
		State:		State:		
		Country:		Country:		



	Dates at this Address:	Dates at this Address:			
9. Date and Place of					
Birth:	Place of Birth:(Including town, state and country)				
10. Citizenship:	Bahamas:	Other:			
11. Identification:	Please provide identification information (Passport, Voters Registration, National Identification, Social Security, Tax Identification or Other and number)				
	Туре:	Number:			
Section B - Employ	yment and Education				
12. Present Occupation or		ent employer, nature of business, title of position and			
Employment	relevant date)				
& Reference	Name of Employer:				
	Address of Employer:				
	Street Address 2:				
	P.O. Box Number: State:				
	Country:				
	Nature of Business:				
	Title of Position Held:				
	Relevant Start Date: Reference (Provide the name, position, telephone number of a reference)				
	Name:				
	Position:				
	Telephone: ()				
13. Prior Occupation or Employment & Reference	(Indicate names and addresses of prior employer/s, nature of business, title of position and relevant date within the last ten years)				
	Name of Previous Employer:	Name of Previous Employer:			
	Address of Previous Employer:	Address of Previous Employer:			



	Street Address 2:	Stre	et Address 2:		
	P.O. Box Number:	P.O	. Box Number	n	
	State:	Stat	e:		
	Country:	Cou	intry:		
	Telephone:	Tele	ephone:		
	Fax:	Fax	:		
	Title of Position Held:	Title	e of Position H	leld:	
	Relevant Dates:	Rele	evant Dates:		
	(Provide the name, position, telephone number	of a refe	rence)		
	Name :				
	Position:				
	Telephone: ()				
	Telephone: ()				
14. Current Associations	Telephone: () List Companies that Applicant is (a)presently th been the Director/Significant Security Holder: (S business in each case)				
	List Companies that Applicant is (a)presently th been the Director/Significant Security Holder: (S	Specify th	ne name, the c	country of occupation and nature of rector/Significant	
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16. Other Professional	Do you have any other professional qualifications'	? - e.(ı g. lawyer, accou	Int, etc. <i>(If yes,</i>)	provide full details)
Qualification	Lawyer:	Ye	es □	No	
	Accountant:	Ye	es 🗆	No	
	Other:	Ye	es 🗆	No	
	Details:				
17. Previous Positions	Are you or have you ever been a director, officer, registered with the Commission? (If yes, please place)	been a director, officer, security holder, or employee of any other entity ssion? (If yes, please provide full details.)			
	Director:	Ye	es 🗆	No	
	Officer:	Ye	s 🗆	No	
	Security Holder:	Ye	es 🗆	No	
	Employee:	Ye	s □	No	



	Details:				
18. Previous Registration	Have you ever been licensed as a registered representative or similar capacity in any other jurisdiction? (If yes, please provide full details including copy of evidence of such registration)				
	Yes 🗆 No 🗆				
	Details:				
Section C – Discip	line History				
19. Have you or any person with which you were associated as a director, security holder, manager, officer or significant security holder in any jurisdiction ever been disciplined by any stock exchange, securities regulatory body or professional association, or been denied admission, registration or renewal or had a membership or registration? <i>(If yes, provide full details)</i>					
Yes 🗆	No 🗆				
Details:					



manager of bankrupt, b	ficer or s een convie	ignificant cted of a c	which you were associated as a director, security holder, security holder, in any jurisdiction ever been declared crime, or sued under any commercial law, securities law, ? (If yes provide full details)
Yes		No	
Details:			
			nvolved with an application for regulatory approval in any ion has been refused or withdrawn? (If yes, provide full
Yes		No	
Details:			
			, been dismissed from any office or employment or barred occupation? (<i>If yes, provide full details)</i>
Yes		No	
Details:			



23. Has any person with which you were associated as a director, manager, officer or security holder in any jurisdiction, been compulsorily wound up or made any arrangement with its creditors or ceased trading in circumstances where its creditors did not receive or have not yet received full settlement of their claims, either while you were associated with it or within one year after ceased to be associated with it? (<i>If yes, provide full details</i>)					
Yes 🗆	No				
Details:					
24. In carrying ou person? <i>(If yes,</i>)	•	•	g on the directions or instructions of any other		
Yes 🗆	No				
ATTESTATON "I, the undersigned, hereby affirm that to the best of my information, knowledge and belief, the contents of this form and any attachments provided with this form are true, correct and not misleading and that I am in compliance with all the applicable provisions of the Act. I undertake that, as long as I continue to be the Chief Executive Officer, Compliance Officer or Money Laundering Reporting Officer of the Investment Fund Administrator, I will					
 continue to comply with all the applicable provisions of the Act, and notify the Commission immediately of any material changes affecting the accuracy or completeness of the answers to any of the questions above. 					
"I also hereby authorize the Commission to make such enquiries and seek such further information as it thinks appropriate in verifying the information given in this Application, or in any other documents submitted as part of this application, for the purposes of performing its due diligence and background checks. I understand that the results of these checks may be disclosed to the person who submitted this application."					
Date:	_	_	Signature:		



Sponsoring Investment Fund Administrator				
Provide intended date of employment of this Applicant: (DD/MM/YY)				
Notice: The Investment Fund Administrator is required to give immediate notice to the Commission if the Applicant does not commence employment with the Investment Fund Administrator on the date noted above.				
Authorization from Senior Officer	or Director of Investment Fund Administrator			
PRINT NAME	TITLE			
SIGNATURE	DATE			
	DECLARATION			
I,	, hereby declare the following:			
I am aware that should I knowingly or intentionally supply false or misleading information herein, I may be liable to prosecution.				
	SIGNATURE			
	DATE			
I certify that the above statement was taken by me and that the deponent has acknowledged that he/she knows and understands the content of this statement. This statement was signed in my presence at:				
on this day o	of (mm/yy)			
 J	lustice of the Peace/Notary Public			



Other documents to be attached to the Application:

- 1. A copy of Work Permit or Permanent Residence Permit with the right to work (for non-Bahamian citizens);
- 2. A copy of the relevant pages of the applicant's passport (to include name, date of birth, nationality, signature, expiration date and photograph);
- 3. Applicant's current Police Certificate (not more than three months old) or an affidavit in the acceptable form, if the Police Certificate is not available;
- 4. Copy of any relevant degree, educational or professional course(s) passed;
- 5. Original financial reference letter (dated within three months of receipt of the application);
- 6. Copy of Curriculum Vitae;
- 7. A current job description duly signed and dated by the applicant and other authorized personnel, detailing the duties and responsibilities attached to the position to which the applicant is to be appointed. Evidence of Board approval of the appointment which may include Board minute/resolution or secretary's certificate is also to be provided;
- 8. An application fee must be submitted with this application. The appropriate fee can be found in the Investment Funds (Fee) Rules, 2020.