

REGISTRATION FORM - INDIVIDUALS

Include instructions for completion.

Definition of Terms

Is this an: Initial Application Amendment

GENERAL INFORMATION

NRD No.:

- | | |
|-----|---|
| 1. | Last Name, First, Second and Third Names |
| (a) | Legal Names (if different from above) |
| (b) | Have you had a name change? <input type="checkbox"/> Yes <input type="checkbox"/> No
If "yes", complete Schedule "D", Section I - <i>Other Names(s) Previously Used.</i> |
| (c) | Home Address
(number, street, city, province/territory, postal code) |
| (d) | Mailing Address (if different than above)
(number, street, city, province/territory, postal code) |
| (e) | Area Code + Telephone Number |
| (f) | Social Insurance Number |

Personal Information

- | | |
|-----|---|
| 2. | Date of Birth
(Day, Month, Year) |
| (a) | Place of Birth
(City, Province, Country) |
| (b) | Sex |
| (c) | Height |
| (d) | Weight |
| (e) | Colour of Eyes |
| (f) | Colour of Hair |
| (g) | Photograph of Individual held at firm? <input type="checkbox"/> Yes <input type="checkbox"/> No
If "no", explain why |

Citizenship Information

- | | |
|----|---|
| 3. | What is your Citizenship?
<input type="checkbox"/> Canadian
<input type="checkbox"/> Other (specify): |
|----|---|

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(a) If not a Canadian citizen, complete the following information:
 Are you a permanent resident? **9** Yes **9** No

Number of years of continuous residency in Canada? _____ year(s)

(b) Please provide the following Passport information:

Passport Number:

Country:

Date of Issue:..... Place of Issuance:

(Day, Month, Year)

RESIDENTIAL INFORMATION

4. Please provide all residential addresses for the past 10 years.

Present Address _____ From _____ To _____
(number, street, city, province/territory/state, postal code/zip code, country)

Previous Address _____ From _____ To _____
(number, street, city, province/territory/state, postal code/zip code, country)

Previous Address _____ From _____ To _____
(number, street, city, province/territory/state, postal code/zip code, country)

Previous Address _____ From _____ To _____
(number, street, city, province/territory/state, postal code/zip code, country)

Previous Address _____ From _____ To _____
(number, street, city, province/territory/state, postal code/zip code, country)

Previous Address _____ From _____ To _____
(number, street, city, province/territory/state, postal code/zip code, country)

EDUCATION

5. Please complete the following information:

	<i>Name of last school attended in each level</i>	<i>Degree or Diploma</i>	<i>Date Obtained</i>
<i>Instruction</i>			
High School or Secondary Level			
Post-Secondary, College or University			
Professional Education			
Other (specify):			

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EMPLOYMENT

Provide details of the dealer you are currently employed.

6.	Legal Name of Current Dealer:	NRD # of Dealer:
7.	The location from which I work is the: <input type="checkbox"/> Head Office Location <input type="checkbox"/> Branch Location; or <input type="checkbox"/> Sub-Branch Location	
	The address for the location from which I work is as follows:	
(a)	Business Address (number, street, city, province/territory, postal code)	
(b)	Mailing Address (if different than above) (number, street, city, province/territory, postal code)	
(c)	Website Address (if applicable to business)	
(d)	e-mail Address	
(e)	Area Code + Telephone Number	
(f)	Fax Number	
8.	Date employment commenced with the Dealer noted in Item #6 above. <div style="text-align: right;">(MM/DD/YYYY)</div>	
9.	Present position in the firm: <input type="checkbox"/> Sales Representative <input type="checkbox"/> Manager <input type="checkbox"/> Compliance Officer <input type="checkbox"/> Partner <input type="checkbox"/> Director <input type="checkbox"/> Adviser <input type="checkbox"/> Other (specify):	

SPOUSAL INFORMATION

10.	Name of Spouse: Name of Spouse's Employer: Position Held:
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PROFICIENCY REQUIREMENTS

11. Please note which courses have been successfully completed or received exemption:

			Date Completed MM/DD/YYYY	Exempt		Date Exempted and by Which Jurisdiction
Courses	Completed					
ACE Traders Exam	9 Yes	9 No	.....	9 Yes	9 No	.....
Branch Managers' Examination (IFIC)	9 Yes	9 No	.....	9 Yes	9 No	.....
Branch Managers' Qualifying Exam (CSI)	9 Yes	9 No	.....	9 Yes	9 No	.....
Canadian Commodity Futures Exam (CSI)	9 Yes	9 No	.....	9 Yes	9 No	.....
Canadian Commodity Supervisors Exam (CSI)	9 Yes	9 No	.....	9 Yes	9 No	.....
Canadian Futures Exam Program (CSI), Part I	9 Yes	9 No	.....	9 Yes	9 No	.....
Canadian Futures Exam Program (CSI), Part II	9 Yes	9 No	.....	9 Yes	9 No	.....
Canadian Investment Funds Course (IFIC)	9 Yes	9 No	.....	9 Yes	9 No	.....
Canadian Investment Finance Course (CSI)						
Part I	9 Yes	9 No	.....	9 Yes	9 No	.....
Part II	9 Yes	9 No	.....	9 Yes	9 No	.....
Canadian Investment Management (CSI)(Course 2)						
Part I	9 Yes	9 No	.....	9 Yes	9 No	.....
Part II	9 Yes	9 No	.....	9 Yes	9 No	.....
Canadian Option Course (CSI)	9 Yes	9 No	.....	9 Yes	9 No	.....
Canadian Operations Course	9 Yes	9 No	.....	9 Yes	9 No	.....
Canadian Securities Course (CSI)	9 Yes	9 No	.....	9 Yes	9 No	.....
CATS Exam – Oral, Written	9 Yes	9 No	.....	9 Yes	9 No	.....
Chartered Financial Analysts Course (AIMR) (1 st yr)	9 Yes	9 No	.....	9 Yes	9 No	.....
Chartered Financial Analysts Course (AIMR) (2 nd yr)	9 Yes	9 No	.....	9 Yes	9 No	.....
Chartered Financial Analysts Course (AIMR)(completed)	9 Yes	9 No	.....	9 Yes	9 No	.....
Conduct and Practices Handbook Exam (CSI)	9 Yes	9 No	.....	9 Yes	9 No	.....
Derivatives Fundamentals Course (CSI)	9 Yes	9 No	.....	9 Yes	9 No	.....
Effective Management in the Securities Industry (CSI)	9 Yes	9 No	.....	9 Yes	9 No	.....
Examination based on Manual for Registered Reps (CSI)	9 Yes	9 No	.....	9 Yes	9 No	.....
Fundamentals of Portfolio Management Course (CSI)	9 Yes	9 No	.....	9 Yes	9 No	.....
Futures Licensing Course (CSI)	9 Yes	9 No	.....	9 Yes	9 No	.....
Investment Funds in Canada Course (ICB)	9 Yes	9 No	.....	9 Yes	9 No	.....
Investment Management Techniques Course (CSI)	9 Yes	9 No	.....	9 Yes	9 No	.....
National Commodities Futures Examination (CSI)	9 Yes	9 No	.....	9 Yes	9 No	.....
New Entrants Exam (CSI)	9 Yes	9 No	.....	9 Yes	9 No	.....
Officers' Partners' or Directors' Examination (IFIC)	9 Yes	9 No	.....	9 Yes	9 No	.....
Options Licensing Course (CSI)	9 Yes	9 No	.....	9 Yes	9 No	.....
Options Supervisory Course	9 Yes	9 No	.....	9 Yes	9 No	.....
Partners, Directors and Senior Officers Qualifying Exam	9 Yes	9 No	.....	9 Yes	9 No	.....
Portfolio Management Technique	9 Yes	9 No	.....	9 Yes	9 No	.....
Principals of Mutual Fund Investments	9 Yes	9 No	.....	9 Yes	9 No	.....
Professional Financial Planning Course (CSI)	9 Yes	9 No	.....	9 Yes	9 No	.....
Qualifying Examination for Registered Options Principal	9 Yes	9 No	.....	9 Yes	9 No	.....
Real Estate Pre-Licensing Course (UBC)	9 Yes	9 No	.....	9 Yes	9 No	.....
Registered Options Principals Exam Program (CSI)	9 Yes	9 No	.....	9 Yes	9 No	.....
Technical Analysis Course	9 Yes	9 No	.....	9 Yes	9 No	.....
Traders Training Course (CSI)	9 Yes	9 No	.....	9 Yes	9 No	.....
VCT Examination	9 Yes	9 No	.....	9 Yes	9 No	.....
Wealth Management Techniques Course (CSI)	9 Yes	9 No	9 Yes	9 No
Other (Specify)	9 Yes	9 No	9 Yes	9 No

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12. Proof of passing course(s) as indicated above is held at the firm? **9** Yes **9** No

If "no", why not?

13. Please indicate student number if applicable:

IFIC Student # _____

CSI Student # _____

AIMR Student # _____

ICB Student # _____

Other Student # (please specify): _____

14. Has any Securities Regulator or SRO refused you an exemption for a proficiency course(s)? **9**Yes **9**No

If "yes", state which regulator refused to grant the exemption, the name of the course and the reason for not granting the exemption.

EMPLOYMENT HISTORY

15. The following information constitutes full disclosure of your business activities, including any periods of self-employment and unemployment, for 10 years immediately prior to the date of this application, excluding any summer employment while a full time student, but including all securities or commodities industry employment during and *prior to the ten-year period.*

Name & Address of Employer	Name & Title of Immediate Supervisor	Nature of Employment & Duties of Applicant	Reasons for Leaving	From Month/Year	To Month/Year
<i>Present:</i>					
<i>Previous:</i>					

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SECURITIES REGULATORS AND SELF REGULATORY ORGANIZATIONS

16. Indicate by checking the appropriate box(es) each Self Regulatory Organization (SRO), Exchange and/or Securities Commission in which the applicant: (1) is currently registered/member; and/or (2) is applying for registration/membership.

Currently Registered/a Member	Applying for Registration/Membership
<ul style="list-style-type: none"> <input type="checkbox"/> British Columbia Securities Commission <input type="checkbox"/> Alberta Securities Commission <input type="checkbox"/> Saskatchewan Securities Commission <input type="checkbox"/> Manitoba Securities Commission <input type="checkbox"/> Ontario Securities Commission <input type="checkbox"/> Commission des valeurs mobilières du Québec <input type="checkbox"/> New Brunswick Office of the Administrator <input type="checkbox"/> Nova Scotia Securities Commission <input type="checkbox"/> Prince Edward Island Registrar of Securities <input type="checkbox"/> Newfoundland Securities Division <input type="checkbox"/> Northwest Territories Securities Registries <input type="checkbox"/> Yukon Territory Registrar of Securities <input type="checkbox"/> Nunavut <input type="checkbox"/> Investment Dealers Association of Canada <input type="checkbox"/> Mutual Fund Dealers Association <input type="checkbox"/> Canadian Venture Exchange (CNDX) <input type="checkbox"/> Montreal Exchange <input type="checkbox"/> Toronto Stock Exchange <input type="checkbox"/> Toronto Futures Exchange <input type="checkbox"/> Winnipeg Commodity Exchange 	<ul style="list-style-type: none"> <input type="checkbox"/> British Columbia Securities Commission <input type="checkbox"/> Alberta Securities Commission <input type="checkbox"/> Saskatchewan Securities Commission <input type="checkbox"/> Manitoba Securities Commission <input type="checkbox"/> Ontario Securities Commission <input type="checkbox"/> Commission des valeurs mobilières du Québec <input type="checkbox"/> New Brunswick Office of the Administrator <input type="checkbox"/> Nova Scotia Securities Commission <input type="checkbox"/> Prince Edward Island Registrar of Securities <input type="checkbox"/> Newfoundland Securities Division <input type="checkbox"/> Northwest Territories Securities Registries <input type="checkbox"/> Yukon Territory Registrar of Securities <input type="checkbox"/> Nunavut <input type="checkbox"/> Investment Dealers Association of Canada <input type="checkbox"/> Mutual Fund Dealers Association <input type="checkbox"/> Canadian Venture Exchange (CNDX) <input type="checkbox"/> Montreal Exchange <input type="checkbox"/> Toronto Stock Exchange <input type="checkbox"/> Toronto Futures Exchange <input type="checkbox"/> Winnipeg Commodity Exchange

17. Indicate by checking the appropriate box(es) each Self Regulatory Organization (SRO,) Securities Commission and/or Other Regulator in which the applicant is a member/registered (other than included in Item# 16 above):

- NASD
- SEC
- US State Regulators

- Other Regulators - specify: _____
(e.g. OSFI, Financial Services Commission of Ontario, etc.)

- Other(specify)_____

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TYPE OF REGISTRATION

18. Please indicate the type of registration or approval requested:

- | | |
|---|--|
| <ul style="list-style-type: none"> <input type="checkbox"/> Salesperson <input type="checkbox"/> Partner <input type="checkbox"/> Trading/Partner <input type="checkbox"/> Director <input type="checkbox"/> Trading/Director <input type="checkbox"/> Trading/Advising Officer <input type="checkbox"/> Non-Trading/Advising Officer <input type="checkbox"/> Compliance Officer <input type="checkbox"/> Branch Manager <input type="checkbox"/> Designated/Alternate Registered Options Principal <input type="checkbox"/> Designated/Alternate Registered Futures Principal <input type="checkbox"/> Designated/Alternate Registered Futures/Options Principal <input type="checkbox"/> Industry Investor <input type="checkbox"/> Non-industry Investor <input type="checkbox"/> Registered Mutual Funds Representative <input type="checkbox"/> Registered Representative (Retail) <input type="checkbox"/> Registered Representative (Non-Retail) <input type="checkbox"/> Investment Representative (Retail) <input type="checkbox"/> Investment Representative (Non-Retail) | <ul style="list-style-type: none"> <input type="checkbox"/> ACE Trade <input type="checkbox"/> ACE Trade/RR <input type="checkbox"/> Assistant ACE Trader <input type="checkbox"/> CATS Trader <input type="checkbox"/> VCT Trader <input type="checkbox"/> Trader - Trade CDNX <input type="checkbox"/> Independent - Commodities Options Trader <input type="checkbox"/> Independent - Commodities Floor Trader <input type="checkbox"/> Portfolio Manager <input type="checkbox"/> Associate Portfolio Manager <input type="checkbox"/> Investment Advisor (British Columbia only) <input type="checkbox"/> Investment Counsel <input type="checkbox"/> Portfolio Manager <input type="checkbox"/> Securities Adviser <input type="checkbox"/> Advising Employee <input type="checkbox"/> Ultimate/Alternate Designated Person <input type="checkbox"/> Other (specify): _____ |
|---|--|

Type of Securities

19. Please note the type of securities you will be dealing in:

- Securities (other than Forward Contracts)
- Exchange Contracts (Commodities)
- Equity Options
- Forward Contracts
- Mutual Fund Securities
- Scholarship Plan Securities
- Real Estate Securities
- Security Issuer Securities
- Other (specify): _____

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PRIOR REGISTRATION OR LICENSING

20. Are you now or have you ever been registered or licensed or applied for registration or a license in any capacity under any act or regulation thereof, regulating trading in securities or exchange contracts (commodities or commodity future contracts) of any province, territory, state or country? 9 Yes 9 No

If "yes" complete Schedule "B".

21. Have you *ever* been refused registration or licensing or approval for membership by any regulator or SRO? 9 Yes 9 No

If "yes", complete Schedule "B".

22. Are you now, or have you ever been a partner, shareholder, director or officer of any company or of a partnership which has been registered or licensed or is now registered or licensed (except as an issuer if you are or have been solely a shareholder) in any capacity under any act or regulation thereof, regulating trading in securities or exchange contracts (commodities or commodity futures contracts) of any province, territory, state or country? 9 Yes 9 No

If "yes" please complete Schedule "B".

CRIMINAL DISCLOSURE

INSTRUCTION:

*Offences under such federal statutes as the **Income Tax Act (Canada)** and the **Immigration Act (Canada)** constitute criminal offences and must be disclosed when answering this question. Where you have pleaded guilty or been found guilty of an offence, such offence must be reported even though an absolute or conditional discharge has been granted.*

It is considered inappropriate to omit reference to an offence under any statute other than the Young Offenders Act (Canada). Wrongful omission of an offence may be treated as a non-disclosure of material information.

*It should be noted that pleas or findings of guilt for impaired driving are **Criminal Code (Canada)** matters and must be disclosed.*

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

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

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23. **Past Offences Involving Securities, Commodities, Insurance or Real Estate**

Have you **ever** since attaining the age of 18 been charged with or pleaded guilty or been found guilty under any law of any province, territory, state or country of any offence relating to trading in securities, exchange contracts (commodities or commodity futures contracts), insurance or real estate or with the theft thereof, or with any related offence, or been a party to any proceedings taken on account of fraud arising out of any trade in or advice in respect thereof? **9** Yes **9** No

If "yes" complete Schedule "C".

24. **Past Offences Involving Other Criminal Offences or Contraventions**

Have you, since attaining the age of 18, **ever** pleaded guilty or been found guilty under any law of any province, territory, state or country for contraventions or other criminal offences not noted in Item #15 above? **9** Yes **9** No

If "yes" complete Schedule "C".

25. **Current Charges or Indictments**

Are you **currently the subject of a charge or Indictment**, under any law of any province, territory, state or country for contraventions, criminal offences or other conduct of the type described in Item #15 or #16 above? **9** Yes **9** No

If "yes" complete Schedule "C".

26. **Partnership or Company Offences or Current Charges or Indictments**

Has any partnership or company of which you are or were at the time of such event a partner, officer, director or a holder of voting securities carrying more than 5% of the votes carried by all outstanding voting securities, **ever** pleaded guilty or been found guilty, or is any such partnership or company currently the subject of a **charge or indictment**, under any law of any province, territory, state or country for contraventions, criminal offences or other conduct of the type described in Item #23 or #24 above? **9** Yes **9** No

If "yes" complete Schedule "C".

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REGULATORY DISCIPLINARY ACTION

27.	<p>Have you <i>ever</i> been refused registration or a licence, or has your registration or licence been suspended or cancelled, under any act or regulation thereof, regulating trading in securities or exchange contracts (commodities or commodity futures contracts) of any province, territory, state or country? 9 Yes 9 No</p> <p>If “yes” complete Schedule “E”.</p>
28.	<p>Have you <i>ever</i> been refused registration or a licence, or has your registration or licence been suspended or cancelled, under any legislation which requires registration or licensing to deal with the public in any <i>capacity other than trading in securities or exchange contracts (commodities or commodity futures contracts)</i> in any province, territory, state or country? 9 Yes 9 No</p> <p>If “yes” complete Schedule “E”.</p>
29.	<p>Are you now or have you <i>ever</i> been a partner, shareholder, director or officer of a company or of a partnership which has, during the time of your association with it, been refused registration (except a registration as an issuer if you are or have been solely a shareholder) or a licence, or whose registration has been suspended or cancelled under the act, or regulation thereof, regulating trading in securities or exchange contracts (commodities or commodity futures contracts) of any province, territory, state or country? 9 Yes 9 No</p> <p>If “yes” complete Schedule “E”.</p>
30.	<p>Have you been denied the benefit of any exemption from registration or licensing provided by any act or regulation thereof regulating trading in securities or exchange contracts (commodities or any commodity futures contracts) of any province, territory, state or country? 9 Yes 9 No</p> <p>If “yes” complete Schedule “E”.</p>
31.	<p>Has any prior or current registration or licensing to deal or trade in securities or exchange contracts (commodities or commodity futures contracts) held by you or any partnership or company of which you were at the time of such event a partner, officer or director or holder of voting securities carrying more than 5 percent of the votes carried by all outstanding voting securities <i>ever</i> been the subject of disciplinary action undertaken by any authority regulating or supervising trading in securities or exchange contracts (commodities or commodity futures contracts)? 9 Yes 9 No</p> <p>If “yes” complete Schedule “E”.</p>

REGISTRATION FORM - INDIVIDUALS

CIVIL PROCEEDINGS

- | | | | |
|-----|--|-------|------|
| 32. | (a) Has any claim been made against you successfully or, to your knowledge, is any claim pending in any civil or alternative dispute resolution proceedings before a court or other tribunal in any province, territory, state or country which was, or is, based in whole or in part on fraud, theft, deceit, misrepresentation or similar conduct? | 9 Yes | 9 No |
| | (b) Has any claim been made against any partnership or company of which you are or were at the time of such event, or at the time such proceedings were commenced, a partner, director, officer or holder of voting securities carrying more than 5% of the votes carried by all outstanding voting securities? | 9 Yes | 9 No |

TERMINATIONS

- | | | | |
|--|---|-------|------|
| 33. | Have you ever voluntarily resigned, been discharged or permitted to resign after allegations were made that accused you of: | | |
| | (a) violating investment related statutes, regulations, rules or industry standards of conduct? | 9 Yes | 9 No |
| | (b) fraud or the wrongful taking of property? | 9 Yes | 9 No |
| | (c) failure to supervise in connection with investment related statutes, regulations, rules or industry standards of conduct? | 9 Yes | 9 No |
| If you answered "yes" to any of these questions in Item #33, please complete Schedule "H". | | | |

FINANCIAL DISCLOSURE

If you answer "yes" to any of the following questions complete Schedule "G".

Bankruptcy

- | | | | |
|-----|--|-------|------|
| 34. | Under the law of any province, territory, state or country have you ever: | | |
| | (a) been declared bankrupt or made a voluntary assignment in bankruptcy? | 9 Yes | 9 No |
| | (b) made a proposal under any legislation relating to bankruptcy or insolvency? | 9 Yes | 9 No |
| | (c) been subject to or instituted any proceedings, arrangement or compromise with creditors including, having a receiver and/or manager appointed to hold your assets? | 9 Yes | 9 No |

REGISTRATION FORM - INDIVIDUALS

35.	Has any partnership or corporation of which you are or were at the time of such event a partner, director, officer or holder of voting securities carrying more than 5% of the votes carried by all outstanding voting securities <i>ever</i> :		
(a)	been declared bankrupt or made a voluntary assignment in bankruptcy?	9 Yes	9 No
(b)	made a proposal under any legislation relating to bankruptcy or insolvency?	9 Yes	9 No
(c)	been subject to proceedings under any legislation relating to the winding up, dissolution or companies' creditors arrangements?	9 Yes	9 No
(d)	been subject to or instituted any proceedings, arrangement or compromise with creditors or had a receiver and/or manager appointed to hold its assets?	9 Yes	9 No

Surety Bond or Fidelity Bond

36.	Have you <i>ever</i> applied for a surety bond or fidelity bond and been refused?	9 Yes	9 No
	If "yes", complete Schedule "G".		
	Are you presently bonded?	9 Yes	9 No

Judgement or Garnishment

37.	Has any judgement or garnishment <i>ever</i> been rendered against you or is any judgement or garnishment outstanding against you, in any civil court in any province, state or country for damages or other relief in respect of a fraud or for any reason whatsoever?	9 Yes	9 No
	If "yes" complete Schedule "G".		

BUSINESS ACTIVITIES

38.	Will you be actively engaged in the business of the firm with which you are now applying and devote the major portion of your time thereto?	9 Yes	9 No
39.	Are you engaged in any other business or have any other employment for gain except your occupation with the firm with which you are now applying?	9 Yes	9 No
	If "yes", complete Schedule "G".		

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SHAREHOLDERS

40. Are you a partner, director, officer, shareholder or other contributor of capital of a partnership or of a company having as its principal business that of a broker, dealer or adviser in securities, options or exchange contracts (commodities or commodity futures contracts) other than the firm with which you are now applying? 9 Yes 9 No

If "yes", complete Schedule "A".

DATED at

Name of Applicant

this day of 20.....

By

Signature of applicant, partner or officer

Print Name and Title

AFFIDAVIT

In the matter of the *Securities Act*

I,
Name in Full

of the

in the County of

in the Province/Territory of

MAKE OATH AND SAY

- 1. I am the applicant (or partner or officer of the applicant) herein for registration and I signed the application.
- 2. The statements of fact made in the application are true.

SWORN before me at the }

in the of }

this day of 20 }

Signature of Deponent

..... }

(A Commissioner, etc.)

**SCHEDULE "A" (Individual)
Direct Owners and Officers**

Use Schedule "A" in response to Item #40 to provide information if you are a partner, director, officer, shareholder or other contributor of capital of a partnership or of a company having as its principal business that of a broker, dealer or adviser in securities, options or exchange contracts (commodities or commodity futures contracts) other than the firm with which you are now applying.

Applicant

Name of Applicant (last name, first name, middle name)	Applicant NRD No.
---	-------------------

SIN #	Firm NRD No.
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SECTION I

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

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

3. State the source of the funds you propose to invest in the firm and provide full details.

4. Are the funds to be invested (or proposed to be invested) guaranteed directly or indirectly by any person, partnership or company? **9** Yes **9** No

If "yes", provide full details.

5. Are you or will you upon approval be the beneficial owner of the shares, bonds, debentures, partnership interest or other notes held by you? **9** Yes **9** No

If "no", state name, residential address and occupation of the beneficial owner.

SCHEDULE "A" (Individual)
Direct Owners and Officers

6. Have you either directly or indirectly given up any rights with respect to such shares or amount of the partnership interest, or do you, on approval of this application, intend to give up any rights, including any hypothecation, pledging or deposit as collateral of the shares or amount of partnership interest with any bank, other institution or other person? **9** Yes **9** No

If "yes", provide full details.

**SCHEDULE "B" (Individual)
Reporting of Prior Registration or Licensing**

This Disclosure Reporting is in response to affirmative responses to *(check item(s) being responded to)*:
Item(s): **920** **921** **922**

Applicant

Name of Applicant
(last name, first name, middle name)

Applicant NRD No.

SIN #

Firm NRD No.

SECTION I Prior Registration/Licensing

1. Note which province, state or country the applicant was previously registered or licensed to deal or trade in securities or exchange contracts; and in any other capacity under any legislation which requires registration or licensing to deal with the public in any capacity? (e.g. as an insurance agent, real estate agent, private investigator, mortgage broker, etc.)

- British Columbia Securities Commission
- Alberta Securities Commission
- Saskatchewan Securities Commission
- Manitoba Securities Commission
- Ontario Securities Commission
- Commission des valeurs mobilières du Québec
- New Brunswick Office of the Administrator
- Nova Scotia Securities Commission
- Prince Edward Island Registrar of Securities
- Newfoundland Securities Division
- Northwest Territories Securities Registries
- Yukon Territory Registrar of Securities
- Nunavut
- Other jurisdictions (specify): _____

2. For all securities regulatory authorities and/or self-regulatory organizations which granted registration as noted in Item #12, note the type of registration held, dates of registration and name of company through which registration was granted. State whether the registration is currently in effect.

Regulatory Authority _____ Type of Registration _____ Date _____ Firm _____ In effect:
MM/DD/YYYY Yes No

Regulatory Authority _____ Type of Registration _____ Date _____ Firm _____ In effect:
MM/DD/YYYY Yes No

Regulatory Authority _____ Type of Registration _____ Date _____ Firm _____ In effect:
MM/DD/YYYY Yes No

SCHEDULE "B" (Individual)
Reporting of Prior Registration or Licensing

3. If you have *ever* been refused registration or licensing, or approval for membership in any SRO and/or Exchange, note which one refused such registration/membership below:

- 9 British Columbia Securities Commission
- 9 Alberta Securities Commission
- 9 Saskatchewan Securities Commission
- 9 Manitoba Securities Commission
- 9 Ontario Securities Commission
- 9 Commission des valeurs mobilières du Québec
- 9 New Brunswick Office of the Administrator
- 9 Nova Scotia Securities Commission
- 9 Prince Edward Island Registrar of Securities
- 9 Newfoundland Securities Division
- 9 Northwest Territories Securities Registries
- 9 Yukon Territory Registrar of Securities
- 9 Nunavut
- 9 Investment Dealers Association of Canada
- 9 Mutual Fund Dealers Association
- 9 Canadian Venture Exchange (CNDX)
- 9 Montreal Exchange
- 9 Toronto Stock Exchange
- 9 Toronto Futures Exchange
- 9 Winnipeg Commodity Exchange
- 9 Other (specify): _____

4. Provide details why you were refused registration and/or membership in the above noted Item #3.

SECTION II Other Business Relationships

SCHEDULE "B" (Individual)
Reporting of Prior Registration or Licensing

4. If you are currently or have ever been engaged as a partner, shareholder, director, officer, or proprietor of any company (please exclude non-investment related activity which is exclusively charitable, civic, religious or fraternal and is recognized as tax exempt) please provide the following information:

Name of the other business:

Whether the business is investment related

Address of the other business

Nature of the other business

Your position, title or relationship with the other business

Start date and end dates of your relationship

Briefly describe your duties relating to the other business

4. Confirmation by the applicant's firm that there are no conflicts with this business relationship:

9 There are no conflicts with this business relationship.

Name of Signing Authority:

**SCHEDULE "C" (Individual)
Criminal Disclosure Reporting**

This Criminal Disclosure Reporting (CDR) is in response to affirmative responses to *(check item(s) being responded to)*:

Item(s): **923 924 925 926**

Applicant

Name of Applicant <small>(last name, first name, middle name)</small>	Applicant NRD No.
--	-------------------

SIN #	Firm NRD No.
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SECTION I

1. If charge(s) were brought against an organization over the which the applicant exercise(d) control: enter the name of the organization; whether or not the organization was a securities-related business; and the applicant's position, title or relationship.

2. Formal charge(s) were brought in: (include name of court, location of court - city or county and province/territory and country, case number).

Event Disclosure Detail (use this for both organizational and individual charges)

3. (a) Date first charged _____ <small>MM/DD/YYYY</small>	<input checked="" type="radio"/> Exact Date If not, provide explanation: _____
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- (b) Event Disclosure Detail (include: Charge(s); Description of Charge(s) and for each charge provide:
- number of counts
 - felony or misdemeanour
 - please for each charge
 - product type if charge is securities/investment related

(c) Did any of the Charge(s) within the Event involve a Felony? yes no

(d) Current status of the Event? Pending On Appeal Final

(e) Event Status Date: <i>(complete unless status is Pending)</i> _____ MM/DD/YYYY	<input checked="" type="radio"/> Exact Date If not, provide explanation: _____
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**SCHEDULE "C" (Individual)
Criminal Disclosure Reporting**

Disposition Disclosure Detail

4. Include for each charge:
 - disposition type (e.g. convicted, acquitted, dismissed, pre-trial, etc.);
 - date;
 - sentence/penalty;
 - duration (if sentence suspension, probation, etc.);
 - start date of penalty;
 - penalty/fine amount; and
 - date paid

5. Provide a brief summary of circumstances leading to the charge(s) as well as the disposition. Include the relevant dates when the conduct which was the subject of the charge(s) occurred.

**SCHEDULE "D" (Individual)
Change of Name(s)**

Use this Schedule "D" to report details for item listed below. Report only new information or changes/updates to previously submitted details. Do not repeat previously submitted information.

Item: **9 1(b)**

Applicant

Name of Applicant (last name, first name, middle name)	Applicant NRD No.
SIN #	Firm NRD No.

SECTION I Other Name(s) Previously Used

Name changes resulting from marriage, divorce, court order or any other process should be listed below, plus appropriate dates.

1. Name Change: _____ Last Name, First, Second and Third Names	Reason for change: 9 Marriage 9 Divorce 9 Court Order 9 Other - specify _____	Date Changed: _____ MM/DD/YYYY
2. Name Change: _____ Last Name, First, Second and Third Names	Reason for change: 9 Marriage 9 Divorce 9 Court Order 9 Other - specify _____	Date Changed: _____ MM/DD/YYYY
3. Name Change: _____ Last Name, First, Second and Third Names	Reason for change: 9 Marriage 9 Divorce 9 Court Order 9 Other - specify _____	Date Changed: _____ MM/DD/YYYY
4. Name Change: _____ Last Name, First, Second and Third Names	Reason for change: 9 Marriage 9 Divorce 9 Court Order 9 Other - specify _____	Date Changed: _____ MM/DD/YYYY

**SCHEDULE "E" (Individual)
Regulatory Disclosure Reporting**

7. Current Status? Pending On Appeal Final

If Final or On Appeal - complete all items below. For Pending Actions, complete Item 10 only.

8. How was the matter resolved (check appropriate item):

Dismissed

Settled

Order

Other _____

9. Resolution Date _____
(MM/DD/YYYY)

Exact Date

Not Exact Date

Provide explanation _____

10. What sanction(s) were ordered (provide details of the amount of fines, duration of suspensions, length of time to rectify deficiency, etc.)?

11. Provide a brief summary of details related to the action status and/or disposition and include relevant terms, conditions and dates.

**SCHEDULE "F" (Individual)
Civil Proceedings Disclosure Reporting**

This Civil Proceedings Disclosure Reporting (CPDR) is in response to affirmative response to *(check item(s) being responded to)*:

Item(s): **932(a)** **932(b)**

Applicant

Name of Applicant
(last name, first name, middle name)

Applicant NRD No.

SIN #

Firm NRD No.

SECTION I

1. Court action initiated by: (name of regulator/SRO/exchange, agency, firm, private plaintiff, etc.)

2. Principal relief sought:

3. Other relief sought:

4. Filing date of court action:

 (MM/DD/YYYY)

9

Exact Date

9

Not Exact Date

Provide explanation _____

5. Principal product type:

Other product types:

6. Formal action was brought in: (include name of court, location of court - city or county and province/territory and country, case number)

7. Employing firm when activity occurred which led to the civil proceedings:

8. Describe the allegations related to this civil action.

SCHEDULE "F" (Individual)
Civil Proceedings Disclosure Reporting

9. Current status? Pending On Appeal Final

10. If **pending**, date notice/process was served:

_____ Exact Date
(MM/DD/YYYY) Not Exact Date
Provide explanation _____

11. If on **appeal**, action appealed to (provide name of court): _____

Date Appeal filed: _____
(MM/DD/YYYY)

12. If **final**, how was the matter resolved (provide all details).

**SCHEDULE "G" (Individual)
Bankruptcy, Bond and Judgement/Garnishment Disclosure Reporting**

This Disclosure Reporting page is in response to affirmative response to *(check item(s) being responded to)*:

Item(s):	<input type="checkbox"/> 34(a)	<input type="checkbox"/> 43(b)	<input type="checkbox"/> 34(c)	<input type="checkbox"/> 35(a)	<input type="checkbox"/> 35(b)	<input type="checkbox"/> 35(c)	<input type="checkbox"/> 35(d)
	<input type="checkbox"/> 36	<input type="checkbox"/> 37	<input type="checkbox"/> 39				

Applicant

Name of Applicant (last name, first name, middle name)	Applicant NRD No.
SIN #	Firm NRD No.

SECTION I Bankruptcy Disclosure

1. Action type: *(check appropriate item)*

<input type="checkbox"/> Bankruptcy	<input type="checkbox"/> Receivership
<input type="checkbox"/> Compromise	<input type="checkbox"/> Voluntary Assignment
<input type="checkbox"/> Declaration	<input type="checkbox"/> Other _____
<input type="checkbox"/> Liquidated	

2. Action date:

(MM/DD/YYYY)

<input type="checkbox"/> Exact Date
<input type="checkbox"/> Not Exact Date
Provide explanation

3. If the financial action relates to an organization over which you exercise(d) control, enter the name of the organization and your position, title or relationship.

Was the organization investment related? yes no

4. Court action brought in *(name of court)*, location of Court *(city or county and province/territory or country)* and docket/case number:

5. Is action currently pending? yes no

6. If not pending, provide Disposition type (check appropriate item):

<input type="checkbox"/> Direct payment procedure
<input type="checkbox"/> Discharged
<input type="checkbox"/> Dismissed
<input type="checkbox"/> Dissolved
<input type="checkbox"/> Satisfied/Released
<input type="checkbox"/> Trustee appointed
<input type="checkbox"/> Other _____

SCHEDULE "G" (Individual)
Bankruptcy, Bond and Judgement/Garnishment Disclosure Reporting

7. Summarize the details of circumstances leading to the necessity of the bonding company action.

SECTION III Judgement/Garnishment Disclosure

1. Name of Applicant Applicant NRD Number:

2. Judgement/Garnishment Amount:

3. Judgement/Garnishment Holder:

4. Judgement/Garnishment Type (check appropriate item)
 Civil Default Tax Other (specify): _____

5. Date filed:
 _____ Exact Date
 (MM/DD/YYYY) Not Exact Date
 Provide explanation _____

6. Is Judgement/Garnishment outstanding? yes no

If no, provide status date:
 _____ Exact Date
 (MM/DD/YYYY) Not Exact Date
 Provide explanation _____

If no, how was the matter resolved (check appropriate item)
 Discharged Released Removed Satisfied

7. Name of court, location of Court (*city or county and province/territory or country*) and docket/case number:

8. Provide a brief summary of events leading to the action and any payment schedule details including current status (if applicable).

SECTION IV Business Activities

1. If you are engaged in any other business or have any other employment provide **full details** including the full name and address of the business, the nature of the business, your title or position and the amount of time you devote to the business.

**SCHEDULE "H" (Individual)
Termination Disclosure Reporting**

This Termination Disclosure Reporting (TDR) is in response to affirmative responses to *(check item(s) being responded to)*:

Item(s): **933(a)** **933(b)** **933(c)**

Applicant

Name of Applicant
(last name, first name, middle name)

Applicant NRD No.

SIN #

Firm NRD No.

SECTION I

1. Firm name:

2. Termination Type:

9 Discharged

9 Permitted to Resign

9 Voluntary Resignation

3. Termination Date _____
MM/DD/YYYY

9 Exact Date

If not, provide explanation: _____

4. Describe the allegations related to this termination.

5. Principal product type:

Other product types:

6. Describe the circumstances relating to the termination. Include event dates and facts to sufficiently describe conduct leading to the termination.