FORM 33-109F4 REGISTRATION OF INDIVIDUALS AND REVIEW OF PERMITTED INDIVIDUALS (section 2.2)

GENERAL INSTRUCTIONS

Complete and submit this form to the relevant regulator(s) or in Québec, the securities regulatory authority, or self-regulatory organization (SRO) if an individual is seeking

- registration in individual categories,
- to be reviewed as a permitted individual.

You are only required to submit one form even if you are applying to be registered in several categories. This form is also used if you are seeking to be reviewed as a permitted individual. A post office box is not acceptable as a valid business location address.

Terms

In this form:

"Approved person" means, in respect of a member (Member) of the Investment Industry Regulatory Organization of Canada (IIROC), an individual who is a partner, director, officer, employee or agent of a Member who is approved by IIROC or another Canadian SRO to perform any function required under any IIROC or another Canadian SRO bylaw, rule, or policy;

"Canadian Investment Manager designation" means the designation earned through the Canadian investment manager program prepared and administered by CSI Global Education Inc. and so named on the day this Instrument comes into force, and every program that preceded that program, or succeeded that program, that does not have a significantly reduced scope and content when compared to the scope and content of the first-mentioned program;

"CFA Charter" means the charter earned through the Chartered Financial Analyst program prepared and administered by the CFA Institute and so named on the day this Instrument comes into force, and every program that preceded that program, or succeeded that program, that does not have a significantly reduced scope and content when compared to the scope and content of the first-mentioned program;

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

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

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

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

How to submit this form

NRD format

Submit this form at the National Registration Database (NRD) website in NRD format at www.nrd.ca. If you have any questions, contact the compliance, registration or legal department of the sponsoring firm or a legal adviser with securities law experience, or visit the NRD information website at www.nrd-info.ca.

Format, other than NRD format

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

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

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

Item 1 Name

1.	Legal name				
Last na	me	First name	Second name (N/A	. 🔲)	Third name (N/A)
NRD nu	ımber (if applicable	e)			
2.	Other personal i	names			
	currently, or have		, known by any name	s other than y	our full legal name above, for exampl
Yes	☐ No				
If "Yes"	, complete Schedu	le A.			
3.	Use of other nar	nes			
			d, operated under, or rade names for sole pr		usiness under any name other than thor team names?
Yes	☐ No				
If "Yes"	, complete Schedu	le A.			
Item 2	Residential add	ress			
Provide	all of your residen	tial addresses, i	including any foreign re	esidential add	resses, for the past 10 years.
1.	Current and pre	vious residenti	al addresses		
(numbe	r, street, city, provi	nce, territory or	state, country, postal of	code)	
Telepho	one number				
Lived a	t this address since	e (YYYY/MM) _			
If you h	ave lived at this ad	dress for less th	nan 10 years, complete	Schedule B.	
2.	Mailing address				
	Check here if y Otherwise, comp			s your currer	nt residential address provided abov

(number, street, city, province, territory or state, country, postal code)

3.	Business e-mail address
Item 3	Personal information
1.	Date of birth(YYYY/MM/DD)
•	
2.	City, province, territory or state, country)
3.	Gender Female Male
4.	Eye colour
5.	Hair colour
6.	Height in. or cm
7.	Weight
Item 4	Citizenship
1.	Citizenship information
What is	your country of citizenship?
	Canada
	Other, specify:
2.	If you are a citizen of a country other than Canada, complete the following for that citizenship.
	Check here if you do not have a valid passport. Otherwise, provide:
Passpor	rt number:
Date of	issue:
	(YYYY/MM/DD)
Place of	issue: (city, province, territory or state, country)
Item 5	Registration jurisdictions
1.	Are you filing this form under the passport system / interface for registration?
	Only choose "No" if:
	(a) you are seeking registration only in your principal jurisdiction,
	(b) you are seeking review as a permitted individual
	and you are not currently registered under securities legislation in any jurisdiction of Canada.
	Yes No
2.	Check each jurisdiction where you are seeking registration or review as a permitted individual:

	All jurisdictions
	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
	On Schedule C, check each category for which you are seeking registration as an individual or review as a ed individual. If you are seeking review as a permitted individual, check each category that describes your with your sponsoring firm.
2. Québec	If you are seeking registration as a representative of a mutual fund dealer or of a scholarship plan dealer in , are you covered by your sponsoring firm's professional liability insurance?
Yes	□ No □
If "No",	state:
The nar	ne of your insurer
Your no	licy number
rour po	licy number
•	Address and agent for service
•	
Item 7 1. You mu address	Address and agent for service
1. You mu address Schedu	Address and agent for service Address for service st have one address for service in each province or territory where you are submitting this form. A residential or a business address is acceptable. A post office box is not an acceptable address for service. Complete
1. You mu address Schedul Address	Address and agent for service Address for service st have one address for service in each province or territory where you are submitting this form. A residential or a business address is acceptable. A post office box is not an acceptable address for service. Complete le D for each additional address for service you are providing.
1. You mu address Schedul Address (number	Address and agent for service Address for service st have one address for service in each province or territory where you are submitting this form. A residential or a business address is acceptable. A post office box is not an acceptable address for service. Complete le D for each additional address for service you are providing.
1. You mu address Schedul Address (number Telepho	Address for service st have one address for service in each province or territory where you are submitting this form. A residential or a business address is acceptable. A post office box is not an acceptable address for service. Complete le D for each additional address for service you are providing. st for service: r, street, city, province or territory, postal code)
You mu address Schedul Address (number Telephor Fax number 1)	Address for service st have one address for service in each province or territory where you are submitting this form. A residential or a business address is acceptable. A post office box is not an acceptable address for service. Complete le D for each additional address for service you are providing. s for service: r, street, city, province or territory, postal code) one number
You mu address Schedul Address (number Telephor Fax number 1)	Address and agent for service Address for service st have one address for service in each province or territory where you are submitting this form. A residential or a business address is acceptable. A post office box is not an acceptable address for service. Complete le D for each additional address for service you are providing. It is for service: In the first of the formula of the formul
Item 7 1. You mu address Schedul Address (numbe Telephor Fax num Busines 2. If you hawhere you have you hav	Address and agent for service St have one address for service in each province or territory where you are submitting this form. A residential or a business address is acceptable. A post office box is not an acceptable address for service. Complete le D for each additional address for service you are providing. St for service: Tr, street, city, province or territory, postal code) The number

Contact	person:		
	Last name, First name		
Item 8	Proficiency		
1.	Course, examination or designation information and other education		
	te Schedule E to indicate each course, examination and designation that is required for registration or all and that you have successfully completed or have been exempted from.		
	Check here if you are not required under securities legislation or derivatives legislation or both, or the rules of an SRO to satisfy any course, examination or designation requirements.		
2.	Student numbers		
	ave a student number for a course that you successfully completed with one of the following organizations, it below:		
CSI Glo	bal Education:		
IFSE In	stitute:		
Institute	of Canadian Bankers (ICB):		
CFA Ins	stitute:		
Advocis	:		
RESP [Dealers Association of Canada:		
Other: _			
3.	Exemption refusal		
	y securities regulator, derivatives regulator or SRO refused to grant you an exemption from a course, ation, designation or experience requirement?		
Yes	□ No □		
If "Yes",	complete Schedule F.		
4.	Relevant securities industry experience		
If you a	re an individual applying for IIROC approval, select "N/A".		
	ave not been registered in the last 36 months and you passed the required examination more than 36 months you consider that you have gained 12 months of relevant securities industry experience during the 36-month		
Yes	□ No □ N/A □		
If "Yes",	complete Schedule F.		
Item 9	Location of employment		
1. Provide the following information for your new sponsoring firm. If you will be working out of more than one business location, provide the following information for the business location out of which you will be doing most of your business. If you are only filing this form because you are a permitted individual and you are not employed by, or acting as agent for, the sponsoring firm, select "N/A".			
	NRD location number:		

	Unique Identification Number (optional) :							
	Business location address:							
	(number, street, city, province, territory or state, country, postal code)							
	Telephone number: ()							
	Fax number: ()							
	N/A 🗆							
	If the firm has a foreign head office, and/or you are not a resident of Canada, provide the address for the s location in which you will be conducting most of your business. If you are only filing this form because you rmitted individual and you are not employed by, or acting as agent for, the sponsoring firm, select "N/A".							
	Business location address: (number, street, city, province, territory or state, country, postal code)							
	Telephone number: ()							
	Fax number: ()							
	N/A							
[The foll	owing under #3 "Type of business location", #4 and #5 is for a Format other than NRD format only]							
3.	Type of business location:							
	☐ Head office							
	☐ Branch or business location							
	☐ Sub-branch (members of the Mutual Fund Dealers Association of Canada only)							
4.	Name of supervisor or branch manager:							
5.	Check here if the mailing address of the business location is the same as the business location address provided above. Otherwise, complete the following:							
	Mailing address: (number, street, city, province, territory or state, country, postal code)							

Item 10 Current employment, other business activities, officer positions held and directorships

Complete a separate Schedule G for each of your current business and employment activities, including employment and business activities with your sponsoring firm and any employment and business activities outside your sponsoring firm. Also include all officer or director positions and any other equivalent positions held, as well as positions of influence. The information must be provided

- whether or not you receive compensation for such services, and
- whether or not any such position is business related.

Item 11 Previous employment and other activities

On Schedule H, complete your history of employment and other activities for the past 10 years.

Item 12 Resignations and terminations

Have you ever resigned, been terminated or been dismissed for cause by an employer from a position following allegations that you:

1.	Violated	d any stat	utes, reg	ulations, rules or standards of conduct?
	Yes		No	
	If "Yes"	, complet	e Schedu	ıle I, Item 12.1.
2.	Failed t	o appropi	riately su _l	pervise compliance with any statutes, regulations, rules or standards of conduct?
	Yes		No	
	If "Yes"	, complet	e Schedu	ıle I, Item 12.2.
3.	Commi	tted fraud	or the w	rongful taking of property, including theft?
	Yes		No	
	If "Yes"	, complet	e Schedu	ıle I, Item 12.3.
Item 13	Regula	atory disc	closure	
The que	stions b	elow relat	e to any j	jurisdiction of Canada and any foreign jurisdiction.
1.	Securit	ies and o	derivativ	es regulation
a)	you nov	w, or have	e you eve	or permitted individual status that has been recorded under this NRD number, are per been, registered or licensed with any securities regulator or derivatives regulator ise on securities or derivatives or both?
	Yes		No	
	If "Yes"	, complet	e Schedu	ıle J, Item 13.1(a).
b)	Have y both?	ou ever l	oeen refu	used registration or a licence to trade in or advise on securities or derivatives or
	Yes		No 🗆	
	If "Yes"	, complet	e Schedu	ıle J, Item 13.1(b).
c)				nied the benefit of any exemption from registration provided in any securities or tion or rules, other than what was disclosed in Item 8.3 of this form?
	Yes		No	
	If "Yes"	, complet	e Schedu	ule J, Item 13.1(c).
d)				ou ever been subject to any disciplinary proceedings or any order resulting from under any securities legislation or derivatives legislation or both?
	Yes		No	
	If "Yes"	, complet	e Schedu	ule J, Item 13.1(d).
2.	SRO re	gulation		
a)				hat has been recorded under this NRD number, are you now, or have you ever n of an SRO or similar organization?
	Yes		No 🗆	
	If "Yes"	, complet	e Schedu	ıle J, Item13.2(a).

b)	Have y	ou ever b	een refus	sed approved person status by an SRO or similar organization?	
	Yes		No		
	If "Yes"	, complet	e Schedu	ule J, Item 13.2(b).	
c)		u now, or organizat		ou ever been, subject to any disciplinary proceedings conducted by any SRO of	
	Yes		No		
	If "Yes"	, complet	e Schedu	ule J, Item 13.2(c).	
3.	Non-se	curities	regulatio	on	
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 derivation or both (e.g. insurance, real estate, accountant, lawyer, teacher)?				
	Yes		No		
	If "Yes"	, complet	e Schedu	ule J, Item 13.3(a)	
b)				used registration or a licence under any legislation relating to your professiona curities or derivatives?	
	Yes		No		
	If "Yes"	, complet	e Schedu	ule J, Item 13.3(b).	
c)				u ever been, a subject of any disciplinary actions conducted under any legislation nal activities unrelated to securities or derivatives?	
	Yes		No		
	If "Yes"	, complet	e Schedu	ule J, Item 13.3(c).	

Item 14 Criminal disclosure

The questions below apply to offences committed in any jurisdiction of Canada and any foreign jurisdiction.

You must disclose all offences, including:

- a criminal offence under federal statutes such as the Criminal Code (Canada), Income Tax Act (Canada), the Competition Act (Canada), Immigration and Refugee Protection Act (Canada) and the Controlled Drugs and Substances Act (Canada), even if
 - a record suspension has been ordered under the Criminal Records Act (Canada)
 - o you have been granted an absolute or conditional discharge under the *Criminal Code* (Canada), and
- a criminal offence, with respect to questions 14.2 and 14.4, of which you or your firm has been found guilty or for which you or your firm have participated in the alternative measures program within the previous three years, even if a record suspension has been ordered under the *Criminal Records Act* (Canada)

You are not required to disclose:

- charges for summary conviction offences that have been stayed for six months or more,
- charges for indictable offences that have been stayed for a year or more,

	•	speeding or parking violations.			
Subject	to the ex	ceptions	above:		
1.	Are there any outstanding or stayed charges against you alleging a criminal offence that was committed?				
	Yes		No		
	If "Yes",	complete	e Schedu	ule K, Item 14.1.	
2.				und guilty, pleaded no contest to, or been granted an absolute or conditional nal offence that was committed?	
	Yes		No		
	If "Yes",	complete	e Schedu	ule K, Item 14.2.	
3.		t the time		ledge, are there any outstanding or stayed charges against any firm of which you ninal offence was alleged to have taken place, a partner, director, officer or major	
	Yes		No		
	If "Yes",	complete	e Schedu	ule K, Item 14.3.	
4.	ever be	en found	guilty, pl	edge, has any firm, when you were a partner, officer, director or major shareholder, leaded no contest to or been granted an absolute or conditional discharge from a committed?	
	Yes		No		
	If "Yes",	complete	e Schedu	ule K, Item 14.4.	
Item 15	Civil dis	sclosure			
The que	stions be	elow relat	e to any j	jurisdiction of Canada and any foreign jurisdiction.	
1.				outstanding civil actions alleging fraud, theft, deceit, misrepresentation or similar r a firm where you are or were a partner, director, officer or major shareholder?	
	Yes		No		
	If "Yes",	complete	e Schedu	ule L, Item 15.1.	
2.	defenda	ant or res	pondent	re you are or were a partner, director, officer or major shareholder ever been a in any civil proceeding in which fraud, theft, deceit, misrepresentation or similar ccessfully established in a judgment?	
	Yes		No		
	If "Yes",	complete	e Schedu	ule L, Item 15.2.	
Itom 16	Einanci	al disala	curo		

offences under the Youth Criminal Justice Act (Canada), and

Item 16 Financial disclosure

Bankruptcy

Under the laws of any applicable jurisdiction, have you or has any firm when you were a partner, director, officer or major shareholder of that firm:

a) proceed		petition	in bankr	uptcy issued or made a voluntary assignment in bankruptcy or any similar	
	Yes		No		
	If "Yes"	, complet	te Schedu	lle M, Item 16.1(a).	
b)	Made a	proposa	l under ar	ny legislation relating to bankruptcy or insolvency or any similar proceeding?	
	Yes		No		
	If "Yes"	, complet	te Schedu	lle M, Item 16.1(b).	
c)				ngs under any legislation relating to the winding up or dissolution of the firm, or editors Arrangement Act (Canada)?	
	Yes		No		
	If "Yes"	, complet	te Schedu	ale M, Item 16.1(c).	
d)	having	a receive	er, receive	red any proceedings, arrangement or compromise with creditors? This includes er-manager, administrator or trustee appointed by or at the request of creditors, ocess or by order of a regulatory authority, to hold your assets.	
	Yes		No		
	If "Yes"	, complet	te Schedu	lle M, Item 16.1(d).	
2.	Debt o	bligation	s		
best of	your kno	owledge,	has any	failed to meet a financial obligation of \$10,000 or more as it came due or, to the firm, while you were a partner, director, officer or major shareholder of that firm, on of \$10,000 or more as it came due?	
Yes		No			
If "Yes",	complet	te Schedu	ule M, Iter	n 16.2.	
3.	Surety	bond or	fidelity b	ond	
Have yo	ou ever b	een refus	sed for a s	surety or fidelity bond?	
Yes		No			
If "Yes",	complet	te Schedu	ule M, Iter	n 16.3.	
4.	Garnis	hments,	unsatisfi	ed judgments or directions to pay	
your inc	Has any federal, provincial, territorial, state authority or court ever issued any of the following against you regarding your indebtedness or, to the best of your knowledge, the indebtedness of a firm where you are or were a partner, director, officer or major shareholder:				
			Yes	No	
Garnish	ment				
Unsatisf	fied judg	ment			
Direction	n to pay				
	If "Yes", complete Schedule M, Item 16.4.				

Item 17 Ownership of securities and derivatives firms

,	are you now, or have you ever been, a partner or major shareholder of any firm (including your sponsoring firm Those business is trading in or advising on securities or derivatives or both?						
Yes		No					
If "Yes"	f "Yes", complete Schedule N.						

Item 18 Agent for service

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

Item 19 Submission to jurisdiction

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

Item 20 Notice of collection and use of personal information

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

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

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

SROs

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

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

By submitting this form, you certify that you understand the rules of the applicable SROs of which you are seeking registration or approval or of which your sponsoring firm is a member or participating organization. You also undertake to become conversant with the rules of any SROs of which you or your sponsoring firm becomes a

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

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

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

Item 21 Warning

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

Item 22 Certification

1. Certification - NRD format

I confirm I have discussed the questions in this form with an officer, branch manager or supervisor of my sponsoring firm. To the best of my knowledge, the officer, branch manager or supervisor was satisfied that I fully understood the questions. I will limit my activities to those permitted by my category of registration. If the business location specified in this form is a residence, I hereby give my consent for the regulator or, in Québec, the securities regulatory authority to enter that residence for the administration of securities legislation and derivatives legislation, including commodity futures legislation.

I am making this submission as agent for the individual identified in this form. By checking this box, I certify that the individual provided me with all of the information on this form and the certification above.

2. Certification - Format other than NRD format

Individual

By signing below, I certify to the regulator, or in Québec the securities regulatory authority, in each jurisdiction where I am filing or submitting this form, either directly or through the principal regulator, that:

- I have read this form and understand the questions,
- all of the information provided on this form is true, and complete, and
- if the business location specified in this form is a residence, I hereby give my consent for the regulator or, in Québec, the securities regulatory authority to enter that residence for the administration of securities legislation and derivatives legislation, including commodity futures legislation.

Otana a transa a filipadi albahara l	D-1-	
Signature of individual	Date _	
•	 	

Authorized partner or officer of the firm

By signing below, I certify to the regulator, or in Québec the securities regulatory authority, in each jurisdiction where I am submitting this form, either directly or through the principal regulator, for the individual that:

- the individual identified in this form will be engaged by the sponsoring firm as a registered individual or a
 permitted individual, and
- I have, or a branch manager, or supervisor, or another officer or partner has, discussed the questions set
 out in this form with the individual and, to the best of my knowledge, the individual fully understands the
 questions.

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

Schedule A Names (Item 1)

Item 1.2 Other personal names

Last name	First name	Second name (N/A 🔲)	Third name (N/A □)
Provide the reasons f nickname):	for the use of this na	me (for example, marriage, di	ivorce, court order, commonly used name o
When did you use thi	s name?	From:	То:
		(YYYY/MM)	(YYYY/MM)
Name 2:			
Last name	First name	Second name (N/A)	Third name (N/A)
Provide the reasons f nickname):	for the use of this na	me (for example, marriage, di	ivorce, court order, commonly used name of
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	s name?	From:	To:
vvnen did you use thi	o namo.	1.0	10.
when did you use thi	o namo.	(YYYY/MM)	(YYYY/MM)
When did you use thi Name 3:	e name.		
	First name		
Name 3:	First name	(YYYY/MM) Second name (N/A □)	(YYYY/MM)
Name 3: Last name Provide the reasons	First name for the use of this n	(YYYY/MM) Second name (N/A □)	Third name (N/A □)
Name 3: Last name Provide the reasons nickname):	First name for the use of this n	(YYYY/MM) Second name (N/A □) name (for example, marriage,	Third name (N/A □) divorce, court order, commonly used nam
Name 3: Last name Provide the reasons nickname): When did you use thi	First name for the use of this n	(YYYY/MM) Second name (N/A □) name (for example, marriage, From:	Third name (N/A □) divorce, court order, commonly used nam
Name 3: Last name Provide the reasons nickname): When did you use thi	First name for the use of this n s name?	(YYYY/MM) Second name (N/A □) name (for example, marriage, From:	Third name (N/A □) divorce, court order, commonly used nam

If this other name is or was used in connection with any sponsoring firm, did the sponsoring firm approve the use of the name?

Yes ☐ No ☐ N\(\frac{1}{2}\)A ☐		
When did you use this name?	From:	То:
	(YYYY/MM)	(YYYY/MM)
Name 2:		
Name:		
Provide the reasons for the use of this other name	e (for example, trade n	ame or team name):
If this other name is or was used in connection we the name?	vith any sponsoring firm	n, did the sponsoring firm approve the use of
Yes No N/A		
When did you use this name?	From:	То:
	(YYYY/MM)	(YYYY/MM)
Name 3:		
Name:		_
Provide the reasons for the use of this other name	e (for example, trade n	ame or team name):
If this other name is or was used in connection we the name?	vith any sponsoring firm	n, did the sponsoring firm approve the use of
Yes No N/A		
When did you use this name?	From:	То:
	(YYY/MM)	(YYYY/MM)

Schedule B Residential address (Item 2)

Item 2.1 Current and previous residential addresses

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

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

Address 1.			
Residential address:			
(number, street, city, province,	territory or state, country)		
When did you live at this address?	From:	То:	
	(YYYY/MM)	(YYYY/MM)	
Address 2:			
Residential address:			
(number, street, city, province	ce, territory or state, country)		
When did you live at this address?	From:	То:	
	(YYYY/MM)	(YYYY/MM)	
Address 3:			
Residential address:			
	province, territory or state, cour	itry)	
When did you live at this address?	From:	То:	
	(YYYY/MM)	(YYYY/MM)	

Schedule C Individual Categories (Item 6)

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

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

[] Chief Compliance Officer

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

[] Adviser
[] Local
lı	ndividual categories and permitted activities
[] Floor Broker
[] Salesperson
[] Branch Manager
[] Adviser
[] Officer – Specify title:
[] Director
[] Partner
[] Futures Contracts Portfolio Manager
[] Associate Futures Contracts Portfolio Manager
[] IIROC approval only
[] Local
C	<u>luébec</u>
F	irm categories
[] Derivatives Dealer
[] Derivatives Portfolio Manager
lı	ndividual categories and permitted activities
[] Derivatives Dealing Representative
[] Derivatives Advising Representative
[] Derivatives Associate Advising Representative

Schedule D Address and agent for service (Item 7)

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 seeking to become, a registered individual or permitted individual. A post office box is not an acceptable address for service.

Address for servi	ce:
	(number, street, city, province or territory, postal code)
Telephone numb	er: ()
Fax number: (_)
Business e-mail	address:
Item 7.2 Age	ent for service
	inted an agent for service, provide the following information about the agent. The address for service nust be the address of the agent named below.
Name of agent for	or service:
(if applicable)	
Contact person:	
	Last name, First name

Schedule E Proficiency (Item 8)

Item 8.1 Course, examination or designation information and other education

Course, examination, designation or other education	Date completed (YYYY/MM/DD)	Date exempted (YYYY/MM/DD)	Regulator / securities regulatory authority granting the exemption
If you have listed the CFA Charter in Item 8.1, please of the CFA Institute permitted to use this charter.	indicate by checking "\	es" below if you are	a current member
Yes No			
If "No", please explain why you no longer hold this des	signation:		
If you have listed the Canadian Investment Manager I below if you are currently permitted to use this design.		, please indicate by c	checking "Yes"
Yes No			
If "No", please explain why you no longer hold this des	signation:		

Schedule F Proficiency (Items 8.3 and 8.4)

Item 8.3 Exemption refusal

Complete the following for each exemption that was refused.
1. Which securities regulator, derivatives regulator or SRO refused to grant the exemption?
State the name of the course, examination, designation or experience requirement:
State the reason given for not being granted the exemption:
Date exemption refused:(YYYY/MM/DD)
2. Which securities regulator, derivatives regulator or SRO refused to grant the exemption?
State the name of the course, examination, designation or experience requirement:
State the reason given for not being granted the exemption:
Date exemption refused:(YYYY/MM/DD)
3. Which securities regulator, derivatives regulator or SRO refused to grant the exemption?
State the name of the course, examination, designation or experience requirement:
State the reason given for not being granted the exemption:
Date exemption refused:(YYYY/MM/DD)
Item 8.4 Relevant securities industry experience
Describe your responsibilities in areas relating to the category you are applying for, including the title(s) you have held, as well as start and end dates:

What is the percentage of your time devoted to these activities?
%
Indicate the continuing education activities in which you have participated during the last 36 months and that are relevant to the category of registration you are applying for:

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

Complete a separate Schedule G for each of your current business and employment activities, including employment and business activities with your sponsoring firm and any employment and business activities outside your sponsoring firm. Also include all officer or director positions and any other equivalent positions held, as well as positions of influence. The information must be provided

•	whether or not you receive compensation for such services, and
•	whether or not any such position is business related.
1. Start date _	(YYYY/MM/DD)
2. Firm informa	ation
☐ Check here	if this activity is employment with your sponsoring firm.
If the activity is below:	with your sponsoring firm, you are not required to indicate the firm name and address information
Name of busine	ess or employer:
Address of busi	ness or employer:
	(number, street, city, province, territory or state, country)
Name and title	of your immediate supervisor:
3. Description	of duties
duties, title or redetails such as	ployment and business activities related to this employer. Include the nature of the business and your elationship with the business. If you are seeking registration that requires specific experience, include level of responsibility, value of accounts under direct supervision, number of years of experience, and me spent on each activity.
4. Number of w	vork hours per week
How many hour	s per week do you devote to this business or employment?
If this activity is	employment with your sponsoring firm and you work less than 30 hours per week, explain why.
5. Conflicts of	interest
If you have mor	e than one employer or are engaged in business related activities:
	potential for confusion by clients and any potential for conflicts of interest arising from your multiple business related activities or proposed business related activities.

B. Indicate whether or not any of your employers or organizations where you engage in business related activities are

listed on an exchange.

. State the name of the person at your sponsoring firm who has reviewed and approved your multiple or business related activities or proposed business related activities.	employment
. If you do not perceive any conflicts of interest arising from this employment, explain why.	-

Schedule H Previous employment and other activities (Item 11)

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

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

☐ Unemployed
☐ Full-time student
☐ Employed or self-employed
From: (YYYY/MM)
To: (YYYY/MM)
Complete the following only if you are, or were, employed or self-employed during this period.
Name of business or employer:
Address of business or employer:
(number, street, 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 seeking registration in a category of registration that requires specific experience, include details of that experience. Examples include level of responsibility, value of accounts under direct supervision, number of years of that experience and research experience, and percentage of time spent on each activity.
Reason why you left the firm:

Schedule I Resignations and terminations (Item 12)

Item 12.1

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

Item 12.2

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

Item 12.3

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

Schedule J Regulatory disclosure (Item 13)

Item 13.1 Securities and derivatives regulation

a)	For each registration or licence, state below (1) the name of the firm, (2) the securities or derivatives regulator with which you are, or were, registered or licensed, (3) the type or category of registration or licence, and (4) the period that you held the registration or licence.
b)	For each registration or licence refused, state below (1) the name of the firm, (2) the securities or derivatives regulator that refused the registration or licence, (3) the type or category of registration or licence refused, (4) the date of the refusal, and (5) the reasons for the refusal.
c)	For each exemption from registration denied or licence refused, other than what was disclosed in Item 8.3 of this form, state below (1) the party that was refused the exemption from registration or licence, (2) the securities or derivatives regulator that refused the exemption from registration or licence, (3) the type or category or registration or licence refused, (4) the date of the refusal, and (5) the reasons for the refusal.
d)	For each order or disciplinary proceeding, state below (1) the name of the firm, (2) the securities or derivatives regulator 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.
Item	13.2 SRO regulation
a)	For each approval, state below (1) the name of the firm, (2) the SRO with which you are or were an approved person, (3) the categories of approval, and (4) the period that you held the approval.
b)	For each approval refused, state below (1) the name of the firm, (2) the SRO 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, state below (1) the name of the firm, (2) the SRO 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 the regulator or, in Québec, the securities regulatory authority may request.

Item 13.3 Non-securities regulation

a) For each registration or licence, state 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 licence, and (4) the period that the party held the registration or licence.

b) For each registration or licence refused, state below (1) the party that was refused registration or licensing (if insurance licensed, also indicate the name of the insurance agency), (2) with which regulatory authority, or under what legislation, the registration or licence was refused, (3) the type or category of registration or licence refused, (4) the date of the refusal, and (5) the reasons for the refusal.

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

Schedule K Criminal disclosure (Item 14)

Item 14.1

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

Item 14.2

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

Item 14.3

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

Item 14.4

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

Schedule L Civil disclosure (Item 15)

Item 15.1

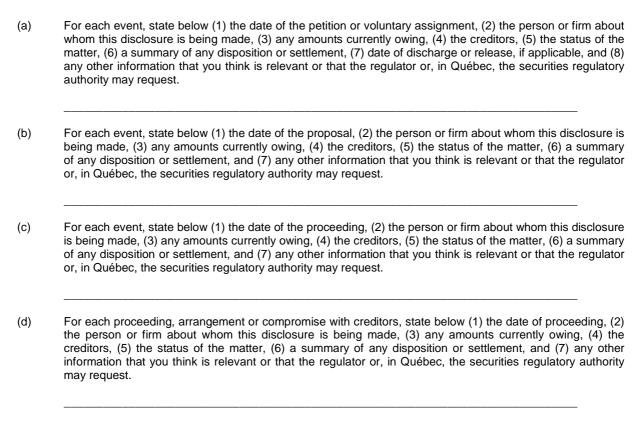
For each outstanding civil proceeding, state below (1) the dates the statement of claim and statement of defence were issued, (2) the name of the plaintiff(s) in the proceeding, (3) whether the proceeding is pending or on appeal, (4) whether the proceeding was against a firm where you are, or were, a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

Item 15.2

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

Schedule M Financial Disclosure (Item 16)

Item 16.1 Bankruptcy



Item 16.2 Debt obligation

For each event, state below (1) the person or firm that failed to meet its financial obligation, (2) the amount that was owing at the time the person or firm failed to meet its financial obligation, (3) the person or firm to whom the amount is, or was, owing, (4) any relevant dates (for example, when payments are due or when final payment was made), (5) any amounts currently owing, and (6) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request, including why the obligation has not been met/satisfied.

Item 16.3 Surety bond or fidelity bond

For each bond refused, state below (1) the name of the bonding company, (2) the address of the bonding company, (3) the date of the refusal, and (4) the reasons for the refusal.

Item 16.4 Garnishments, unsatisfied judgments or directions to pay

For each garnishment, unsatisfied judgment or direction to pay regarding your indebtedness, indicate below (1) the amount that was owing at the time the garnishment, judgment or direction to pay was rendered, (2) the person or firm to whom the amount is, or was, owing, (3) any relevant dates (for example, when payments are due or when final payment was made), (4) the percentage of earnings to be garnished or the amount to be paid, (5) any amounts

currently	owing,	and	(6)	any	other	information	that	you	think	is	relevant	or	that	the	regulator	or,	in	Québec,	the
securities	regula	tory a	utho	ority	may re	equest.													

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

Name of firm (whose business is trading in or advising on securities or derivatives, or both): Partner What is your relationship to the firm? Major shareholder What is the period of this relationship? From: (if applicable) (YYYY/MM) (YYYY/MM) 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 when you are registered or approved as a result of the review of this form. If acquiring shares when you are so approved or registered, state the source (for example, treasury shares, or if upon transfer, state name of transferor). b) State the market value (approximate, if necessary) of any subordinated debentures or bonds of the firm to be held by you or any other subordinated loan to be made by you to the firm: If another person or firm has provided you with funds to invest in the firm, provide the name of the person or c) 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", provide the name of the person or firm and state the relationship between you and that person or Have you directly or indirectly given up any rights relating to these securities or this partnership interest, or e) do you, when you are registered or approved as a result of the review of this form, intend to give up any of these rights (including by hypothecation, pledging or depositing as collateral the securities or partnership interest with any firm or person)? Yes No П If "Yes", provide the name of the person or firm, state the relationship between you and that person or firm and describe the rights that have been or will be given up: Is a person other than you the beneficial owner of the shares, bonds, debentures, partnership units or notes f) held by you?

Yes

No

If	"Yes", complete (g), (h)	and (i).							
N	Name of beneficial owner:								
L	ast name	First name	Second name (N/A □)	Third name (N/A □)					
R	esidential address:								
(r	(number, street, city, province, territory or state, country, postal code)								
0	Occupation:								

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

Alberta

Alberta Securities Commission Suite 600, 250–5th St. SW Calgary, AB T2P 0R4 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

Canada)

Manitoba

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

Fax: (204) 945-0330

New Brunswick

Financial and Consumer Services Commission of New Brunswick / Commission des services financiers et des services aux consommateurs du Nouveau-Brunswick Suite 300, 85 Charlotte Street Saint John, NB E2L 2J2

Attention: Director of Securities Telephone: (506) 658-3060

Newfoundland and Labrador

Superintendent of Securities, Service NL Government of Newfoundland and Labrador P.O. Box 8700 2nd Floor, West Block Confederation Building St. John's, NL A1B 4J6

Attention: Manager of Registrations

Telephone: (709) 729-5661

Nova Scotia

Nova Scotia Securities Commission Suite 400, 5251 Duke Street Halifax, NS B3J 1P3

Attention: Deputy Director, Capital Markets

Telephone: (902) 424-7768

Nunavut

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

Attention: Deputy Registrar of Securities

Telephone: (867) 975-6590

Ontario

Ontario Securities Commission 22nd Floor 20 Queen Street West Toronto, ON M5H 3S8

Attention: Compliance and Registrant Regulation

Telephone: (416) 593-8314 e-mail: registration@osc.gov.on.ca

Prince Edward Island

Securities Office
Department of Community Affairs and Attorney General
P.O. Box 2000
Charlottetown, PE C1A 7N8
Attention: Deputy Registrar of Securities

Telephone: (902) 368-6288

Québec

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

Attention: Responsable de l'accès à l'information Telephone: (514) 395-0337 or (877) 525-0337

Saskatchewan

Financial and Consumer Affairs Authority of Saskatchewan Suite 601, 1919 Saskatchewan Drive Regina, SK S4P 4H2 Attention: Deputy Director, Capital Markets

Telephone: (306) 787-5871

Yukon

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

Attention: Superintendent of Securities

Telephone: (867) 667-5314

Northwest Territories

Government of the Northwest Territories Department of Justice 1st Floor Stuart M. Hodgson Building 5009 – 49th Street Yellowknife, NWT X1A 2L9 Attention: Deputy Superintendent of Securities Telephone: (867) 920-8984

Self-regulatory organization

Investment Industry Regulatory Organization of Canada 121 King Street West, Suite 2000 Toronto, Ontario M5H 3T9 Attention: Privacy Officer Telephone: (416) 364-6133 E-mail: PrivacyOfficer@iiroc.ca