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

GENERAL INSTRUCTIONS

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

Terms

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

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

"Derivatives" means fina ncial i nstruments, s uch as futures contracts (i ncluding ex change tra ded contra cts), futures options a nd s waps w hose market pri ce, va lue or p ayment o bligations are derived from, or based on, o ne or more underlying interests. Derivatives can be in the form of instruments, agreements or securities.

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

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

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

How to submit this form

NRD format

Submit this form at the National Registration Database (NRD) website in NRD for mat at www.nrd.ca. You are on ly required to submit one form regardless of the number of registration categories you are see king. If you have any questions, contact the compliance, registration or legal department of the sponsoring firm or a legal ad viser with securities regulation experience, or visit the NRD information website at www.nrd-info.ca.

Format, other than NRD format

If y ou are re lying on the tem porary hardship e xemption in sect ion 5.1 of N ational Ins trument 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 si milar 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 a nswer all of the questions that apply to you. If you have questions, contact the c ompliance, re gistration or legal d epartment of the s ponsoring firm or a leg al a dviser with s ecurities regulation experience, or visit the National Registration Database information website at www.nrd-info.ca.

Item 1 Name

1. Legal name

 Last name
 First name
 Second name (N/A [])
 Third name (N/A [])

NRD number (if applicable)

2. Other personal names

Are you currently, or have you ever be en, known by any names other than your full leg al name above, for example, nicknames or names due to marriage?

Yes 🗌 No 🗌

If "yes", complete Schedule A.

3. Use of other names

Are you currently, or have you ever used, operated under, or carried on business under any name other than the name(s) mentioned above, for example, trade names for sole proprietorships or team names?

Yes 🗌 No 📃

If "yes", complete Schedule A.

Item 2 Residential address

Provide all of your residential addresses, including any foreign residential addresses, for the past 10 years.

1. Current and previous residential addresses

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

Telephone number _____

Lived at this address since (YYYY/MM)

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

2. Mailing address

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Check here if y our mailing address is t he same as y our current residential address provided above. Otherwise, complete the following:

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

Item 3 Personal information

1.	Date of birth		
		(YYYY/MM/DD)	
2.	Place of birth _	(aity province torrito)	ry or state, country)
		(enty, province, territor	y of state, country)
3.	Gender	Female 🗌 Male	
4.	Eye colour		
5.	Hair colour		
6.	Height	in. or	cm
7.	Weight	lbs. or	
Item 4	Citizenship		
1.	Citizenship info	ormation	
What is	your country of	citizenship?	
	Canada		
	Other, specify:		
2.	If you are a citiz	zen of a country other th	an Canada, complete the following for that citizenship.
	Check here if ye	ou do not have a valid pa	assport. Otherwise, provide:
Passpor	t number:		
Date of	issue:		
(YYY	•	Y/MM/DD)	
Place of	f issue:	province, territory or state	
_			e, country)
Item 5	Registration ju	irisdictions	
1.	Are you filing t	his form under the passp	port system / interface for registration?
	Only choose "n	o" if:	
	(a) you are seek(b) you are seek	ting registration only in the state of the second sec	your principal jurisdiction, ed individual only in your principal jurisdiction
	and you are not	currently registered und	ler 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

1. On Schedule C, check each category for which you are s eeking registration as an individual or review as a permitted individual. If you are seeking review as a permitted individual, check each category that describes your your sponsoring firm.

2. If you are seeking registration as a representative of a mutual fund dealer or of a scholarship plan dealer in Québec, are you covered by your sponsoring firm's professional liability insurance?

Yes	🗌 No					
If "No [?]	", state:					
The na	me of your insure	er				
Your p	olicy number			_		

Item 7 Address and agent for service

1. Address for service

You must have one address for servic e in each province or territory where y ou are submitting this form. A reside ntial address or a business address is acceptable. A post office box is not acceptable. Complete Schedule D for each additional address for service you are providing.

Address for service:

2. Agent for service

If you have appointed an agent for service, provide the following information for the agent in each province or territory where you have an agent for service. The address of your agent for service must be the same as the address for service above. If your agent for service is not an individual, provide the name of your contact person.

Name of agent for service:

Contact person: _____

L

ast name, First name

Item 8 Proficiency

1. Course, examination or designation information and other education

Complete Schedule E to i ndicate each course, examination and designation that is required for registration or a pproval 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

If you have a student number for a course that you successfully completed with one of the following organizations, provide it below:

CSI Global Education (formerly Canadian Securities Institute):

IFSE Institute (formerly IFIC):

Institute of Canadian Bankers (ICB): _____

CFA Institute (formerly AIMR):

Advocis (formerly CAIFA):

RESP Dealers Association of Canada:

Other: _____

3. Exemption refusal

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

Yes 🗌 No

If "Yes", complete Schedule F.

4. Relevant securities industry experience

If you are an individual applying for IIROC approval, select "Not Applicable below".

If you have not been registered in the last 36 months and you passed the required examination more than 36 months ago, do you consider that you have gained 12 months of relevant securities industry experience during the 36 month period?

$res \square no \square n/A \square$	Yes	🗌 No	□ N/A	
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If "yes", complete Schedule F.

Item 9 Location of employment

1. Provide the following information for y our new sponsoring firm. If you will be working out of more than one location, provide the following information for the location out of which you will be doing most of your business.

	NRD location number:
	Unique Identification Number (optional) :
	Business address:
	Telephone number: () Fax number: ()
2. in	If the firm has a foreign head office, and/or you are not a resident of Canada, provide the address for the location which you will be conducting business.
	Business address:
	Telephone number: () Fax number: ()
[The fol	lowing under #3 "Type of location", #4 and #5 is for a Format other than NRD format only]
3.	Type of location - for Format other than NRD format only:
	Head office Branch or Business Location Sub-branch
4.	Name of supervisor or branch manager:
5.	Check here if the mailing address of the location is the same as the business address provided above. Otherwise, complete the following:
	Mailing address:

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 s ponsoring firm and any employment and business activities outside your sponsoring firm. Also in clude all business related officer or d irector p ositions and any other equivalent positions held, whether you receive compensation or not.

Item 11 Previous employment and other activities

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

Item 12 Resignations and terminations

Have y ou e ver resigne d, been term inated or be en d ismissed for cause by an em ployer from a positio n follow ing allegations that you:

1. Violated any statutes, regulations, rules or standards of conduct?

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Yes 🗌 No

If "Yes", complete Schedule I Item 12.1.

2. Failed to appropriately supervise compliance with any statutes, regulations, rules or standards of conduct?

Yes 🗌 No 📃

If "Yes", complete Schedule I Item 12.2.

- 3. Committed fraud or the wrongful taking of property, including theft?
 - Yes 🗌 No 📃

If "Yes", complete Schedule I Item 12.3.

Item 13 Regulatory disclosure

1. Securities and derivatives regulation

- a) Other than a registration or permitted individual status that has been recorded under this NRD number, are you now, or have you ever been, registered or licensed with any securities regulator or derivatives regulator or both in any province, territory, state or country to trade in or advise on securities or derivatives or both?
 - Yes 🗌 No

If "Yes", complete Schedule J, Item 13.1(a).

b) Have you ever been refused registration or a licence to trade in or advise on securities or derivatives or both in any province, territory state or country?

Yes	No	
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If "Yes", complete Schedule J, Item 13.1(b).

c) Have y ou ev er been d enied the b enefit of any exem ption from registration p rovided i n an y securities o r derivatives or both legislation or rules in any province, territory, state or country, other than what was disclosed in Item 8(3) of this form?

Yes No

If "Yes", complete Schedule J, Item 13.1(c).

d) Are y ou now, or have y ou e ver been subject t o a ny disci plinary pro ceedings or a ny ord er resulting from disciplinary proceedings under a ny secur ities le gislation or derivatives le gislation or b oth i n a ny prov ince, territory, state or country?

Yes 🗌] No	
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If "Yes", complete Schedule J, Item 13.1(d).

2. SRO regulation

a) Other than an approval that has been recorded under this NRD number, are you now, or have you ever been, an approved person of an SRO or similar organization in any province, territory, state or country?

Yes 🗌] No 🗌
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If "Yes", complete Schedule J, Item13.2(a).

b) Have you ever been refused approved person status by an SRO or similar organization in any province, territory, state or country?

res NO	Yes	□ No	
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If "Yes", complete Schedule J, Item 13.2(b).

c) Are you now, or have you ever been, subject to any disciplinary proceedings conducted by any SRO or similar organization in any province, territory, state or country?

Yes No

If "Yes", complete Schedule J, Item 13.2(c).

3. Non-securities regulation

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 a dvise on securities or derivatives or both in any province, territory, state or country (e.g. insurance, real estate, accountant, lawyer, teacher)?

Yes	🗌 No	
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If "Yes", complete Schedule J, Item 13.3(a)

b) Have you ever been refused registration or a licence under any legislation relating to your professional activities unrelated to securities or derivatives in any province, territory, state or country?

Yes [] No [
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If "Yes", complete Schedule J, Item 13.3(b).

c) Are you now, or have you ever be en, a subject of any disciplinary actions conducted under any legislation relating to your professional activities unrelated to securities or derivatives in any province, territory, state or country?

Yes	🗌 No	
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If "Yes", complete Schedule J, Item 13.3(c).

Item 14 Criminal disclosure

Offences you must disclose

You must disclose all criminal offences committed in any province, territory, state or country. This includes, but is not limited to, criminal offences 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) (or its predecessor, the *Narcotic Control Act* (Canada)). This includes pleas or findings of guilt for impaired driving, which are *Criminal Code* (Canada) matters. If y ou have been found guilty of a criminal offence, y ou must disclose the offence even if you have been granted an absolute or conditional discharge.

With respect to questions 14.2 and 14.4, if you or your firm has been found guilty of a criminal offence, or participated in the Alternative Measures Program within the past three years, yo u must disclose that offence even if an absolute or conditional discharge has been granted, or the charge has been dismissed, withdrawn or stayed. Some exceptions apply to stayed charges, and the Alternative Measures Program which are outlined below.

If you do not disclose a criminal offence under any statute other than the former *Young Offenders Act* (Canada) *or the Youth Criminal Justice Act* (Canada), regulators or, i n Québec, the securi ties regulatory authority or self regulatory organization may treat it as a non-disclosure of material information.

Offences you do not have to disclose

The appropriate response is "No" if any of the following circumstances apply.

You are not required to disclose:

- crimes for which you rece ived an absolute or conditional discharge if the crime has been purged from the criminal records in accordance with the *Criminal Records Act* (Canada)
- speeding, parking violations or any offence for which a pard on has been granted under the *Criminal Records Act* (Canada) and the pardon has not been revoked
- stayed charges for summary conviction offences that have been stayed for six months or more
- stayed charges for indictable offences that have been stayed for a year or more, and
- offences under the former Young Offenders Act (Canada) or the Youth Criminal Justice Act (Canada)

With respect to questions 14.2 and 14.4, you are not required to disclose an offence for which you or your firm was found guilty if you or the firm participated in the Alternative Measures Program more than three years ago for that offence.

1. Are there any outstanding or stayed charges against you alleging a criminal offence that was committed in any province, territory, state or country?

Yes 🗌	No	
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If "Yes", complete Schedule K, Item 14.1.

2. Have you ever been found guilty, pleaded no contest to, or granted an absolute or conditional discharge from any criminal offence that was committed in any province, territory, state or country?

Yes 🗌 No 🗌

If "Yes", complete Schedule K, Item 14.2.

3. To the best of your knowledge, are there any outstanding charges against any firm of which you were, at the time the criminal offence was alleged to have taken place in any province, territory, state or country, a partner, director, officer or major shareholder?

Yes No

If "Yes", complete Schedule K, Item 14.3.

- 4. To the best of your knowledge, has any firm, when you were a partner, officer, director or major shareholder, ever been found guilty, pleaded no contest to or granted an absolute or conditional discharge from a criminal offence that was committed in any province, territory, state or country?
 - Yes 🗌 No 🗌

If "Yes", complete Schedule K, Item 14.4.

Item 15 Civil disclosure

- 1. Are there cur rently any outstanding civil actions all eging fraud, theft, deceit, misrepresentation or similar misconduct against you or a firm where you are or were a partner, director, officer or major shareholder in any province, territory, state or country?
 - Yes 🗌 No 📃

If "Yes", complete Schedule L, Item 15.1.

2. Have you or a firm where you are or were a partner, director, officer or major shareholder ever been a defendant or respondent in any civil proceeding in which fraud, theft, deceit, misrepresentation or similar misconduct is, or was, successfully established in a judgment in any province, territory, state or country?

Yes 🗌 No 🗌

If "Yes", complete Schedule L, Item 15.2.

Item 16 Financial disclosure

1. Bankruptcy

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

a) Had a petition in bankruptcy issued or made a voluntary assignment in bankruptcy or any similar proceeding?

Yes 🗌 No

If "Yes", complete Schedule M, Item 16.1(a).

b) Made a proposal under any legislation relating to bankruptcy or insolvency or any similar proceeding?

Yes 🗌 No

If "Yes", complete Schedule M, Item 16.1(b).

c) Been subject to proceedings under any legislation relating to the winding up or dissolution of the firm, or under the *Companies' Creditors Arrangement Act* (Canada)?

Yes [No	
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If "Yes", complete Schedule M, Item 16.1(c).

d) Been subject to or initiated any proceedings, arrangement or compromise with creditors? This includes having a receiver, receiver-manager, administrator or trustee appointed by or at the request of creditors, privately, through court process or by order of a regulatory authority, to hold your assets.

Yes	🗌 No
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If "Yes", complete Schedule M, Item 16.1(d).

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2. Debt obligations

Over the past 10 years, have you failed to meet a financial obligation of \$5,000 or more as it came due or, to the best of your knowledge, has any firm, while you were a partner, director, officer or major shareholder of that firm, failed to meet any financial obligation of \$5,000 or more as it came due?

Yes 🗌 No

If "Yes", complete Schedule M, Item 16.2.

3. Surety bond or fidelity bond

Have you ever been refused for a surety or fidelity bond?

Yes 🗌] No
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If "Yes", complete Schedule M, Item 16.3.

4. Garnishments, unsatisfied judgments or directions to pay

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 N	0
Garnishment		
Unsatisfied judgment		
Direction 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) whose business is trading in or advising on securities or derivatives or both?

Yes	🗌 No	
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If "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 both or as an Approved Person under SRO rules.

Item 20 Notice of collection and use of personal information

The personal information r equired u nder this form is collected on behalf of, and us ed by, the securities r egulatory authorities in the juris dictions set out in Sched ule O to administer and enforce c ertain provisions of t heir 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, rec ords from other gover nment or non-governmental regulators or SRO s, 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 ap plicable, in accordance with the legal authority of the securities regulatory authorities while the individual is registered with or a pproved by it. Securities regulatory authorities may contact go vernment and private b odies 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 jurisd iction in whi ch 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 ac cordance with the applicable securities legislation and the rules of the SROs.

By submitting this form, you authorize the SROs to wh ich this form is submitted to collect any information from any source whatsoever. This includes, but is not l imited to, personal confidential information about you that is o therwise protected by law such as, police, credit, employment, education and proficiency course completion records, and records from other g overnment or non-governmental regulatory authorities, securities commissions, stock ex changes, or other SROs, private bodies, agencies, individuals or corporations, as may be necessary for the SROs to com plete their review of your form or continued fitness for registration or approval in accordance with their rules for the duration of the period you rem ain so reg istered or appr oved. You furt her consent to a nd au thorize 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 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 s upplemented, and y ou ag ree to ke ep yourself fully inform ed ab out them as they are am ended and supplemented. You submit to the jurisdiction of the SROs from whom you are seeking registration or a pproval, or of which your sponsoring firm is now or in the future becomes a member or part icipating organization and, wherever applicable, their Governors, Directors and Committees. You agree that any registration or a pproval granted pursuant to

this form may be revoked, term inated or suspended at any time in accor dance with the then applic able rules of the respective SROs. In the event of any such revocation or term ination, you must term inate 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 c ompany or other a ffiliate of such member without obtaining the approval of or registration with the SROs, in accordance with their rules.

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

You certify that you have discussed the questions in this form, together with this Agreement, with an Officer or Branch Manager of your sponsoring member firm and, to your knowledge and belief, the authorized Officer or Branch Manager was satisfied that y ou fully understood the questions and t he terms of this Agre ement. You f urther certify that y our business activities that are subject to sec urities rules a nd derivatives rules or bo th will b e limited strictly to those permitted by the category of your registration or approval.

Item 21 Warning

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

Item 22 Certification

1. Certification - NRD format

I confirm I have dis cussed 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.

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.

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, and
- all of the information provided on this form is true, and complete.

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 sig	ning officer or partner	
Title of authorized sign	ing officer or partner	
	·····	
Signature of authorized	signing officer or partner	
Date signed		
(YYY	Y/MM/DD)	

SCHEDULE A Names (Item 1)

Item 1.2 Other	r personal names		
Name 1:			
Last name	First name	Second name (N/A)	Third name (N/A)
	ns for t he use of th	· ·	age, divorce, court order, commonly used name or
When did you use	this name?	From:	To:
		(YYYY/MM)	(YYYY/MM)
Name 2:			
Last name	First name	Second name (N/A)	Third name (N/A)
	ns for t he use of th		age, divorce, court order, commonly used name or
When did you use	this name?	From:	To:
		(YYYY/MM)	(YYYY/MM)
Name 3:			
Last name	First name	Second name (N/	A D Third name (N/A D)
		is name (for exam ple, marria	age, divorce, court order, commonly used name or
When did you use	this name?	From:	To:
		(YYYY/MM)	(YYYY/MM)
Item 1.3 Use of	f other names		
Name 1:			
Name:			
Provide the reason	s for the use of this o	other name (for example, trade	e name or team name)?:
If this other name aname?	is or was used in co	nnection with any sponsoring	firm, did the sponsoring firm approve the use of the
Yes 🗌 No	N\A		
When did you use	this name?	From:	To:
		(YYYY/MM)	(YYYY/MM)

Name 2:

Name:		
Provide the reasons for the use of the	is other name (for example,	trade name or team name):
If this other name is or was used in name?	connection with any sponso	ring firm, did the sponsoring firm approve the use of the
Yes No		
When did you use this name?	From:	To:
	(YYYY/MM)	(YYYY/MM)
Name 3:		
Name:		
Provide the reasons for the use of th	is other name (for example,	trade name or team name):
If this other name is or was used in	connection with any sponso	ring firm, did the sponsoring firm approve the use of the

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 📃

When did you use this name?

From:

To:

(YYYY/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:	t, city, province, territory of	r state, country)	
When did you live at this address?	From:	To:	
	(YYYY/MM)	(YYYY/MM)	
Address 2:			
Residential address:	t, city, province, territory of	r stoto popurtury)	
(number, suee	i, city, province, territory of	r state, country)	
When did you live at this address?	From:	To:	
	(YYYY/MM)	(YYYY/MM)	
Address 3:			
Residential address:	· · · · · ·		
(number, stree	t, city, province, territory of	r state, country)	
When did you live at this address?	From:	To:	
	(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
- [] 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

Individual categories and permitted activities

- [] Floor Trader
- [] Salesperson
- [] Branch Manager
- [] Adviser
- [] Officer Specify title:
- [] Director
- [] Partner
- [] Futures Contracts Portfolio Manager
- [] Associate Futures Contracts Portfolio Manager
- [] IIROC approval only
- [] Local

Québec - activities relating to derivatives

For information purposes, indicate whether you will carry on activities as a representative of:

- [] An Investment Dealer Acting as a Derivatives Dealer
- [] A Portfolio Manager Acting as a Derivatives Portfolio Manager

SCHEDULE D Address and agent for service (Item 7)

Item 7.1 Address for service

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 service:	(number, street, city, province or territory, postal code)
Telephone number: (
E-mail address:	
Item 7.2 Agent for	service
If you have appointed a	an a gent for a equical provide the following information about the agent. The add

If you have appointed an agent for service, provide the following information about the agent. The address for service provided above must be the address of the agent named below.

Name of agent for service:

(if applicable)

Contact person:

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 indicate by checking the box below whether you are a current member of the CFA Institute permitted to use the CFA Charter.

Yes	🗌 No	
-----	------	--

If "no", please explain why you no longer hold this designation:

If you have listed the CIM designation in Item 8.1, please indicate by checking the box below whether you are currently permitted to use the CIM designation.

Yes	□ No	
103		

If "no", please explain why you no longer hold this designation:

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: ______(YYY

Y/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: _______(YYY

Y/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: ______(YYY

Y/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 act ivities which you h ave participated in during the last 36 months and which 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 with your sponsoring firm and with a ll other organizations. This includes any business related offic er or direc tor positions held, or any other equivalent positions held, whether you receive compensation or not.

1. Start date _____

(YYY Y/MM/DD)

2. Firm information

Check here if this activity is employment with your sponsoring firm.

If the act ivity is with your sponsoring firm, you are not required to indicate the firm name and address information below:

Name of business or employer:

Address of business or employer:

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

Name and title of your immediate supervisor:

3. Description of duties

Describe all employment and business activities related to this employer. Include the nature of the business and your duties, title or relationship with the business. If y ou are seeking registration that requires s pecific experience, include details with this firm such as level of responsibility, value of accounts under direct supervision, number of y ears of experience, and percentage of time spent on each activity.

4. Number of work hours per week

How many hours per week do you devote to this business or employment?

If this activity is employment with your sponsoring firm and you work less than 30 hours per week, explain why.

5. Conflicts of interest

If you have more than one employer or are engaged in business related activities:

A. Disclose a ny potential for confusion by clients and any potential for conflicts of interest arising from your multiple employment or business related activities or proposed business related activities.

B. Indicate whether or not any of y our employers or organizations where you engage in business related activities are listed on an exchange.

C. Confirm whether the firm has procedures for minimizing potential conflicts of interest and if so, confirm that you are aware of these procedures.

D. State the name of the person at your sponsoring firm who has reviewed and approved your multiple employment or business related activities or proposed business related activities

E. 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 ot her similar statuses. Do not i nclude 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 y ou were employed or h ad business activities in the securities or derivatives industry or both during and before the 10-year period, disclose all your securities and derivatives or both employment or business activities (both before and during the 10-year period).

Full-	nployed time student loyed or self-employed	
From: (YYY	Y/MM)	
To: (YYY	Y/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 s pecific experience, include details of that experience. Examples include level of responsibility, value of a ccounts 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 fi rm 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 al legation of fai lure t o supervise c ompliance with any statutes, re gulations, rul es 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.

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 y ou resigned, were terminated or dismissed for cause, (2) whether y ou resign ed, 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 refuse d the exemption from registration or licence, (3) the type or cate gory 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 issue d the o rder or is c onducting or c onducted the proceeding, (3) the date any no tice of proceeding was issued, (4) the date any order or set tlement was made, (5) a sum mary of any notice, order or settlement (including any sanctions imposed), (6) whether you are or were a part ner, director, officer or major shareholder of the firm and named individually in the order or disciplinary proceeding, and (7) any ot her 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 set tlement was made, (5) as ummary of any notic e, or der or settlement (including any sanct ions imposed), (6) whether you are or were a partner, director, officer or major shareholder of the firm and n amed 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 a gency), (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 set tlement was made, (5) a s ummary of any notic e, or der or settl ement (i ncluding any sanct ions imposed), (6) whether you are or were a partner, director, officer or major shareholder of the firm and n amed individually in the order or disciplinary proceeding and (7) a ny 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 a n absolute or c onditional 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 a n absolute or c onditional 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 pr occeeding, (3) w hether the proceeding is pending or on appeal, (4) w hether the proceeding was against a firm where you a re, or were, a partner, director, officer or major shareholder and whether y ou have been named individually in the al legations, and (5) th e jurisd iction 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

- (a) For each event, state below (1) the date of the petition or voluntary assignment, (2) the person or firm about whom this d isclosure is being made, (3) any amounts currently owing, (4) the creditors, (5) the status of the matter, (6) a summary of any disposition or settlement, (7) date of discharge or release, if applicable, and (8) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request.
- (b) For each event, state below (1) the date of the proposal, (2) the person or firm about whom this d isclosure is being made, (3) any amounts currently owing, (4) the creditors, (5) the st atus of the matter, (6) a summary of any disposition or settlement, and (7) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request.
- (c) For each event, state below (1) the date of the proceeding, (2) the person or firm about whom this disclosure is being made, (3) any amounts currently owing, (4) the creditors, (5) the st atus of the matter, (6) a summary of any disposition or settlement, and (7) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request.
- (d) For each proceeding, arrangement or compromise with creditors, state below (1) the date of proceeding, (2) the person or firm about whom this disclosure is being made, (3) any amounts currently owing, (4) the creditors, (5) the status of the matter, (6) a su mmary of any disposition or settlement, and (7) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request.

Item 16.2 Debt obligation

For each e vent, state below (1) the person or firm that failed t o meet its financial obligation, (2) the am ount 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 obligation has not been met/satisfied.

Item 16.3 Surety bond or fidelity bond

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

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

Firm name:

What is	s your relationshi	p to the firm?	Partner	Major shareholder
What is	the period of thi	is relationship?		
	From:	To:		(if applicable)
(YYY	Y/MM)	(YYY	Y/MM)	
Provide	the following in	oformation:		
a)	propose to acqu	ire when you a o approved or i	re registered or ap	of sec urities, or t he amount of pa rtnership interest y ou own or oproved as a result of the review of this form. If acquiring shares e source (for example, treasury shares, or if upon transfer, state
b)				ary) of any subordina ted debentures or bonds of the firm to be made by you to the firm:
c)				n funds to invest in the firm, provide the name of the person or hat person or firm:
d)	Are the funds to Yes 🗌 No	be invested (o	r proposed to be in	nvested) guaranteed directly or indirectly by any person or firm?
	If "Yes", provid	de the name of	the person or firm	and state the relationship between you and that person or firm:
e)	you, when you	are registere d g by hypotheca	or approved as a r	hts relating to these securities or this partnership interest, or do esul t of the review of this form, intend to give up any of these depositing as collateral the securities or partnership interest with
	Yes 🗌 No			
			the person or firm een or will be give	n, state the relationship between you and that person or firm and n up:
f)	Is a person othe by you?	er than you the	beneficial owner	of the shares, bonds, debentures, partnership units or notes held
	Yes 🗌 No			
	If "Yes", comp	lete (g), (h) and	(i).	

g) Name of beneficial owner:

Last	name	First	name	Secon	d name (<i>if applicable</i>)	Third	name (<i>if applicable</i>)	
h)	Residential ad	dress:						
(number, street, city, province, territory or state, country, postal code)								
i) Occup ation:								

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) 355-4151

British Columbia

British Columbia Securities Commission P.O. Box 10142, Pacific Centre 701 West Georgia Street Vancouver, BC V7Y 1L2 Attention: Freedom of Information Officer Telephone: (604) 899-6500 or (800) 373-6393 (in BC)

Manitoba

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

New Brunswick

New Brunswick Securities Commission Suite 300, 85 Charlotte Street Saint John, NB E2L 2J2 Attention: Director, Regulatory Affairs Telephone: (506) 658-3060

Newfoundland and Labrador

Securities NL Financial Services Regulation Division Department of Government Services P.O. Box 8700, 2nd Floor, West Block Confederation Building St. John's, NL A1B 4J6 Attention: Manager of Registrations Tel: (709) 729-5661

Nova Scotia

Nova Scotia Securities Commission Suite 400, 5251 Duke Street Halifax, NS B3J 1P3 Attention: Deputy Director, Capital Markets Telephone: (902) 424-7768

Northwest Territories

Government of the Northwest Territories P.O. Box 1320 Yellowknife, NWT X1A 2L9 Attention: Deputy Superintendent of Securities Telephone: (867) 920-8984

Nunavut

Legal Registries Division Department of Justice Government of Nunavut P.O. Box 1000 Station 570 Iqaluit, NU X0A 0H0 Attention: Deputy Registrar of Securities Telephone: (867) 975-6590

Ontario

Ontario Securities Commission Suite 1903, Box 55 20 Queen Street West Toronto, ON M5H 3S8 Attention: Compliance and Registrant Regulation Telephone: (416) 593-8314 e-mail: registration@osc.gov.on.ca

Prince Edward Island

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

Québec

Autorité des marchés financiers 800, square Victoria, 22e étage C.P. 246, tour de la Bourse Montréal (Québec) H4Z 1G3 Attention: Responsable de l'accès à l'information Telephone: (514) 395-0337 or (877) 525-0337 (in Québec)

Saskatchewan

Saskatchewan Financial Services Commission Suite 601, 1919 Saskatchewan Drive Regina, SK S4P 4H2 Attention: Director Telephone: (306) 787-5842

Yukon

Yukon Securities Office Department of Community Services P.O. Box 2703 C-6 Whitehorse, YT Y1A 2C6 Attention: Superintendent of Securities Telephone: (867) 667-5225

Self-regulatory organization

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