# APPLICATION FOR LICENSING AND REGISTRATION UNDER THE TRUST AND CORPORATE SERVICES PROVIDERS ACT, 2017

### VERIFICATION OF PREVIOUS EMPLOYMENT

INSTRUCTIONS:	a) All questions must be completed.	
	b) Where a question or statement is not applicable to you, this must be so indicated by the abbreviation "N/A".	
	c) Please use a tick ( $\checkmark$ ) to indicate the applicable response where required.	

# PART A. DECLARATION OF INDIVIDUAL APPLICANT/PRINCIPAL REPRESENTATIVE/RELEVANT PERSON(S)

(To be completed by (a) the person on whose behalf the application for registration as a principal representative is being made or (b) the relevant person(s) for whom fitness and propriety assessment is to be conducted)

Role of the declarant:	Individual Applicant		
	Principal Representative		
	Relevant Person		

Name of declarant:

Name of current employer:

**2.** Date of employment:

#### Please note:

- a) All the questions below, relate to the licensee or registrant related to the provision of insurance, securities, pensions administration, corporate and trust services to which the declarant was previously employed while licensed or registered with the Financial Services Commission.
- b) If your answer is "yes" to any part of questions 3, 4 or 5 please provide details on a separate sheet of paper and submit along with this form.
  - 1. Name of licensee or registrant to which the declarant was previously employed:

(Name of Company, Partnership, Firm, Intermediary or Individual Licensee)

From: To:

3.	Were you discharged, permitted to resign or did you voluntarily resign after allegation were made against you of:				
	a. Violating any statutes, regulations, rules or industry standards of conduct rela to the provision of insurance, securities, pensions administration, corporate and tr services, banking, or other financial services?				
		No	Yes	N/A	
	b.	Fraud, corruption, di	ishonesty, theft, or money laur	ndering?	
		No	Yes	N/A	
	c.	-		ovision of insurance, securities, vices, banking, or other financial	
		No	Yes	N/A	
4.		you the subject of a f-regulatory organizat	• •	ion from any regulatory authority	
		No	Yes		
5.	Were you the subject of an investment-related, customer-initiated complaint, civil litigation or arbitration arising from allegations that you violated any statutes, regulations, rules, or industry standards of conduct related to the provision of insurance, securities, pension administration, corporate and trust services, banking, or other financial services?				
		No	Yes		

## **DECLARATION**

I, the undersigned, do solemnly declare that I have read and understood the questions in this form as well as the answers made by myself thereto and that the statements of fact made therein, and the attachments are to the best of my knowledge, information, and belief true and correct.

Taken and Acknowledged

This day of , 20 )

Before me 
Justice of the Peace (or Notary Public) for the parish of )

# PART B. EMPLOYER DECLARATION (To be completed by the individual applicant's/principal representative's/relevant person's current employer)

	a) Where a statement is not applicable, this must be so indicated by the abbreviation "N/A".				
INSTRUCTIONS:	b) Please use a tick (√) to indicate the applicable response where required.				
		able response, kindly state material			
I, the undersigned, do		applicant licensee/licensed entity)			
has conducted satisfac	(name of indiv	vidual applicant/principal ve/relevant person)			
and to the best of my l		ant/principal representative/relevant			
_	s employer related to the provision of ins, corporate and trust services.	surance, securities, pensions			
State any material facts	about his/her character in current employ	ment:			
□ 2 was amplaya	l to				
□ 2. was employed	(name of previous employer) as	a(n) (position held)			
From:	То:				
3. In relation to	his/her services to	(name of			
		(name of individual vas not discharged, permitted to resign, against him/her of:			

- a. Violating any statutes, regulations, rules, or industry standards of conduct related to the provision of insurance, securities, pensions administration, corporate and trust services, banking or other financial services;
- b. Fraud, corruption, dishonesty, theft, or money laundering;
- c. Failure to supervise or properly manage the provision of insurance, securities, pensions administration, corporate and trust services, banking, or other financial services.

Taken	and	Ackno	wl	led	geo	l
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This	day of	, 20	)	
	•		)	(Signature of Authorized Officer,
			)	Partner or Individual Licensee)
Before me -			)	
			)	
			)	
Justice of th	e Peace (or Notary	Public) for the	)	
			)	
parish of			)	