

## **Application for approval of Key Individual**

This form must be submitted by an Applicant or an existing Recognised Body applying for approval of an individual (hereafter “the candidate”) nominated to act as a Key Individual, as defined in the Financial Services and Markets Regulations 2015 (FSMR), Part 12 - *Recognised Bodies, Remote Bodies, Remote Members and OTC Derivatives*, and in the Market Infrastructure Rulebook (MIR) - Part 2.3 *Governance and Key Individuals*.

In advance of submitting an application to the FSRA, the Applicant or Recognised Body must make all reasonable enquires, and undertake all necessary due diligence, concerning the proposed Key Individual’s fitness and propriety to carry out the Regulatory Functions to which the application relates.

In the event that FSRA requires additional information, the FSRA will contact the person identified as the contact person in this Application.

Various Rules, sections, or chapters of the FSRA Rulebooks are referred to within. These references are provided only as guidance and are not an exhaustive list of the Rules that may be applicable. It is the responsibility of the Recognised Body to ensure compliance with all applicable FSRA Rules.

The use of abbreviations or acronyms should be avoided, but where used they must be clearly defined.

*Notes:*

\**Terms defined in FSMR, the FSRA Glossary (GLO) Rulebook, or the glossary sections in other Rulebooks are identified by the capitalisation of the initial letter of a word or of each word in a phrase, unless the context otherwise requires the word to have its natural meaning.*

\*\**For sake of clarity, the term “Applicant” in this (and all other FSRA forms) refers to a new “firm” applying to become a Recognised Body. The term Recognised Body, defined in the FSRA Glossary (GLO) Rulebook means a “Recognised Investment Exchange” or a “Recognised Clearing House”.*

\*\*\**The terms “you” and “your” as used throughout are not implied in the personal sense, but rather refer to the firm submitting this application. The terms “we” and “our” refer to the FSRA.*

**Recognised Body – Key Individuals Application-1  
(RBK-1)**



<i>Name of the candidate:</i>	
<i>Name of the Applicant or Recognised Body:</i>	

# Recognised Body – Key Individuals Application-1 (RBK-1)



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# 1

## General information about the Applicant or the Recognised Body

<b><i>Details about the Applicant or Recognised Body</i></b>	
<i>Name of the Applicant or of the Recognised Body:</i>	
<i>ADGM Recognition Order number (if a Recognised Body):</i>	
<i>The Applicant's or Recognised Body's contact person:</i>	
<i>Position or title of contact person:</i>	
<i>Contact person's telephone number:</i>	
<i>Contact person's e-mail address:</i>	

## 2

## Information about the candidate

<i>Details about the proposed Key Individual</i>			
<i>Full name in passport:</i>		<i>Place of birth:</i>	
<i>Date of birth:</i>		<i>Email address:</i>	
<i>Telephone number:</i>		<i>Residential Address:</i>	
<i>Mailing address (if different):</i>		<i>Is this your current residential address:</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Previous address if &lt; 3 years at current address:</i>		<i>Dates at above address:</i>	
<i>Has the individual ever used any other name(s)?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>If "Yes", the name(s) previously used:</i>	
<i>If you answered "Yes" state the reason(s) for the change(s) of name(s):</i>			
<i>Does the individual currently hold, or have they held, Key Individual or Approved Person status in the ADGM?</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>If "Yes", provide full details of the role(s) and the name(s) of the Recognised Body or Authorised Person:</i>			

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Provide the requested details of all current and previous citizenships (if any) and any associated residencies held by the candidate:

<b>1. Citizenship Details:</b>	
<i>Citizenship:</i>	<i>Passport Number:</i>
<i>Date of Issue:</i>  <i>National identification number:</i>	<i>Date of Expiry:</i>  <i>National identification type (ID card, etc.):</i>
<i>Did candidate hold previous citizenships?</i>	<i>Associated residences if any:</i>
<i>Does candidate hold more than one citizenship?</i>	
<i>National identification type (if 'Other' is selected):</i>	

## **3 Role and Experience**

As required by MIR Rule 2.3.2 – *Key Individuals*, a Recognised Body must, for the purposes of the proper discharge of its Regulatory Functions, appoint the following Key Individuals, where deemed necessary and required by the Regulator, ensuring that they are held by one or more individuals at all times.

In the table below, please indicate the Key Individual function(s) that the candidate is proposed for:

<b><i>Key Individuals</i></b>	<b><i>Key Individual function(s)</i></b>
Members of the Governing Body:	<input type="checkbox"/>
Senior Executive Officer:	<input type="checkbox"/>
Finance Officer:	<input type="checkbox"/>
Chief Operating Officer:	<input type="checkbox"/>
Chief Technology Officer:	<input type="checkbox"/>
Chief Information Security Officer:	<input type="checkbox"/>
Head of Market Supervision:	<input type="checkbox"/>
Chief Compliance Officer:	<input type="checkbox"/>
Money Laundering Reporting Officer:	<input type="checkbox"/>
Chief Risk Officer:	<input type="checkbox"/>
Other functions within the Recognised Body business are deemed Regulatory Functions, requiring the appointment of a Key	<input type="checkbox"/>

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Individual to head such function	
Please describe any other functions deemed Regulatory Functions if any	
Resident of UAE upon licensing. If not, please state the reason	

<b>The candidate's role and experience:</b>	
<i>Proposed position/title:</i>	
<i>Commencement date of Proposed position/Regulatory Function(s):</i>	
<p><i>Provide a detailed job description below of the role to be taken up by the candidate. It should clearly state the responsibilities of the Regulatory Functions to be carried out:</i></p>   	
<p><i>For Members of Governing Body, how much time will be devoted to the role(s) each week?</i></p>	

Please provide details of how the candidate has been determined to be fit and proper to act as a Key Individual under MIR 2.3.5.
<b>Technical competence:</b> <i>include details of the relevant qualifications and training specific to the proposed role on which basis it has been determined that the candidate holds the necessary competency for the role to be carried out:</i>
<b>Relevant experience:</b> <i>include details of the relevant experience specific to the proposed role on which basis it has been determined that the candidate holds the necessary experience for the role to be carried out:</i>

## 4 Educational and professional qualifications

**List all higher education degrees and diplomas held by candidate:**

*Please provide list:*

<i>Dates:</i>		<i>Awarding institution and location:</i>	<i>Details of degree or diploma:</i>
<i>From:</i>	<i>To:</i>		

**List all professional qualifications or memberships held by candidate:**

*Please provide list:*

<i>Dates:</i>		<i>Awarding body and location:</i>	<i>Full name of qualification:</i>
<i>From:</i>	<i>To:</i>		

## 5 Employment history

*Provide a summary of the candidate's career for the past ten years. Any gaps of more than one month must be explained, with relevant details provided; this might include, for example, career break, unemployment:*

<b>Dates:</b>		<b>Name of Company /Employer:</b>	<b>Position held:</b>
<b>From:</b>	<b>To:</b>		

<b>1. Employment</b>	
<i>Nature of employment:</i>	<input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Contractor <input type="checkbox"/> Other
<i>Name of Company/Employer:</i>	
<i>City and Jurisdiction of Company/Employer:</i>	
<i>Nature of business:</i>	
<i>Name and position of appropriate contact person who can verify the stated employment:</i>	
<i>Email address of the contact person:</i>	
<i>Is the Company/Employer regulated by a financial service regulator?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Provide details of financial service regulator:</i>	
<i>Reason for leaving:</i>	

## 6 Other Key Individual positions

*Has the candidate held or been granted, in a personal capacity, approval to act in a key individual or other approved person function by any other financial services regulator?*

Yes       No

<b>1. Details of other approvals</b>	
<i>Full name of the financial services regulator:</i>	
<i>Nature of the position held:</i>	
<i>Scope of the activities permitted by approval:</i>	
<i>Relevant start and end dates of approval:</i>	
<i>Provide an explanation of the individual's competence and relevant experience to carry out the Regulatory Function(s) adequately in light of any other employment commitments:</i>	

# 7

## Other holdings

*Has the candidate held any positions as a Controller, Director, or Partner during the past ten years?*

Yes       No

<b>1. Holding:</b>	
<i>The full name of the entity:</i>	
<i>Jurisdiction of incorporation:</i>	
<i>The business operations of the entity:</i>	
<i>A description of candidate's involvement with the entity:</i>	
<i>Percentage of candidate's shareholding in the entity (if applicable):</i>	
<i>What is the nature of the entity's current relationship with the Applicant or Recognised Body submitting this application?:</i>	<input type="checkbox"/> Direct <input type="checkbox"/> Indirect <input type="checkbox"/> None
<i>Further describe the nature of this relationship:</i>	

# 8

## Fit and Proper Questionnaire

The candidate must complete the following questions.

Has the candidate:

8.1 Been convicted (including where a conviction has been completed, removed from record, or otherwise spent, as the case may be) or found guilty by any court of a competent jurisdiction of any criminal offence?

Yes  No *If "Yes", provide full details:*

8.2 Been the subject of any disciplinary procedures by a governmental body or agency or any self-regulatory organisation or other professional body?

Yes  No *If "Yes", provide full details:*

8.3 Contravened any provision of financial services legislation or of rules, regulated activities, statements, or principles of codes of practice made under or by a Financial Services Regulator or other supervisory body?

Yes  No *If "Yes", provide full details:*

8.4 Been refused or restricted the right to carry on a trade, business, or profession requiring a licence, registration or other authority?

Yes  No *If "Yes", provide full details:*

8.5 Been dismissed or requested to resign from any employment?

Yes  No *If "Yes", provide full details:*

8.6 Been engaged in the management of a Body Corporate which has been or is currently the subject of an investigation into an allegation of misconduct or of malpractice?

Yes  No *If "Yes", provide full details:*

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8.7 Received an adverse finding in a civil action by any court of competent jurisdiction of fraud, misfeasance, or other misconduct, whether in connection with the formation or management of a corporation or otherwise?

Yes  No

*If "Yes", provide full details:*

8.8 Received an adverse finding in an agreed settlement in a civil action by any court or tribunal of competent jurisdiction resulting in an award against an individual in excess of \$10,000 or awards that total more than \$10,000?

Yes  No

*If "Yes", provide full details:*

8.9 Been the subject of an order of disqualification as a Director or otherwise, issued by a court of competent jurisdiction or a regulator, to prohibit their acting in the management or conduct of the affairs of a corporation?

Yes  No

*If "Yes", provide full details:*

8.10 Been a Director, or Partner or concerned in the management of a company or Partnership which has gone into insolvent liquidation whilst connected with that company, Partnership, or within one year of such a connection?

Yes  No

*If "Yes", provide full details:*

8.11 Been the subject of a complaint in connection with a financial services regulator or an ancillary service which relates to his/her integrity, competence, or financial soundness?

Yes  No

*If "Yes", provide full details:*

8.12 Been censured, disciplined, publicly criticised by, or the subject of a court order at the instigation of a Financial Services Regulator or any officially appointed inquiry?

Yes  No

*If "Yes", provide full details:*

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8.13 Been refused approval or non-objection in relation to any key individual or approved person role by any financial services regulator?

Yes  No

*If "Yes", provide full details:*

# 9

## Confirmation of additional supporting attachments

In the table below confirm that the requested supporting documents are attached. FSRA may consider your application to be materially incomplete if any of these documents are not attached:

<b><i>Verify that the following required documents are attached with this application submission:</i></b>	<b><i>Uploaded:</i></b>	<b><i>Comments:</i></b>
Passport Copy	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Resumes/CVs	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Emirates ID	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Job Description	<input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Additional Documents:</b>		
<b><i>Document Name:</i></b>	<b><i>Uploaded:</i></b>	<b><i>Comments:</i></b>
	<input type="checkbox"/> Yes <input type="checkbox"/> No	

## **10 Declaration by the candidate**

I declare that, to the best of my knowledge and belief, the information given in this form, as well as any applicable supporting documents, is complete and correct. I understand that it is an offence under FSMR, Article 221 – *Misleading the Regulator* to knowingly or recklessly provide to the FSRA any information which is false, misleading, or deceptive or to conceal information where the concealment of such information is likely to mislead or deceive the FSRA.

I declare my understanding that the FSRA may request more detailed information (including, but not limited to, personal, educational, employment and financial information) should it be deemed necessary to adequately assess my fitness and propriety in relation to the Regulatory Function(s). I consent to the FSRA contacting any previous employers, educational institutions, professional organisations, or any other organisation, to verify any information contained in this form.

I understand that any personal data provided to the FSRA will be used to discharge its regulatory functions under Abu Dhabi Law No. 4 of 2013, FSMR, the ADGM Data Protection Regulations 2021, and other relevant legislation and may be disclosed to third parties for those purposes.

Date:

Signature of the candidate:

*Printed name of the candidate:*

*Proposed position or title of the role:*

## **11 Declaration by the Applicant or Recognised Body**

I declare that the candidate's competence and relevant experience has been assessed in accordance with the requirements of the ADGM Rulebook, and I declare that the candidate is fit and proper to perform the Regulatory Function(s) to which this application relates.

I declare that, to the best of my knowledge and belief, and having made due enquiry, that the information given in this form, the supplements and documents attached, is complete and correct. I understand that it is an offence under ADGM FSMR, Article 221 – *Misleading the Regulator* to knowingly or recklessly provide to the FSRA any information which is false, misleading, or deceptive or to conceal information where the concealment of such information is likely to mislead or deceive the FSRA.

I confirm that I have the authority to make this application, to declare as specified above and sign this form for, or on behalf of, the Applicant or Recognised Body.

I understand that any personal data provided to the FSRA will be used to discharge its regulatory functions under Abu Dhabi Law No. 4 of 2013, FSMR, the ADGM Data Protection Regulations 2021, and other relevant legislation, and may be disclosed to third parties for those purposes.

Date:

Signature of the authorised signatory<sup>1</sup>:

<i>Printed name of the above authorised signatory individual:</i>	
<i>Position or title, or proposed title or position (if an Applicant):</i>	

<sup>1</sup> The individual signing this declaration must be a (in the case of an Applicant, proposed) Director, Partner, Senior Executive Officer or Compliance Officer of the Recognised Body.