

FORM 3B

REGISTERED REPRESENTATIVE QUESTIONNAIRE

Pursuant to section 51(2) of the Securities Act, 2012 and by-laws 21 and 22 of the Securities (General) By-Laws, 2013

General Instructions:	Please complete all relevant sections; where the allocated space is insufficient, you may continue on a separate page and attach to the completed form. All supporting information and attached pages should be appropriately numbered and referenced. See detailed list of required attachments. This form and any attachments should be certified by the Registered Representative.
Item 1	Please mark "x" by the relevant checkbox to indicate the category of registration.
Item 2	State the full name of the Registered Representative and the job title/position in the company in which he is employed.
Item 3	State the Registered Representative's home address, email address (es), telephone numbers and fax numbers.
Item 4	State the name of the Registrant in which the Registered Representative is employed. Also state the registrant's category of registration under 51(1).
Item 5	For an associate Registered Representative, please state the full name and position of the supervising Registered Representative. Also state the category of registration held by the supervising Registered Representative.
Item 6	List all memberships with self-regulatory organizations in any jurisdiction.
Item 7	State whether the Registered Representative has ever been registered or disciplined. If "yes", please provide full details as an attachment to this Form. Please note that this question refers to all Laws (e.g. Criminal, Customs, Liquor, etc.) of any state or country, in any part of the world. You are not required to disclose any convictions for which a pardon has been granted, and which pardon has not been revoked.
Item 8	Please enter any additional information required to establish the Registered Representative's qualification and suitability for registration.
Item 9	Date the form. Include the signature of the Registered Representative.

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1. CATEGORY OF REGISTRATION

Advising Representative	<input type="checkbox"/>
Associate Representative	<input type="checkbox"/>
Brokering Representative	<input type="checkbox"/>
Underwriting Representative	<input type="checkbox"/>

2. NAME OF REGISTERED REPRESENTATIVE

Name of Registered Representative	
Job Title / Position	

3. CONTACT DETAILS OF REGISTERED REPRESENTATIVE

Residential Address				
Home Phone	Work Phone	Ext.	Mobile	Email Address

4. REGISTRANT INFORMATION

Name of Registrant	Category of Registration

5. NAME OF BROKERING, ADVISING OR UNDERWRITING REPRESENTATIVE RESPONSIBLE FOR SUPERVISING ASSOCIATE REPRESENTATIVE

Name of Registered Representative	Category of Registration

6. MEMBERSHIP IN SELF-REGULATORY ORGANIZATIONS

Self-Regulatory Organization	Member Number	Year Joined

7. REGISTRATION AND DISCIPLINARY HISTORY

State whether the Registered Representative has ever been registered or disciplined as indicated below. If "yes", please provide full details as an attachment to this Form:

	YES	NO
1. Has the Registered Representative or to the best of the Registered Representative's information and belief:		
a) Been registered in any capacity under the Securities Industries Act, 1995 or the Securities Act, 2012?	<input type="checkbox"/>	<input type="checkbox"/>
b) Applied for registration, in any capacity, under the Securities Industry Act, 1995 or the Securities Act, 2012?	<input type="checkbox"/>	<input type="checkbox"/>
2. Is the Registered Representative, or to the best of the Registered Representative's information and belief been:		
a) Registered or licensed in any capacity in any other country which requires registration or licensing to deal or trade in securities?	<input type="checkbox"/>	<input type="checkbox"/>
b) Registered or licensed in any other capacity in Trinidad and Tobago under any legislation which requires registration or licensing to deal with the public in any capacity? (E.g. as an insurance agent, real estate agent, private investigator, mortgage broker, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>
c) Refused registration or a licence mentioned in 2(a) or (b) above or has any registration or licence been suspended or cancelled in any category mentioned in 2(a) or (b) above?	<input type="checkbox"/>	<input type="checkbox"/>
d) Denied the benefit of any exemption from registration provided by	<input type="checkbox"/>	<input type="checkbox"/>

	YES	NO
the Securities Industry Act, 1995 or the Securities Act, 2012?		
3. Is the Registered Representative, or to the best of the Registered Representative's information and belief is any affiliate of the Registered Representative, now, or has any such person or company been:	<input type="checkbox"/>	<input type="checkbox"/>
a) A member of any Investment Dealers Association, Investment Bankers Association, or similar organization, in any country?	<input type="checkbox"/>	<input type="checkbox"/>
b) Refused membership in any Stock Exchange, Investment Dealers Association, Investment Bankers Association, or similar organization in any country?	<input type="checkbox"/>	<input type="checkbox"/>
c) Suspended as a member of any Stock Exchange, Investment Dealers Association, Investment Bankers Association, or similar organization, in any country?	<input type="checkbox"/>	<input type="checkbox"/>
d) Disqualified as a member of any Stock Exchange, Investment Dealers Association, Investment Bankers Association, or similar organization, in any country?	<input type="checkbox"/>	<input type="checkbox"/>
4. Has the Registered Representative, or to the best of the Registered Representative's information and belief operated under, or carried on business under, any name other than the name shown in this application	<input type="checkbox"/>	<input type="checkbox"/>
<i>INSTRUCTION: Question 5 refers to all Laws (e.g. Criminal, Customs, Liquor, etc.) of any state or country, in any part of the world. You are not required to disclose any convictions which a pardon has been granted, and which pardon has not been revoked</i>		
5. Has the Registered Representative, or to the best of the Registered Representative's information and belief:		
a) Ever been the subject of an investigation conducted by a regulatory or criminal investigative body?	<input type="checkbox"/>	<input type="checkbox"/>
b) Ever been convicted under the laws of any country, excepting minor traffic offences?	<input type="checkbox"/>	<input type="checkbox"/>
c) An outstanding charge or indictment against him?	<input type="checkbox"/>	<input type="checkbox"/>
d) Ever been the defendant or respondent in any proceedings in any court in any jurisdiction in any part of the world wherein an act involving fraud or dishonest was alleged?	<input type="checkbox"/>	<input type="checkbox"/>
e) At any time declared bankruptcy, or made a voluntary assignment in bankruptcy? (If "Yes", give particulars and also attach a certified copy of discharge)	<input type="checkbox"/>	<input type="checkbox"/>
f) Ever been refused a fidelity / surety bond?	<input type="checkbox"/>	<input type="checkbox"/>
g) Ever been barred from operating within the financial or securities industry of Trinidad and Tobago or elsewhere by the Commission or other regulatory body or court of law?	<input type="checkbox"/>	<input type="checkbox"/>

8. ADDITIONAL INFORMATION

Please provide any additional information required to establish the applicant's qualification and suitability for registration

9. DATE, CERTIFICATION AND SIGNATURE

I hereby certify that the statement and information contained in this form and any attachment hereto are true and correct to the best of my knowledge and belief and submitted in compliance with the provisions of the Securities Act, 2012. I understand that any misrepresentation, falsification or material omission of information on this application may result in a breach of the Securities Act, 2012.

Print Name **Signature** **Position** **Date**

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Tool	ID Information
Registrant's Number	
Director's Number	
Document / Record Number	
Records Management Date Received (dd/mm/yyyy)	

Approved By : _____ Date (DD/MM/YYYY) _____