

CONFIDENTIAL



MINISTRY OF FINANCE, ECONOMIC AFFAIRS, INVESTMENT, PLANNING, RESILIENCE,
SUSTAINABLE DEVELOPMENT, TELECOMMUNICATIONS AND BROADCASTING

FINANCIAL SERVICES UNIT

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5th Floor, Financial Centre
Kennedy Avenue
Roseau
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COMPLIANCE OFFICER REGISTRATION FORM

1. Instructions:

All persons applying to be registered as Compliance Officers with the Financial Services Unit (FSU) relative to Section 18 of the Anti-Money Laundering & Suppression of Financing of Terrorism Code of Practice No. 10 of 2014 and the Money Laundering (Prevention) Regulations S.R.O. 4 of 2013 (the Acts) must complete this form.

Before submitting the application form, please remember to append a letter from the Entity or Professional you represent, authorizing you to perform the functions of Compliance Officer on its behalf.

The compliance function of the entity or professional must be seated in-house (i.e. within the entity or professional) consistent with the Acts.

2. Explanatory notes

1. Compliance Officers are encouraged to read these instructions thoroughly before completing this form.
2. SECTION 1 must be completed by the in-house Compliance Officer.
3. SECTION 2 must be completed by the in-house Compliance Officer.
4. SECTION 3 must be completed by the in-house Compliance Officer.
5. SECTION 4 must be completed by the in-house Compliance Officer.
6. SECTION 5 must be completed by the in-house Compliance Officer.
7. In completing SECTION 5, Experience and Qualification requirements. Compliance Officer are reminded to indicate the category (ies) of financial services in respect of which (s)he intends to render compliance services. The applicant must further indicate the experience (s)he had obtained in the rendering of compliance services in respect of each category.
8. All Compliance Officers must sign the application form.
9. All Compliance Officers must complete the Background Checks form.

SECTION 1: Particulars of Compliance Officer**3. Name and contact details of Compliance Officer**

| | |
|-----------------------------------------|--|
| Title: | |
| First Name: | |
| Middle Name: | |
| Last Name: | |
| Gender: | |
| Position at Entity/Professional: | |
| Telephone (Direct): | |
| Telephone (Cell) (Optional): | |
| E-mail (Mandatory): | |

SECTION 2: Particulars of Entity or Professional**4. Name and Contact Details of Entity/Professional**

| | |
|--------------------------|--|
| Name: | |
| Physical Address: | |
| Telephone - 1: | |
| Telephone - 1: | |
| Facsimile: | |

| | |
|----------------|--|
| E-mail: | |
|----------------|--|

| | |
|-----------------|--|
| Website: | |
|-----------------|--|

SECTION 3: Fit and Proper Requirements – Honesty and Integrity Questions.

If the answer to any of these questions is YES, provide full details in a separate document signed by the compliance officer and attach to the application form.

- | Questions | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| 1 Has an adverse finding been made against you within a period of five years preceding the date of registration in any civil or criminal proceedings by a court of law (whether in the Commonwealth of Dominica or elsewhere) in which you were found to have acted fraudulently, dishonestly, unprofessionally, dishonourably or in breach of a fiduciary duty? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 Have you within a period of five years preceding the date of registration been found guilty by any professional or financial services industry body (whether in the Commonwealth of Dominica or elsewhere), of an act of dishonesty, negligence, incompetence or mismanagement? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 Have you within a period of five years preceding the date of registration been found guilty by any regulatory or supervisory body (whether in the Commonwealth of Dominica or elsewhere) of an act of dishonesty, negligence, incompetence or mismanagement? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5 Have you within a period of five years preceding the date of registration been found guilty by any regulatory or supervisory body (whether in the Commonwealth of Dominica or elsewhere), recognised by the Board, or has an authorisation to carry on business has been refused, suspended or withdrawn by any such body on account of an act of dishonesty, negligence, incompetence or mismanagement? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6 Have you at any time prior to the date of registration been disqualified or prohibited by any court of law (whether in the Commonwealth of Dominica or elsewhere) from taking part in the management of any company or other statutorily created, recognised or regulated body, irrespective whether such disqualification has since been lifted or not? | <input type="checkbox"/> | <input type="checkbox"/> |

SECTION 4: Additional information

If the answer to any of these questions is YES, provide full details in a separate document signed by the compliance officer and attach to the application form.

- | Questions | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| 1. Have you been refused the right to carry on or restricted from carrying on a trade, business or profession for which a specific license, registration or other authority is required by law in any country? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Have you been issued with a prohibition order under any Act administered by the Financial Services Unit or been prohibited by any regulatory body from operating in the financial services industry? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you been involved with a corporation, which has been censured, disciplined, suspended or refused membership or registration by a stock exchange, futures exchange, other market or regulatory authority? | <input type="checkbox"/> | <input type="checkbox"/> |

4. Have you had any judgment (including a finding of fraud, misrepresentation or dishonesty) given against you in any civil proceedings, in the Commonwealth of Dominica or elsewhere or are there any proceedings now pending which may lead to such a judgment?
5. Have you knowingly or negligently aided or abetted other persons in the breaching of any laws, regulations, exchange rules and/or codes of conduct?
6. Have you been the subject of any investigation or disciplinary proceedings by any regulatory authority (whether in the Commonwealth of Dominica or elsewhere) or exchange, professional body or government body or agency?
7. Have you ever been a controlling shareholder, director of a company or member of a close corporation at the time it was placed under judicial management or in provisional or final liquidation?
8. Have you ever been refused a license or registration in any place under any law, which requires licensing or registration in relation to securities, futures, leveraged foreign exchange or insurance activities?
10. Have you ever been refused authorisation to carry on business by any regulatory body (whether in the Commonwealth of Dominica or elsewhere), recognized by the Financial Services Unit or has such authorisation ever been suspended or revoked by any such body, because of negligence, incompetence or mismanagement?
11. Do you have any additional information, which should be brought to the FSU's attention, which may have an impact on the evaluation, by the FSU of your good character and integrity?

SECTION 5: Experience and Qualifications

5. Provide details in a separate Annexure, of how you have gained sufficient and appropriate knowledge of the provisions of the Acts.

6. Qualifications/training received by Compliance Officer:

Add additional pages where applicable.

| Date | Description of Training | Host/Sponsor |
|-------------|--------------------------------|---------------------|
| | | |
| | | |
| | | |
| | | |

7. Category (ies) of financial services in respect of which compliance services will be rendered and compliance services experience obtained in respect of such category (ies).

8. Categories of financial services

Add additional pages where applicable.

| Category | Months Experience |
|-----------------|--------------------------|
| | |
| | |
| | |
| | |
| | |

SECTION 6: Employment history

Provide a detailed CV of the Compliance Officer’s experience. The CV must include sufficient detail to satisfy the FSU that the compliance officer possesses adequate experience in relation to the different categories of financial services of financial products in respect of which compliance functions are to be rendered.

9. A certified copy of the Compliance Officer’s identification document must accompany the application form.

10. Additional information relating to independence, competency and operational ability

The following information must be provided in a separate document attached as an annexure to the application form and must be signed and dated by the Compliance Officer.

11. Details of how the Compliance Officer will ensure that he/she will function independently and objectively from FSP(s).

12. Details of the operational ability of the Compliance Officer (e.g. does the Compliance Officer has adequate resources available to ensure proper compliance monitoring of the customers/representatives of the Entity/Professional.

I, **(name of the Compliance Officer)** declare that the information provided in this form is true and correct to the best of my knowledge and belief.

.....
Signature

.....
Date

SECTION 7. Company Details

If the answer to any of these questions is YES, provide full details in a separate document signed by the compliance officer and attach to the application form.

- | Questions | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| 1. Does the compliance officer perform any other duties within the organization? Kindly state. | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Does compliance and regulation within the organization extend beyond the compliance officer to include assistants? Please provide department structure. | <input type="checkbox"/> | <input type="checkbox"/> |

SECTION 8: Background Checks

I, (full name of Compliance Officer) hereby acknowledge that on submission of this completed application form to the Financial Services Unit (FSU), that the FSU reserves the right to conduct background, verification checks and to request or confirm any personal information as well as any other information that I have provided in support of my registration to any personal data holders (including but not limited to the Commonwealth of Dominica Police Force (CDPF), the Government of the Commonwealth of Dominica, industry bodies and associations, employers and any educational, training, credit bureau and fraud prevention organisations) for the purpose of verifying my personal credentials, records and history.

.....
Signature

.....
Date