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	Are you currently approved by the Central Bank of Ireland or any of its predecessors?	
1.1	(If Yes, question 6.1 in Section 6. Applicant Current and Previous Regulatory Approvals is mandatory)	Yes/No
1.2	If yes to 1.1, are you seeking approval for a Pre-Approval Controlled Function (PCF) based on a similar role that you currently perform? (If No, Section 5. Applicant Reputation & Character is mandatory) If you answered Yes to this question please choose one of the following options	Yes/No Same Role/Same Sector Same Role/Different Secto
1.3	Are you currently approved by another Financial Services Regulator within the EU/EEA? (If Yes, question 6.4 in Section 6. Applicant Current and Previous Regulatory Approvals is mandatory)	Yes/No
1.4	If yes to 1.3, are you seeking approval for a PCF based on a similar role that you currently perform? (If No, Section 5. Applicant Reputation & Character is mandatory) If you answered Yes to this question please choose one of the following options	Yes/No Same Role/Same Sector Same Role/Different Sector
1.5	Do you have savings or loans with the proposing entity or have you had any loan(s) in arrears (for a period of greater than 90 days) with the proposing entity in the past year? (If Yes, Section 7. Applicant Savings and Loans with the Proposing Entity is mandatory)	Yes/No
1.6	Do you have any current or previous (within the last 10 years) business interests, guarantees, relationships with board of directors and/or senior executive management or shareholdings (where holdings are greater than 10%) in financial entities or other organisations, including the non-financial sector, charitable and/or not-for-profit organisations? (If Yes, Section 8. Applicant Shareholdings/Business Interests in Financial Entities and Other Firms is mandatory)	Yes/No
1.7	Do you have any Directorships, Chairmanships, Senior Management positions and/or Service Provider roles in financial or other organisations, including the non-financial sector, charitable and/or not-for-profit organisations? (If Yes, Section 9. Positions as an Executive/Non-Executive Director, Chairman, Manager or Financial Service Provider in a Financial or Other Entity is mandatory)	Yes/No
1.8	Is your credit union authorised as a retail intermediary? (If Yes, question 1.9 below is mandatory)	Yes/No
1.9	If yes to 1.8, will you be subject to the Minimum Competency Code? (If Yes, to a, or b below, Section 4. Minimum Competency Code - Credit Union's acting as Retail Intermediaries is mandatory) If you answered Yes to this question please choose one of the following options	Yes/No (a) New Entrant (b) Grandfathering arrangements (c) Recognised qualificatio
1.10	Are you applying for a position in a new entity which is currently seeking approval/authorisation from the Central Bank of Ireland, or an entity which is seeking a renewal of an existing approval/authorisation?	Yes/No



Section 2: Applicant Personal Details

2.1 Secto	.1 Sector and Position for Approval								
2.1(a)	Select the principal sector in which you will operate proposed position(s)								
2.1(b)	Position(s) for which approval is sought								
2.1(c)	If you have selected more than one position, provide details on the role(s) to be fulfilled								

2.2 Legal	Title Surname (Family Name) Forename (First Name) Middle Name(s) Variations of Forename 2.2(b) Previous Legal Name Please add details if you previously held another legal name					
2.2(a) Curren	nt Legal Name					
	Title					
	Surname (Family Name) Forename (First Name) Middle Name(s) Variations of Forename 2.2(b) Previous Legal Name Previous Title Previous Surname Previous Surname Previous Forename Previous Middle Names Previous Middle Names Previous Middle Names Date of change in name Reason for change in name					
	Forename (First	Name)				
1	(a) Current Legal Name Title Surname (Family Name) Forename (First Name) Middle Name(s) Variations of Forename (b) Previous Legal Name Please add details if you previously held another legal name evious Title Previous Surname Previous Forename Previous Forename Previous Middle Names Date of change in name Reason for change in name					
Forename (First Name) Middle Name(s) Variations of Forename 2.2(b) Previous Legal Name Please add details if you previously held another legal name						
2.2(b) Previous	us Legal Name	previously held another legal				
Previous Title	Э	Previous Surname	Previous Forename	Previous Middle Names	Date of change in name (dd/mm/yyyy)	Reason for change in name

2.3 Current Principal Primary Residence	
Address Line 1	
Address Line 2	
Address Line 3	
City or Town	
Country	
Start date at this residential address (mm/yyyy)	

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Nationality

Current valid passport Number

Contact Phone Number

Country where current passport was issued

Date of current passport expiry (mm/yyyy)

Email address at which we may contact you

Individual Questionnaire (IQ) Template 2017 – Credit Unions

2.4 Previous Principal Primary Residence											
2.4(a) Where address has shanged in the last 2 years, places provide addresses for the provious 2 years											
2.4(a) Where address has changed in the last 3 years, please provide addresses for the previous 3 years. Address Line 1 Address Line 2 Address Line 3 City or Town Country Start Date for Residence at End Date for Residence at											
Address Line 1	Address Line 2	Address Line 3	City or Town	Country	this address (mm/yyyy)	this address (mm/yyyy)					
					tilis address (illili) yyyy)	this address (minyyyyy)					
0.4(1) 51											
2.4(b) Please provide information	tion on any gaps in res	idential history submitted, th	at exceeds 12 weeks								
<u>.</u>											
2.5 Other Details											
Date of Birth (dd/mm/yyyy)											
Place of Birth (City	or Iown)										
Place of Birth (Cou	intry)										
(000	ride of Dirar (Country)										



Section 3: Professional Experience & other Relevant Experience, Educational Qualifications, Professional Memberships & Relevant Training

3.1 Professional & Other Relevant Experience													
) your emple t recent em		y and othe	r relevant ex	perience obtain	ed during last 1	0 years and	b) any other releva	nt employment	or experience	outside the 10
Employer / Organisation Full Name		Address Line 1	Address Line 2	Address Line 3	City or Town	Country	Company / Credit Union Registration Number	Principal Activities of the Entity	Position Held	Key Position / Relevant Responsibilities	Start Date (mm/yyyy)	End Date (if applicable)	Reason for Leaving
3.2 Ple		_		essional t	imeline	gap exc	eeding 12 v	veeks withi	n the las	st 10 years			
3.2(a)		on for Gap											
3.2(b)					lain in deta	il the profes	sional experienc	e timeline gap					
			alificatio										
Add deta	ils of ar	ny educatio	onal qualific	ation(s) you h	ave achiev	ed, starting	with the most re	cent qualification	n obtained				
Qualificat	ion Obta	ained	1	Name of award	ing instituti	on				Country		Date	of award <i>(yyyy)</i>
3.4 Pro	ofessi	ional Me	embersh	•									
Membership type Professional Body name				Ī	Membership number (if applicable) Members			Membership st	ship start date (уууу)				

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3.5 Relevant Training										
Add details of any other relevant training you have undertaken										
Training Undertaken	Training Provider	Country	Date of Training (mm/yyyy)	Duration of training (days)						



Section 4: Minimum Competency Code - Credit Unions acting as Retail Intermediaries

Section	Section 4A: New Entrants – Please confirm the following:								
4.1	You have undergone a training programme organised by a regulated firm on whose behalf you are acting, which is relevant to the function to be exercised, or you have obtained part of a relevant recognised qualification for that particular function; AND	Yes/No							
4.2	You are working towards obtaining a relevant recognised qualification; AND								
4.3	You are acting under the immediate direction and supervision of another nominated person, who is a qualified person or a grandfathered person in respect of the particular function being carried out by you; AND	Yes/No							
4.4	You will obtain / acknowledge your obligation to attain a relevant recognised qualification within four years of commencing the particular function being carried out by you	Yes/No							
If you a	If you answered No to any of the above questions you do not meet the Minimum Competency Code (MCC) and therefore cannot continue with this application								

Section 4B: Grandfathering Arrangements – Please confirm the following:									
4.5	On 1 January 2007 you were dealing with a retail financial product or specified function in respect of which you are availing of the grandfathering arrangements, or on 1 June 2008, you were dealing with retail credit or home reversion agreements; AND								
4.6	You have four years experience carrying out the function to be exercised (as per Q4.10 below) in the period 1 January 1999 to 1 January 2007, or You have four years experience dealing with retail credit or home reversion agreements between 1 June 2000 and 1 June 2008; AND	Yes/No							
4.7	You comply with the requirement to complete Continuing Professional Development (CPD) on an on-going basis commencing 1 January 2008 (1 June 2009 in the case of retail credit and home reversion agreements) at the latest								
If you ar	nswered No to any of questions 4.5 to 4.7 you do not meet the Minimum Competency Code (MCC) and therefore cannot continue with this application								
4.8	An assessment for grandfathering purposes was carried out and documented by the regulated firm and the regulated firm certified your compliance with the experience requirement	Yes/No							
If you ar	nswered No to 4.8 you must provide additional information in the text box at 4.9. Please refer to the Guidance document for information on detail required.	<u> </u>							
4.9 Add	tional information in relation to 4.8								
4.10 Please select the product(s)/activities in respect of which you are grandfathered?									
You will be required to submit evidence in support of your response to the above. See section 10 of the IQ/Guidance Document to upload your documentary evidence.									

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Section 5: Applicant Reputation and Character Applicants should be candid and truthful and provide a full, fair and accurate response to all questions. If you are uncertain how to respond to any queries below, please provide as much information as possible in the text box provided. See section 10 regarding attaching documentation if you need to do so. Yes/No A person is required to be honest, ethical, act with integrity and be financially sound. In this regard, have you any information to disclose regarding a 5.1 material issue or do you have any concerns about your ability to perform the relevant function? Yes/No Have you ever, in any jurisdiction, been refused, prohibited, restricted or suspended from the right to carry on any trade, business or profession for which a 5.2 specific licence, registration or other authorisation is required in that jurisdiction? Yes/No Have you been the subject of any complaint to the Central Bank of Ireland, Financial Services Ombudsman or any equivalent body (made reasonably and 5.3 in good faith) relating to activities regulated by the Central Bank of Ireland or regulated by an equivalent authority in any jurisdiction? Yes/No Are you or have you been, in any jurisdiction, subject to any disciplinary proceedings, issued with a warning, reprimand or other administrative sanction or 5.4 its equivalent by the Central Bank of Ireland; OR an equivalent measure by any other regulatory authority, any clearing house and exchanges, any professional body or agency? Yes/No Have you ever, in any jurisdiction, been dismissed or asked to resign and did resign from any profession, vocation, office or employment, or from any 5.5 position of trust or fiduciary appointment, whether or not remunerated? Yes/No Have you ever, in any jurisdiction, been a director of a company that was struck off the Register of Companies by the Companies Registration Office (or 5.6 equivalent elsewhere) otherwise than on a voluntary basis? Yes/No 5.7 Have you ever, in any jurisdiction, been disqualified or restricted from acting as a director or from acting in any managerial capacity? Yes/No Have you ever, in any jurisdiction, been convicted of an offence, involving money laundering, terrorist financing, fraud, misrepresentation, dishonesty, 5.8 breach of trust, or an offence which would be relevant to your ability to perform the relevant function? Yes/No Have you ever, in any jurisdiction, had a civil finding, judgement or order made against you in relation to proceedings involving money laundering, terrorist 5.9 financing, fraud, misrepresentation, dishonesty, breach of trust, or other matter which could affect your ability to perform the relevant function? Yes/No 5.10 Have you ever, in any jurisdiction, been the subject of any civil penalty enforcement action taken by a regulatory authority under any law? Yes/No Have you ever been untruthful or provided false or misleading information to the Central Bank of Ireland or been uncooperative in any dealings with the 5.11 Central Bank of Ireland? Yes/No Have you ever, as a sole trader or a director, or a partner of a legal entity, in any jurisdiction, been refused registration, authorisation, membership or has 5.12 your licence been revoked, otherwise than on a voluntary basis? Yes/No Have you been or are you being investigated, disciplined, censured, suspended or criticised by a regulatory or professional body, a court or tribunal or any 5.13 similar body, whether publicly or privately, in any jurisdiction?



5.14	Has any business (or legal entity) where you held a position of responsibility or influence been or is being investigated, disciplined, censured, suspended or criticised by a regulatory or professional body, a court or tribunal or any similar body, whether publicly or privately, in any jurisdiction?	Yes/No
5.15	Have you ever, in any jurisdiction, been found by the Central Bank of Ireland or any other regulatory authority to have perpetrated or participated in any negligent, deceitful or otherwise discreditable business or professional practice?	Yes/No
5.16	Have you ever defaulted upon any payments due arising from a compromise or scheme of arrangement with your creditors or made an assignment for the benefit of your creditors?	Yes/No
5.17	Have you ever, in any jurisdiction, been subject to a judgement debt which is unsatisfied, either in whole or in part?	Yes/No
5.18	Were you ever, or are you currently the subject of a bankruptcy petition in any jurisdiction?	Yes/No
5.19	Have you ever, in any jurisdiction, been adjudicated a bankrupt and the bankruptcy is undischarged?	Yes/No
5.20	Have you ever, in any jurisdiction, been the director of an entity which has been the subject of insolvency (i.e. non voluntary liquidation, receivership, examinership or administration)?	Yes/No
5.21	Have you ever performed a function in an entity which has been subject to an action under the Central Bank and Credit Institutions (Resolution) Act 2011?	Yes/No
5.22	Have you ever, in any jurisdiction, performed a function in an entity which has been in receipt of State or credit union sector financial support?	Yes/No
5.23	Have you ever been the director of a credit union that has been wound up under the Credit Union Act 1997, otherwise than on a voluntary basis?	Yes/No
5.24 Pro	vide additional details if you answered Yes to any question(s) in this section of the form	1



Section 6: Applicant Current and Previous Financial Services Regulatory Approvals

Please detail be	low any currer	nt approvals b	y the Central Ba	ank of Irela	and or any of its prede	cessors							
Approved Position	on	Name	of the Entity	Sector		Date Approval Granted (mm/yyyy)		Relationship of this Entity (if any) to the Proposing Entity		Entity a	are dec	ow many working days re dedicated to the alfilment of this role per nnum?	
6.2 Control	Dank of T	roland D-f	avana N	h - u									
6.2 Central	Bank of II	reiana Ket	erence Nui	nber									
Please provide of	letails of your	Central Bank	of Ireland refer	ence numb	er (where known)								
6.3 Previou	s Central	Bank of Ir	eland Appr	ovals									
Have you been p	previously app	proved by the	Central Bank of	Ireland or	any of its predecesso	rs?						Yes/No	
Approved Position	on	Name of the	Entity	Sector		Date approval granted (mm/yyyy)		Date approval ceased (mm/yyyy)		Reason(s) why ceased		ipproval was	
6.4 Current	Other Fin	ancial Ser	vices Regu	lator Ap	provals								
Are you currently	y approved by	any other Fin	ancial Services	Regulator	?							Yes/No	
Approved Position	Name of	Sector	Name of Reg	gulator	Regulator	Country		e of approval by		ship of this		w many working	

Services Regulator

(mm/yyyy)

Proposing Entity

Version 3

(if applicable)

the fulfilment of this

role per annum?



6.5 Previous Other Financial Services Regulator Approvals								
Have you been previously approved by any other Financial Services Regulator?						Yes/No		
Approved Position	Name of Entity	Sector	Name of Regulator (Full Name)	Country	Regulator Reference Number (if applicable)	Date approval commenced (mm/yyyy)	Date approval ceased (mm/yyyy)	Reason(s) why approval ceased

6.6 Financial Services Regulator Refusals							
Have you ever been refused approval by any Financial Services Regulator? Yes/No							Yes/No
Position refused	Name of Proposing Entity	Sector	Name of Regulator (Full Name)	Country	Date of refusal (mm/yyyy)	Reason(s) provided why ap	pproval was refused

6.7 Financial Services Regulator Withdrawal of Application								
Have you ever sought approval by any Financial Services Regulator and subsequently withdrew your application or failed to respond to correspondence prior to a final decision being reached by any Financial Services Regulator?							Yes/No	
Position applied for	Name of Proposing Entity	Sector	Name of Regulator (Full Name)	Country	Date of withdrawal of application (mm/yyyy)	Reason(s) for withdrawal		

6.8 Financial Services Regulator Prohibition / Restriction / Suspension								
Has your approval by any Financial Services Regulator been prohibited/restricted/suspended, even where approval was subsequently restored? Yes/No							Yes/No	
Position prohibited/ restricted/ suspended	Name of Proposing Entity	Sector	Name of Regulator (Full Name)	Country	Date of Prohibition / Restriction / Suspension (mm/yyyy)	Date approval restored (mm/yyyy)		s) for Prohibition / n/ Suspension



Section 7: Applicant Savings and Loans with the Proposing Entity (for Credit Unions ONLY)

7.1 Sa	avings with the Proposing Entity	
a.	Do you have or intend to have (within the next 12 months) savings with the proposing entity?	Yes/No
b.	If you currently have or intend to have savings with the proposing entity, please state the current or intended total savings	€
C.	If you currently have or intend to have (within the next 12 months) savings with the proposing entity, please state the current or intended total savings as a percentage of total assets of the credit union	0.00

7	7.2 Loan(s) with the Proposing Entity						
	a.	Do you currently have or intend to have (within the next 12 months) any loan(s) or guarantees in respect to a loan(s) with the proposing entity?	Yes/No				
	b.	If you currently have or intend to have a loan(s) or guarantees in respect of a loan(s) with the proposing entity, please state the current or intended total outstanding balance	€				
	C.	If you currently have or intend to have (within the next 12 months) a loan(s) or guarantees in respect of a loan(s) with the proposing entity, please state the current or intended total outstanding balance as a percentage of total assets of the credit union	0.00				

7.3 Loan(s) in arrears with the Proposing Entity						
í	a. Do you have or have you had in the past year any loans with the proposing entity that have been in arrears for a period of greater than 90 days?	Yes/No				
I	b. If yes, please provide details					

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Section 8: Applicant Shareholdings/Business Interests in Financial Entities and Other Firms

8.1 Current Shareholdings in Financial and/or Other Entities								
Please detail below any current own definition of classification of share w					eholdings are 10% or	above. (Please	e refer to	guidance for
Legal Name of Entity				onship of this Entity (if a sing Entity	% Ownership or Benefic Shares		ficial Ownership of	
8.2 Previously Held Shareho	oldings in Financial	and/or Other Entities						
Have you previously held (within the	e last 10 years) shares in	n any Financial or other Entities (v	where	shareholdings are 10%	or above)?			Yes/No
Legal Name of Entity	Principal Activities of Entity	Relationship of this Entity (if any the Proposing Entity				hip or beneficial hip of shares (%)		
8.3 Business Interests in Financial and/or Other Entities involving a Personal Liability								
Do you now, or have you previously had, any other business interest involving a personal liability in the last 10 years, in any jurisdiction? Yes/No						Yes/No		
Legal Name of Entity	Interest in Entity	If Interest in Entity is 'Other' you		Principal Activities	Relationship of this	Entity (if any)	Is this L	iability still

8.3 Business Interests in Financial and/or Other Entities involving a Personal Liability						
Do you now, or have you previously had, any other business interest involving a personal liability in the last 10 years, in any jurisdiction?						
Legal Name of Entity	Interest in Entity If Interest in Entity is 'Other' you must give details				Is this Liability still Outstanding?	



8.4 Provision of Services for	Remuneration						
Have you, or any entity in which you	Have you, or any entity in which you have a business interest, provided services for remuneration to the proposing entity within the last 3 years? Yes/No						
Legal Name of Entity	Principal Activities of Entity	Nature of Role	Provided				
8.5 Guarantees in Respect of	f Liabilities						
Have you personally given any guar	antees in respect of any entity or individuals' liabilities?			Yes/No			
8.6 Details of the Guarant	tee Provided						
If you answered yes to the last ques	tion, please provide details of the guarantee provided						
8.7 Relationships with Boar	d of Directors and/or Senior Executive Management						
Please specify any current professional or existing personal relationships you have with members of the Board of Directors and/or Senior Executive Management Team within any of the entities listed above							



Yes/No

8.9 Details of the Relationship of Business Interests or Shareholdings with the Proposing Entity
If you answered yes to the last question, please provide details.



Section 9: Positions as an Executive/Non-Executive Director, Chairman, Manager or Financial Service Provider in any entity (Financial or Other) where the position has not been approved by a Financial Services Regulator

9.1 Executive/Non-Executive Director, Chairman, Manager, Financial Service Provider											
Do you hold any current or have you held any previous position(s) (within the last 10 years) as an Executive Director, Non-Executive Director, Chairman, Manager or Financial Service Provider in a Financial or Other Entity?							Yes/No				
Position	If Position 'Other' Please State Position	Current or Previous Position	Legal Name of Entity	Entity Type	If Entity Type 'Other' Please State Entity Type	Country	Start Date (mm/yyyy)	End Date (if applicable) (mm/yyyy)	Principal Activities of Entity	Relationship of this Entity (if any) to the Proposing Entity	How many working days are dedicated to the fulfilment of this role per annum?
·											

9.2 Relationships with Board of Directors and/or Senior Executive Management					
Please specify any current professional or existing personal relationships you have with members of the Board of Directors and/or Senior Executive Management Team within any of the entities listed above					



Section 10: Supporting Documentation Files

Add files to support relevant section:-

- Section 4 Documentation to support qualifications
- Section 4 Include CPD evidence to support qualifications if required
- Section 4 Documentation to support new entrant status
- Section 4 Documentation to Support Grandfathering Status and/or Statement of Grandfathering Status
- Section 4 Include CPD evidence to support grandfathering arrangement
- Section 5 Documentation (legal or other) to Support Yes Answer in Section 5
- Other



Section 11: Applicant Declaration

*Question 11.1 is not applicable for credit unions and will not be available to edit in the online Individual Questionnaire

*11.1 Previous Employer Reference Checks

(to be completed where applicant is applying within the Insurance/Reinsurance Intermediaries or Investment Intermediaries or Mortgage Intermediaries Sectors and/or acting as a Sole Trader ONLY)

Please provide contact details of your two most recent employers (within the last 10 years). If you have been self-employed for more than ten years please provide contact details of ar individual who is familiar with your financial service activities

First Name	Last Name	Company Name		Previous	Working Relationship to the applicant (e.g. Line Manager, Peer, Reportee, Human Resources etc.)	Please provide details if there is/was any non- professional relationship between the applicant and referee (e.g. parent, spouse, partner, sibling, etc.)

11.2	I will promptly notify the Central Bank of Ireland of any material changes in the information which I have provided and confirm that I will inform the Central Bank of Ireland in writing of the details of such changes and any other relevant/ material information of which I may become aware at any time after the date of this declaration	Tick-box
11.3	I hereby authorise the Central Bank of Ireland to make enquiries with an Garda Síochána as to any convictions that may or may not be recorded against me	Tick-box
11.4	I authorise an Garda Síochána to furnish to the Central Bank of Ireland a statement that there are no convictions recorded against me in the State or elsewhere, or a statement of all prosecutions successful or not, pending or completed in the State or elsewhere as the case may be	Tick-box



	I hereby authorise all those entities and individuals listed below to release information material to this application which they may have about me to the Central Bank of Ireland and I release them from any liability or responsibility from doing so:	Tick-box
11.5	 The Irish Revenue Commissioners (or equivalent national authority) The Office of the Director of Corporate Enforcement (or equivalent national authority) The Companies Registration Office (or equivalent national authority) Irish Auditing and Accounting Services Authority (or equivalent national authority) The Financial Services Ombudsman (or equivalent national authority) All current and former Employers listed in this application All financial services entities with whom I have previously held an appointment of any kind All personal and professional references contacted by the proposing entity as part of their due diligence inquiries over this application All credit agencies All educational and professional institutions listed in this application 	
11.6	I acknowledge that the Central Bank of Ireland may process any personal data relevant to me for the purposes of performing the Central Bank statutory functions including the orderly and prudent authorisation and supervision of regulated financial services entities and the appointment and supervision of approved persons	Tick-box
	I am aware that it may be an offence and/or grounds for refusal of my application and/or grounds for revocation of an authorisation approval granted on foot of the within Application and/or grounds for the Central Bank of Ireland to commence an administrative sanctions procedure against both myself and/or the proposing entity for me to knowingly or recklessly:	Tick-box
11.7	 a. Provide false or misleading information and/ or to make a false or misleading statement (which I acknowledge, may include the withholding by me of relevant information) in this application for approval b. Fail to inform and/ or withhold from the Central Bank of Ireland details of any material change in circumstances/ new information which is relevant and/or material to my status as an approved person c. To act in the capacity of the approved role for which I am applying prior to obtaining approval by the Central Bank of Ireland 	
11.8	I hereby confirm my awareness of my responsibilities arising from the legislation, regulations, codes of practice, guidance notes, guidelines and any other rules or directives, which are of relevance to the proposed position(s) and I confirm my intention to ensure that the proposing entity of which I am to perform a pre-approval control function will be operated in compliance with them	Tick-box
11.9	I certify that I comply with the Fitness and Probity Standards applicable to my authorisation/approval/registration issued by the Central Bank of Ireland pursuant to section 50 of the Central Bank Reform Act 2010 and agree to abide by them	Tick-box



	*Questions 11.10, 11.11 and 11.12 are not applicable for credit unions and will not be available to edit in the online Individual Questionnaire	
*11.10	Are you Proposed to be a Director of the proposing entity?	Yes/No
*11.11	I am fully aware of the obligations and duties of a Director of a Company under The Companies Acts 1963 to 2009 as amended	Tick-box
*11.12	Please confirm the time commitment in days you will provide to this Directorship per annum	Number
11.13	To the best of my knowledge, information and belief, I have truthfully and fully answered each question in this questionnaire, and have disclosed any and all other information, which might reasonably be considered relevant to this application and I confirm my understanding and acceptance of all statements in this declaration	Tick-box

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Section 12: Proposer Declaration

	Name of single point of contact in the Proposing Entity (or legal representative) for all Central Bank of Ireland enquiries /correspondence in relation to this Application	
	Title	
12.1	Surname	
	First Name	
	Position	
12.2	Email address of single point of contact in Proposing Entity (or legal representative) for all Central Bank of Ireland enquiries/correspondence in relation to this Application	
12.3	Phone number (including Country code prefix) of single point of contact (or legal representative) within the Proposing Entity for all Central Bank of Ireland enquiries/correspondence in relation to this Individual Questionnaire	
12.4	Legal or Trading Name of the Proposing Entity (if different to that previously advised)	
12.5	Company / Credit Union Registration Number of the Proposing Entity	
12.6	Please provide details of why the applicant is competent and capable to carry out the controlled function(s) applied for, outlining the basis for your recommendation, including financial and all other relevant experience and qualifications that the applicant holds. Please include details of why the appointment complements the firm's business strategy, activity and market in which you operate.	
12.7	Please confirm the proposing entity has carried out the necessary due diligence enquiries as set out in the Guidance on Fitness and Probity Standards, and based on those enquiries that the applicant is a fit and proper person to perform the proposed function(s) and competent to fulfil the duties required of such function(s)	Tick-Box
12.8	Please confirm you validated the applicant's educational qualifications, where appropriate?	Tick-Box
12.9	Please confirm the proposing entity is satisfied that the proposed applicant is in a position to discharge his/her obligations within the proposing entity in an effective and professional manner notwithstanding any other obligations of the applicant.	Tick-Box
	*Question 12.10 is not applicable for credit unions and will not be available to edit in the online Individual Questionnaire	
*12.10	In this regard, where the applicant is to operate in the role of Director, please confirm the time commitment, in days per annum that the Director will provide to the Directorship per annum.	



12.11	Please confirm the proposing entity will notify the Central Bank of Ireland without delay of the resignation of the proposed applicant, including confirmation of the reason(s) for the resignation					
12.12	Please confirm the proposing entity will notify the Central Bank of Ireland without delay of any material change in circumstances that would render the information contained in this application out of date/inaccurate.					
12.13	I am aware that it may be an offence and/or grounds for refusal of this application and/or grounds for revocation of an authorisation granted on foot of the application and/or grounds for the Central Bank of Ireland to commence an administrative sanctions procedure against both myself and/ or the proposing entity to knowingly or recklessly: a. Provide false or misleading information and/ or to make a false or misleading statement (which I acknowledge, may include the withholding by me of relevant information) in this application for approval b. Fail to inform and/ or withhold from the Central Bank of Ireland details of any material change in circumstances/ new information which is relevant to the status of the proposed approved person					
This declar	ration must be signed by an appropriate person of the promoting/ proposing Entity as set out in the C	Guidance document.				
I confirm my understanding and acceptance of all the statements in this declaration						
Title						
Surname	Surname					
First Name	First Name					
Position Dropdown list of applicable roles						

Central Bank of Ireland - RESTRICTED



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