

## MARKETING REPRESENTATIVE APPLICATION FORM

Name of principal:	Phillip Capital Sdn Bhd
Location:	B-18-6, Megan Avenue II, No. 12, Jalan Yap Kwan Seng, 50450 Kuala Lumpur, Malaysia
<b>Representative's relationship with principal</b>	
<input type="checkbox"/> Salaried <input type="checkbox"/> Commissioned <input type="checkbox"/> Others ( <i>please specify</i> ):	

PROFILE			
<b>Personal Details</b>			
Salutation:			
Full Name (as per NRIC):			
Other Name:			
Date of birth: ( <i>dd mm yyyy</i> )			
Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Nationality:			
Tax Identification Number (TIN No):			
Status:	<input type="checkbox"/> Bumiputera	<input type="checkbox"/> Non-Bumiputera	<input type="checkbox"/> Foreigner
<b>Address and Contact Detail(s)</b>			
Residential address:			
Correspondence address:			
Contact Details:	Email:		
	Home:	Handphone:	
	Office:	Fax:	
<b>Bank Details</b>			
Name of Bank:			
Bank Account Holder Name:			
Bank Account Number:			
Account Type:			

IC & Passport Details		
For Malaysian	Old NRIC No.:	New NRIC No.:
For non-Malaysian	Passport No.:	Expiry date:
	Country of Issue:	Date of Issue:
	Length of residence in Malaysia:      year(s)	
	Have you previously applied for a work permit? <input type="checkbox"/> No <input type="checkbox"/> Yes ( <i>please specify details</i> )	

Marital Status Details				
<input type="checkbox"/> Single <input type="checkbox"/> Married ( <i>please provide spouse's details</i> ) <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed				
Full Name (as per NRIC):	For Malaysian	For non- Malaysian	Name of employer <i>(if in employment)</i>	Details of employer
	Old NRIC No/ New NRIC No (if any)	Passport No. / Expiry date/ Country of Issue/ Date of Issue		Address/ Office No./ Fax No.

ACADEMIC OR PROFESSIONAL QUALIFICATIONS		
School/ College/ University/ Others	Year	Certificate/ Degree/ Masters/ Others

EMPLOYMENT HISTORY				
Date <i>(mm yyyy)</i>		Name of Employer & Designation Held	Description of Duties	Capital market/ financial services- related? <i>(Y/N)</i>
From	To			

**DECLARATIONS**

1) Do you hold CMSRL license and attached to any other CMSL?

No  Yes (please provide details below:

CMSRL License No: \_\_\_\_\_

CMSL name : \_\_\_\_\_ )

2) Are you a Marketing Representative for any other CMSL?

No  Yes (please provide details)

If yes, please fill in the below section

Name of CMSL	Date of the Appointment as a Marketing Representative (dd mm yyyy)

3)

a. Have you been charged with any offence in any court of law?

No  Yes (please provide details)

b. Has any legal action been initiated against you in any court of law?

No  Yes (please provide details)

c. Have you been convicted, whether within or outside Malaysia, of an offence involving fraud, dishonesty, or violence, or of an offence that involved a finding of fraudulent or dishonest conduct?

No  Yes (please provide details)

d. Have you been convicted of an offence under securities laws or any laws outside Malaysia relating to the capital market?

No  Yes (please provide details)

e. Have you contravened any provision of written law, whether within or outside Malaysia, enacted to protect the public against financial loss due to dishonesty, incompetence, or malpractice in financial services or company management, or due to the conduct of bankrupts?

No  Yes (please provide details)

f. Have you engaged in any business practice that appears deceitful, oppressive, or otherwise Improper (whether unlawful or not) or that reflects poorly on your method of conducting business?

No  Yes (please provide details)

g. Have you engaged in or been associated with any business practices or conducted yourself in a way that casts doubt on your competence and soundness of judgment?

No  Yes *(please provide details)*

4)

a. Are you able to act in the best interest of the clients of a principal, considering your reputation, character, financial integrity, and reliability?

No  Yes

b. I confirm that there are no circumstances that would likely result in improper business conduct by me, or that would discredit the manner in which I, or anyone employed by or associated with me, conducts business as a marketing representative.

No *(please provide details)*  Yes

**OTHER INFORMATION**

Is there any other additional information relevant to this application?

No  Yes *(If "Yes", please specify details)*

**SUPPORTING DOCUMENTS – Please provide annexures for the following information**

No.	Description	(please tick)	
		Yes	N/A
1	A copy of the applicant's NRIC* (for Malaysian citizens) or passport* (for non-Malaysian citizens)	<input type="checkbox"/>	
2	A copy of the applicant's recent coloured passport-sized photograph	<input type="checkbox"/>	
3	A copy of the applicant's relevant academic certificates**	<input type="checkbox"/>	
4	A copy of applicant's certificate of attendance of familiarisation programme (FP1) and passed the assessment Work permit <i>(**not applicable if applicant has CMSRL license and is attached to a CMSL)</i>	<input type="checkbox"/>	<input type="checkbox"/>
5	A copy of Consent for Annual Background search for License Representative Letter (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
6	Any other information or related document	<input type="checkbox"/>	<input type="checkbox"/>

*\*For security purposes, please cross-out on the copy of the document*

**TRUE AND CORRECT INFORMATION**

I hereby declare that all information provided in this application is true and correct.

Name of Applicant:

Date

**RECOMMENDED BY**

I hereby confirm that to the best of my knowledge that the applicant had fulfilled the requirement to be the Marketing Representative.

Condition (if any)

Name:

Designation:

Date:

**APPROVED BY**

Condition of approval (if any)

Name :

Designation: Director

Date:

