

Fit and Proper Declaration Form

Applicants to the Chief Executive Officer position of Maldives Pension Administration Office must provide the following information. If the reply is “Yes” to any query, specify details in a separate sheet referencing the corresponding number of the query and attach it as an annex.

#	Query	Yes	No
1.	In the past 10 years, were you arrested, charged and/or convicted for any criminal offense under any law in Maldives or elsewhere?		
2.	In the past 10 years, were you investigated in the Maldives or elsewhere, by any governmental department or institution, professional association, or other regulatory body?		
3.	In the past 10 years, were you subject to any adverse rulings in civil proceedings, particularly those associated with fraud, misrepresentation or dishonesty, under any law in Maldives or elsewhere?		
4.	In the past 10 years, were you declared bankrupt or has made a composition or arrangement with any creditors?		
5.	In the past 10 years, were you a director or person concerned in the management of a business that has entered into liquidation or been the subject of a winding up order?		
6.	In the past 10 years, were you suspended or disbarred by a professional or any other regulatory body in Maldives or elsewhere?		
7.	In the past 10 years, were you dismissed or asked to resign from acting as a director or acting in any managerial capacity, whether in Maldives or elsewhere?		
8.	Do you currently hold or in the past 10 years have you: <ul style="list-style-type: none"> ● held a political post in the government or a state institution; ● held a position included in the formal organizational structure of a political party; or ● contested in an internal election of a political party or submit to the Election Commission candidacy for an elective political post? 		
9.	Are you a family member (parent, spouse, children, full-sibling and half-sibling) or a related party of a sitting Board Member and/or a current member of the Executive Management of Pension Office?		
10.	Do you currently hold or in the past 1 year have you held any position or role that may give rise to an actual, potential, or perceived conflict of interest with the Pension Office?		
11.	Are you an official or an employee of the Asset Manager or a Custodian appointed by the Pension Office?		
12.	Are you a beneficial owner of five percent (5%) or more of an equity interest in such an Asset Manager or Custodian?		

#	Query	Yes	No
13.	Do you currently hold, or in the past 10 years have you held, any position, whether in an employment, advisory, or other capacity, in an entity in which Pension Assets have been invested?		
14.	In the past 10 years, have you held a position, whether in an employment, advisory, or other capacity, with an entity directly or indirectly involved in the investment of Pension Assets?		
15.	Are you a director, or have been a director in the past 5 years of any company, partnership, corporate body, or any other business organization? (if “Yes”, provide the following details): <u>Directorship</u> i. Name of Business Entity ii. Date of appointment iii. Executive or non-executive iv. Position held in case of Executive v. Past Directorship (date of resignation & reasons for resignation)		
16.	In the past 5 years, have you been engaged in any business activities in Maldives or abroad? (if “Yes”, provide the following details): a. <u>Shareholding (directly owned or through nominees)</u> i. Name of Business Entity ii. Amount of shareholding iii. Percentage of shareholding iv. Past shareholding (date of closure & reasons for closure or surrender)		
17.	Do you have any outstanding decreed debt or liability, as determined by a court of law, within the preceding 10 years from the date of application?		

Declaration and Consent:

I, the undersigned having read and understood the contents in this form, declare that all information given in this application and in the attached annexes, if any, are true and correct and that I have not wilfully concealed any material fact. I understand that a false declaration or misrepresentation may result in disqualification and/or be subjected to legal action.

Further, I authorize the Pension Office to verify any information provided herein, through relevant government authorities, regulatory bodies, or any other appropriate institution, as may be necessary for the purpose of verification.

Name:

National ID Card No.:

Signature:

Date: