

Personal Particulars

(Please use block letters for completion of the information requested below and the name should $\underline{\textit{match}}$ your HKID/passport record)

recordy	
Title: □ Dr. □ Mr. □ Mrs. □ Ms.	HK I.D. / Passport No.
Family Name: (as on HKID/ Passport)	Chinese Name: (if applicable)
Given Name:	
(as on HKID/ Passport)	
English Name:	Date of Birth:
(as on HKID/ Passport)	(DD/MM/YYYY)
Institution:	
Department:	
Position:	Email Address:
Contact No.:	
(Office)	(Mobile) (Home)
Office Address:	
Correspondence Address:	
(if different from the above)	

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Employment History

(List employment histories of PWM experience and/or relevant financial services experience only)

Employer	Position	Employment Period (DD/MM/YYYY)	Roles Verified By	Key Responsibilities
		from	□ HR	
		from	□ Self-Declared	
		to	□ Self-Declared	
		from	□ HR	
		to	☐Self-Declared	
		from	□ HR	
		from	□ Self-Declared	
		to	☐ HR ☐Self-Declared	
		from	□ HR	
		to	☐Self-Declared	
		from	□ HR	
		from	☐Self-Declared	
		to	☐ HR ☐ Self-Declared	



Disciplinary Actions and Investigations, Financial Status and Character

Yo	ou are required to answer the following questions by selecting "Yes" or "I	No".	
1.	Have you ever been reprimanded, censured, disciplined by any profession authority?	onal or reg	ulatory
		\square Yes	□ No
2.	Have you ever had a record of non-compliance with various non-statut censured, disciplined or disqualified by any professional or regulatory your profession?	•	
		\square Yes	□ No
3.	Have you ever been investigated about offences involving fraud or dishe by a court to be criminally or civilly liable for fraud, dishonesty or misf	•	djudged
		\Box Yes	□ No
4.	Have you ever been refused or restricted from the right to carry on any which a specific license, registration or other authorisation is required by	-	for
		□ Yes	□ No
5.	Have you ever been adjudged bankrupt, or served with a bankruptcy per	tition?	
		□ Yes	□ No
	otes: If you have answered "Yes" to any of the above questions, please prattaching all relevant documents relating to the matter(s) at issue.	ovide more	e details
Pa	ayment		
•	oplication fee of HK\$1,000 should be made payable by cheque to an agement Association Limited".	"Private	Wealth



Acknowledgement and Declaration

- I declare that all information I have provided in this form is true and correct.
- I understand that the paid fees are non-refundable and non-transferable.
- I authorise the PWMA to obtain, and the relevant authorities to release, any information about my qualifications and/or employment as required for my application.
- I acknowledge that PWMA has the right to withdraw approval of grandfathering status and/or my CPWP designation if I do not meet the requirements.
- I confirm that I have read and understood the Personal Information Collection Statement set out in the website of PWMA at www.pwma.org.hk and consent to the terms set out therein.

Signature	Date
Name:	1
Verification by Relevant Dep	artment
1 0	by the applicant in this form has been verified to be plicant which is retained by the HR department of the has a record of this information.
Signature & Company Chop	Date
Name:]
Department:	1

Grandfathering Application

Self-declaration on Key Roles / Responsibilities for Advisory Portfolio Management

Note:

- 1. Please fill in <u>ONE</u> form for each relevant functional title / position for your application.
- 2. Please use **BLOCK LETTERS** for completion of the information requested below.
- 3. The name of the applicant should match with that on his / her HKID card or passport, whichever applicable.

Full Name of Applicant		
Name of Employer		
Business Division /		
Department		
Functional Title /		
Position		
Private Wealth Management	Yes / No	
Experience?		
Employment Period	From:	То:
(DD/MM/YYYY)		
Actual Number of Years and	Years	Months
Months in the Position / Title		
Discounted Number of Years	Years	Months
and Months in the Position /		
Title (for Non-Private Wealth	(i.e.: Number of Years of Se	rvices in Other Financial Services
Management Experience	Industry / 2)	
Only – Discount by 50%)		
Overseas experience?	Yes / No	
	If Yes, country of experience	2:

Please tick the appropriate key roles / responsibilities in relation to your functional title / position described above.

	Key roles / responsibilities	Tick where appropriate
1.	Identifying and originating new customer relationships, and developing existing relationships	
2.	Performing "know your customer" procedure, including collecting relevant customer information, performing and documenting customer needs analysis and customer risk profiling, documenting investment objectives and strategies and / or investment mandate	
3.	Delivering wealth management advice and solutions to customers, taking into account customers' circumstances, and working closely with relevant parties (e.g. Product Specialists and Portfolio Management Specialists) as appropriate	

4.	Explaining key features, structures and risks of wealth management products to customers, and explaining (and negotiating) respective terms and conditions	
5.	Making investment recommendations and /or solicitations to customers, and, unless an exemption applies, providing a copy of the rationale to customers	
6.	Working closely with relevant parties to ensure timely and accurate execution of transactions	
7.	Coordinating closely with relevant parties (e.g. Operations and Compliance) to conduct regular review of the performance of customers' asset portfolio (e.g. financial performance, quality of account service, and anti-money laundering / counter-terrorist financing issues)	
8.	Maintaining customer relationship and updating customer risk profile regularly and as appropriate	

Signature of Applicant:		
Date:		

Grandfathering Application

Self-declaration on Key Roles / Responsibilities for Discretionary Portfolio Management

Note:

- 1. Please fill in ONE form for each relevant functional title / position for your application.
- 2. Please use **BLOCK LETTERS** for completion of the information requested below.
- 3. The name of the applicant should match with that on his / her HKID card or passport, whichever applicable.

Full Name of Applicant			
Name of Employer			
Business Division /			
Department			
Functional Title /			
Position			
Private Wealth Management	Yes / No		
Experience?			
Employment Period	From:	То:	
(DD/MM/YYYY)			
Actual Number of Years and	Years	Months	
Months in the Position / Title			
Discounted Number of Years	Years	Months	
and Months in the Position /			
Title (for Non-Private Wealth	(i.e.: Number of Years of Se	ervices in Other Financial Services	
Management Experience	Industry / 2)		
Only – Discount by 50%)			
Overseas experience?	Yes / No		
	If Yes, country of experience	ce:	

Please tick the appropriate key roles / responsibilities in relation to your functional title / position described above.

	Key roles / responsibilities	Tick where appropriate
1.	Performing "know your customer" procedure, including collecting relevant customer information, performing and documenting customer needs analysis and customer risk profiling, documenting investment objectives and constraints; developing investment mandate and portfolio strategies; and explaining and document the basis of the portfolio strategies and investment mandate	•••
2.	Executing investment transactions in accordance with customer's investment objectives, investment mandates, and portfolio strategies, and working closely with relevant parties to ensure timely and accurate execution of transaction	
3.	Keeping customers informed of the portfolio performance, and regularly monitoring and managing customers' portfolio in accordance with pre-defined investment objectives, investment mandates, and portfolio strategies	

customer account and portfolio, and updating customer risk profile regularly and as appropriate	
Confirming with customers with discretionary accounts at least annually whether they wish to revoke that authority	
Signature of Applicant:	
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	regularly and as appropriate Confirming with customers with discretionary accounts at least