

**Formal Application
for Admission of an Admissions / Compliance / Corporate
Advisor**

How to use this Application Form

1. Applicants must submit a completed Application Form together with any supporting documents to:

The Prospects MTF Admissions Committee
Malta Stock Exchange Plc
Garrison Chapel
Castille Place
Valletta VLT 1063
2. The Application Form should be completed, as appropriate, in the case of both legal persons or individuals applying to become Advisors for Prospects MTF.
3. Where the applicant already holds a license issued under the Investments Services Act or other legislation in another equivalent jurisdiction, a copy of the said license is to be appended to the Application.
4. The Application should be read in conjunction with the Financial Markets Act [Cap. 345 of the Laws of Malta] and any regulations made thereunder and the Prospects MTF Rules issued by the Malta Stock Exchange plc which can be accessed via the following link:<https://borzamalta.com.mt/ProspectsMTF/Documents/Prospects%20MTF%20Rules.pdf>.
5. Applications will only be considered provided that all relevant sections have been duly completed and supporting documents have been appended.
6. Should space provided not be sufficient, additional information may be entered on a separate sheet with the heading "*Continuation to Section ____*" duly signed and dated.
7. Misleading or incorrect information on any material point shall render the application invalid.
8. All information submitted in the application is for the sole use of the Exchange and will not be divulged to third parties other than the Competent Authority as deemed appropriate.

1.00 SECTION 1 –ADVISOR

1.01 Applicant’s Name: _____

Professional Accreditation or Warrant:

Investment, banking or other financial institution Licence Reference No.

Date and Place of Issue:- _____

(Kindly append a certified true copy of the relevant accreditation, warrant licence)

Position being applied for	Admission Advisor <input type="checkbox"/>	Compliance Advisor <input type="checkbox"/>
	Corporate Advisor <input type="checkbox"/>	

1.02 **Address** *:

Address: _____

Telephone No: _____

Fax No: _____

E-mail: _____

Web: _____

Contact Person: _____

** The above information will appear on the list of approved Advisors on the Prospects MTF Website and all communications will be addressed accordingly.*

2.00 SECTION 2 – PARTNERS, DIRECTORS, OFFICERS, AND EMPLOYEES

To be completed as may be appropriate. Where not applicable kindly cross out and indicate as N/A. Kindly append certified copies of Identity Documents (ID Card or Passport in respect of all individuals indicated in this section).

2.01 Partners,Chairman and Directors

PARTNER Full Name and Surname _____
Identity Card / Passport No. _____
Date of Appointment _____

PARTNER Full Name and Surname _____
Identity Card / Passport No. _____
Date of Appointment _____

PARTNER Full Name and Surname _____
Identity Card / Passport No. _____
Date of Appointment _____

CHAIRMAN Full Name and Surname _____
Identity Card / Passport No _____
Date of Appointment _____

DIRECTOR Full Name and Surname _____
Identity Card / Passport No _____
Date of Appointment _____

APPENDIX 3.1

DIRECTOR Full Name and Surname _____

Identity Card / Passport No _____

Date of Appointment _____

DIRECTOR Full Name and Surname _____

Identity Card / Passport No _____

Date of Appointment _____

DIRECTOR Full Name and Surname _____

Identity Card / Passport No _____

Date of Appointment _____

2.02 Officers and Employees

[Including Chief Executive, Managing Director, Secretary to Board as applicable and other employees in a position of trust and/or directly engaged in the role of a Prospects MTF Advisor.]

<u>Full Name & Surname</u>	<u>Position</u>	<u>ID Card No./ Passport No.</u>	<u>Date of Appointment</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

APPENDIX 3.1

2.03 Qualified Personnel in terms of Rule 3.01.09.02:

<u>Full Name & Surname</u>	<u>Position</u>	<u>ID Card No./ Passport No.</u>	<u>Date of Appointment</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2.04 Director(s)/Officer(s) appointed to sign:

	<u>Full Name & Surname</u>	<u>Position</u>	<u>ID Card No./ Passport No.</u>
(i)	_____	_____	_____
(ii)	_____	_____	_____

Specimen Signatures:

- (i) _____
- (ii) _____

Kindly attach the appropriate Board Resolution in respect of the above appointment/s.

3.00 SECTION 3 - SHAREHOLDING

In the case of a corporate, please give details of the shareholding in the firm applying for an Advisor and any voting rights attached thereto of each of the individuals mentioned in Section 2 above where applicable [a “NIL” reply is required where no shareholding is applicable].

<u>Full Name & Surname</u>	<u>Position</u>	<u>ID Card/ Passport No.</u>	<u>Shareholding</u>	<u>Rights</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

4.00 SECTION 4 – OTHER BUSINESS INTERESTS

On supplementary sheets as may be necessary, kindly provide answers to the following questions for **each** of the individuals mentioned in Section 2 above [“NIL” returns are also required where applicable].

(i) Are you a director, officer or employee of any companies or corporations engaged in relevant activities similar to those of the applicant?

YES NO

If YES, please provide details.

(ii) Do you have any controlling interest, directly or indirectly in any public company?

YES NO

If YES, please provide details.

5.00 SECTION 5 – COMPETENCY ASSESSMENT

5.01 For **each** of the individuals referred to in Sections 2.02 and 2.03, Advisors are to submit the Prospects MTF Advisor Competency Assessment Information sheet (Appendix 3.1.1) in relation to their professional qualifications, experience, related training and any other details which are deemed appropriate for the competency assessment of these individuals within their role with the Prospects MTF Advisor.

A CV together with a Certificate of Good Conduct and an authenticated copy of an identification document, also need to be provided.

5.02 Where an Advisor is outsourcing some of the responsibilities to other experts, the Advisor needs to provide details of such outsourced experts as indicated in Sections 1–4 above and relevant details of any outsourcing agreements entered into. The Competency Assessment (Appendix 3.1.1) referred to in Section 5.01 where applicable needs also be completed.

6.00 SECTION 6 – PROCEDURES

Kindly append a copy of the procedures you have in place to prevent and detect conflicts of interest in performing your role as an Advisor.

7.00 SECTION 7 - DECLARATION

Declaration by Applicant

1. We/I declare that the information contained in this application is complete and correct.
2. We/I declare that the Admissions/Compliance/Corporate Advisor's (*delete as appropriate*), officers and employees are aware of the provisions of the Financial Markets Act, any regulations made thereunder and the Prospects MTF Rules that may be in force from time to time and will comply with and be bound by all such relevant provisions.
3. We/I declare that the Admissions/Compliance/Corporate Advisor (*delete as appropriate*) shall be responsible for and be bound by all the actions and omissions of its partners, officers and employees and any outsourced experts in their activities in connection with or contributions to Malta Stock Exchange plc.
4. We/I declare that the Admissions/Compliance/Corporate Advisor (*delete as appropriate*) shall keep Malta Stock Exchange plc notified of any significant changes in the information supplied in this application which occur after the date of submission of the application and prior to receiving notification of the Malta Stock Exchange plc's decision.
5. We/I shall maintain the appropriate independence and impartiality on a continuing basis in the relationship with our/my client applicant/admitted Prospects MTF companies and promptly, diligently and accurately reply to queries or requests for information made by the Malta Stock Exchange and immediately advise the Malta Stock Exchange of any possible breach of the Prospects MTF Rules.

Signature _____ Signature _____

NAME IN BLOCKS: _____ NAME IN BLOCKS: _____

Designation _____ Designation _____

Signed on behalf of [name of applicant Advisor] _____ on [date]

_____.