



APPLICANT'S COMPANY NAME: \_\_\_\_\_

DATE: \_\_\_\_\_ FIRM TIN: \_\_\_\_\_

APPLICATION FOR REGISTRATION
AS A CERTIFIED INVESTMENT SOLICITOR (CIS)
OF AN INVESTMENT COMPANY ADVISER/MANAGER
AND AMENDMENTS THERETO

[ ] NEW APPLICATION [ ] First Time Registrant
[ ] Change in Employer ; SEC Form ICA-CIS/CO-T filed on \_\_\_\_\_
[ ] Returnee (please indicate date of last license) \_\_\_\_\_

[ ] AMENDMENTS This amendment pertains to items \_\_\_\_\_
[ ] Change in Information
[ ] Correction/Completion of Deficiency

Type of Employer:

[ ] Mutual Fund Principal Distributor [ ] Investment Company [ ] Investment Company Adviser
[ ] Mutual Fund Retailer [ ] Fund Administrator [ ] Others (please specify) \_\_\_\_\_

WARNING: Failure to keep this form current and to file accurate supplementary information on a timely basis, or the failure to keep accurate books and records or otherwise to comply with the Investment Company Act and the Securities Regulation Code and rules and regulations adopted thereunder may result in disciplinary, administrative, injunctive or criminal action.

INTENTIONAL MISSTATEMENTS OR OMISSIONS OF FACTS MAY CONSTITUTE CRIMINAL VIOLATIONS

Form with fields for: (1) LAST NAME, JR./SR etc., FIRST NAME, MIDDLE NAME; (2) OTHER NAMES KNOWN BY; (3) APPLICANT'S TIN; (4) DATE OF BIRTH, SEX, HEIGHT, WEIGHT, HAIR COLOR, EYE COLOR; (6) NAME OF EMPLOYER FIRM; (7) EMPLOYMENT DATE; (8) FIRM'S MAIN ADDRESS, STREET, CITY, PROVINCE, ZIP; (9) BRANCH ID#, OFFICE OF EMPLOYMENT ADDRESS, STREET, CITY, ZIP

(10) APPLICANT MUST HAVE PASSED THE CERTIFICATION EXAMINATION NO LATER THREE YEARS FROM THE DATE OF THIS APPLICATION (INDICATE THE DATE WHEN THE APPLICANT PASSED THE EXAMINATION) OR HAVE AT LEAST THREE (3) YEARS EXPERIENCE AS A REGISTERED SALESMAN OR CERTIFIED INVESTMENT SOLICITOR RESPECTIVELY (AS INDICATED IN RESPONSE TO ITEM 13) TO BE ELIGIBLE FOR REGISTRATION.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

(11) FAMILY MEMBERS

SPOUSE:

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FATHER:

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MOTHER:

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CHILDREN:

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(12) RESIDENTIAL HISTORY - Give all addresses for the past five years, starting with the current address.

STREET/DISTRICT	CITY	PROVINCE	ZIP	FROM		TO	
				MO.	YEAR	MO.	YEAR

(13) EMPLOYMENT AND PERSONAL HISTORY - Account for all time for the past ten years. Give all employment experience starting with your previous employer and working back ten years. Include full and part-time work, self-employment, military service, unemployment and full-time education.

EMPLOYER	CITY	PROVINCE	FROM	TO	POSITION HELD
			MONTH / YEAR	MONTH / YEAR	

EDUCATIONAL ATTAINMENT		
SCHOOL / COLLEGE / UNIVERSITY	YEAR GRADUATED	COURSE

(14) Are you currently engaged in any other business (not shown above either as a proprietor, partner, officer, director, trustee, employee, agent or otherwise?

YES

NO

If "YES", please explain below:

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(15) If applicant is applying for registration as a sales agent for the first time, state the name and date of certification as a Certified investment solicitor employed by the employing company

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IF THE ANSWER TO ANY OF THE FOLLOWING QUESTIONS IS "YES", PROVIDE COMPLETE DETAILS OF ALL EVENTS AND PROCEEDINGS ON A DISCLOSURE REPORTING PAGE (Schedule DRP)

(16) DISCIPLINARY HISTORY

**DEFINITIONS**

\* **Charged** - Accused of a crime in a formal complaint, information or indictment.

\* **Investment or Investment Related** – Pertaining to securities, commodities, banking, insurance including but not limited to acting as a salesman of or being associated with a broker-dealer, investment house, investment company, investment advisor, bank or a pre-need plan

\* **Involved** – Doing an act or aiding, counseling, commanding, inducing, conspiring with or failing reasonably to supervise another in doing an act.

\* **Foreign Financial Regulator** - includes (A) a foreign securities authority; (B) other government body or foreign equivalent of a self-regulatory organization empowered by a foreign government to administer or enforce its laws relating to the regulation of investment or investment-related activities; or membership organization, a function of which is to regulate the participation of its members in the activities listed above.

	YES	NO
A. Have you been convicted of or plead guilty or nolo contendere ("no contest") in a domestic or foreign court to:		
(1) a felony or misdemeanor involving: investments or an investment-related business: fraud, false statements or omissions, wrongful taking of property, embezzlement, bribery, forgery, counterfeiting, extortion, false oath or perjury? .....	[ ]	[ ]
(2) gambling? .....	[ ]	[ ]
(3) any other crime? .....	[ ]	[ ]
B. Have you or an organization over which you exercised management or policy control, ever been charged with any crime specified in question A (1) or (2) in a domestic or foreign court?.....	[ ]	[ ]
C. Has any domestic or foreign court (after hearing, upon consent or otherwise) ever:		
(1) enjoined you in connection with any investment-related activity?.....	[ ]	[ ]
(2) found that you were involved in a violation of investment-related statutes or regulations?.....	[ ]	[ ]
D. Has the Securities and Exchange Commission (after hearing, upon consent or otherwise) ever:		
(1) found you to have made a false statement or omission or been dishonest, unfair or unethical?.....	[ ]	[ ]
(2) found you to have been involved in a violation of investment regulations or statutes?.....	[ ]	[ ]
(3) found you to have been a cause of an investment-related business having its authorization to do business denied, suspended, revoked or restricted? .....	[ ]	[ ]
(4) entered an order denying, suspending or revoking your registration or disciplined you by restricting your activities?.....	[ ]	[ ]
(5) imposed a civil money penalty on you, enjoined you or ordered you to cease and desist from any activity?.....	[ ]	[ ]
E. Has any other regulatory agency or foreign financial regulator (after hearing, upon consent or otherwise) ever:		
(1) found you to have made a false statement or omission or been dishonest, unfair or unethical?.....	[ ]	[ ]
(2) found you to have been involved in a violation of investment regulations or statutes?.....	[ ]	[ ]
(3) found you to have been a cause of an investment-related business having its authorization to do business denied, suspended, revoked, or restricted?.....	[ ]	[ ]
(4) entered an order against you in connection with investment-related activity?.....	[ ]	[ ]
denied, suspended, or revoked your registration or license or otherwise prevented you from associating with an investment-related business, or disciplined you by restricting your activities? .....	[ ]	[ ]
F. Has your license as an attorney, accountant or government contractor ever been revoked or suspended? .....	[ ]	[ ]
G. Has any self-regulatory organization:		
(1) found you to have made a false statement or omission?.....	[ ]	[ ]
(2) found you to have been involved in a violation of its rules?.....	[ ]	[ ]
(3) found you to have been the cause of an investment-related business having its authorization to do business denied, suspended, revoked or restricted?.....	[ ]	[ ]
(4) disciplined you by expelling or suspending you from membership, barring or suspending your association with its members, or restricting your activities?.....	[ ]	[ ]
H. Has any foreign government ever entered an order against you related to investments or fraud, other than as reported in items 16A, B, C, or E?.....	[ ]	[ ]
I. Have you ever been the subject of an investment-related customer-initiated complaint or proceeding that:		
(1) alleged compensatory damages of P240,000 or more for fraud or wrongful taking of property?.....	[ ]	[ ]
(2) was settled or decided against you for P120,000 or more for fraud or the wrongful taking of property?.....	[ ]	[ ]
J. Are you now the subject of any complaint, investigation, or proceeding that could result in a "yes" answer to parts A-H of this item? .....	[ ]	[ ]
K. Has a bonding company denied, paid out on, or revoked a bond for you?.....	[ ]	[ ]
L. Do you have any unsatisfied judgments or liens against you?.....	[ ]	[ ]
M. Have you or a firm that you exercised management or policy control over, or owned 10% or more of the securities of, failed in business, made a compromise with creditors, filed a bankruptcy petition or been declared bankrupt or insolvent?.....	[ ]	[ ]
N. Has a broker or dealer firm that you exercised management or policy control over, or owned 10% or more of the securities of, been declared insolvent or bankrupt?.....	[ ]	[ ]
O. Have you been discharged or permitted to resign because you were accused of:		
(1) violating investment-related statutes, regulations, rules or industry standards of conduct?.....	[ ]	[ ]
(2) fraud or the wrongful taking of property?.....	[ ]	[ ]
(3) failure to supervise in connection with investment-related statutes, regulation, rules or industry standards of conduct?.....	[ ]	[ ]
P. In the case of an associated person, has a professional, trade or regulatory body censured or reprimanded you for negligence, incompetence or mismanagement, or dismissed or requested you to resign from any position or office for negligence or mismanagement.....	[ ]	[ ]

EXECUTION PAGE

THE APPLICANT MUST READ THE FOLOWING VERY CAREFULLY

- 1. I swear or affirm that I have read and understand the items and instructions on this form and that my answers (including attachments) are true and complete to the best of my knowledge. I understand that I am subject to administrative, civil or criminal sanctions penalties if I give false or misleading answers.
2. As a condition of registration, I submit to the authority of the Commission and any Self Regulatory organization to which my employer is a member of or participant in (SRO) and agree to comply with provisions, conditions and covenants of the Code, rules and regulations adopted thereunder, other applicable laws and SRO rules (hereafter collectively referred to as "applicable requirements"). I further agree to be subject to and comply with all requirements, ruling, orders, directives and decisions of, and penalties, prohibitions and limitations imposed by the Commission and SRO, subject to right of appeal or review as provided by law.
3. I agree that neither the Commission, SRO nor any person acting on their behalf shall be liable to me for action taken or omitted to be taken in official capacity or in the scope of employment, except as otherwise provided in the applicable requirements.
4. I authorize the jurisdictions and organizations to give any information they may have concerning me to any employer or prospective employer and the Commission and any SRO, and I release the Commission and SRO and any person acting on their behalf from any and all liability of whatever nature by reason of furnishing such information.
5. I consent that notice of any investigation or proceeding by the Commission or any SRO against me may be given by personal service or by regular registered or certified mail or confirmed telegram to me at my most recent business or home address as reflected in this form or any amendment thereto, or by leaving notice of the investigation or proceeding at such address.
6. I authorize all my employers and any other person to furnish to any jurisdiction or organization or any agent acting on its behalf, any information they have, including my creditworthiness, character, ability, business activities, educational background, general reputation, history of my employment and, in the case of former employers, complete reasons for my termination. Moreover, I release such employer, former employer and each other person from any and all liability, of whatever nature, by reason of furnishing any of the above information, including that information reported on the SEC Form ICA-28T (Termination Notice). I recognize that I may be the subject of an investigative report ordered by any such jurisdiction or organization.
7. I agree to update this form by causing an amendment to be filed no later than seven (7) days from the date of any changes to answers previously reported. Further, I represent that, to the extent any information previously submitted is not amended, the information provided in this form is true, correct, current, accurate and complete.

Month / Day / Year

SIGNATURE OF APPLICANT

TYPE OR PRINT NAME OF APPLICANT

Subscribed and sworn to before me this day of 200 exhibited to me his/her Community

Tax Certificate No. issued at on

Notary Public

Doc. No.
Page No.
Book No.
Series of 200

THE EMPLOYING COMPANY MUST COMPLETE THE FOLLOWING

To the best of my knowledge and belief, the applicant is currently bonded where required, and at the time of approval, will be familiar with the Code and rules and regulations adopted thereunder, and will be fully qualified for the position for which application is being made herein. I agree that, notwithstanding the approval of the Commission, which hereby is requested, I will not employ the applicant in the capacity stated without first receiving the approval of the Commission. This firm has communicated with all the applicant's previous employers for the past three years.

EMPLOYER	NAME AND POSITION OF PERSON CONTACTED	EMPLOYED		HOW CONTACTED		
		FROM	TO	PHONE	LETTER	INTERVIEW

IN ADDITION, I HAVE TAKEN APPROPRIATE STEPS TO VERIFY THE ACCURACY AND COMPLETENESS OF THE INFORMATION CONTAINED HEREIN AND WITH THIS APPLICATION.

THE APPROPRIATE SIGNATORY AREA MUST BE COMPLETED ON ALL INITIAL FILINGS.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Month Day Year

\_\_\_\_\_  
 AUTHORIZED SIGNATORY

\_\_\_\_\_  
 PRINT NAME OF AUTHORIZED SIGNATORY

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 200\_\_ exhibited to me his/her Community Tax

Certificate No. \_\_\_\_\_ issued at \_\_\_\_\_ on \_\_\_\_\_.

Notary Public

Doc. No. \_\_\_\_\_.  
 Page No. \_\_\_\_\_.  
 Book No. \_\_\_\_\_.  
 Series of 200 \_\_\_\_.

**DIS CLOSURE REPORTING PAGE (DRP)**

LAST NAME	JR./SR., etc	FIRST NAME	MIDDLE NAME (Specify if none)
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**INSTRUCTIONS**

This Disclosure reporting Page (DRP) is to be used to report details of affirmative responses to item 16 questions.

- Use a separate DRP for each event or proceeding. Complete items 1-8 below (Item 9 is optional)
- One event may result in more than one "yes" answer in item 16; if so, use only one DRP to report this information.
- It is not a requirement that documents be provided for each event or proceeding. Should they be provided with the DRP, they will not be accepted as disclosure in lieu of answering the questions on this form.

1. This DRP relates to the following questions in item 16 of SEC FORM ICA-CIS:

<input type="checkbox"/> 16A (1)	<input type="checkbox"/> 16C (1)	<input type="checkbox"/> 16D (3)	<input type="checkbox"/> 16E (2)	<input type="checkbox"/> 16F	<input type="checkbox"/> 16G (4)	<input type="checkbox"/> 16J	<input type="checkbox"/> 16N
<input type="checkbox"/> 16A (2)	<input type="checkbox"/> 16C (2)	<input type="checkbox"/> 16D (4)	<input type="checkbox"/> 16E (3)	<input type="checkbox"/> 16G (1)	<input type="checkbox"/> 16H	<input type="checkbox"/> 16K	<input type="checkbox"/> 16O (1)
<input type="checkbox"/> 16A (3)	<input type="checkbox"/> 16D (1)	<input type="checkbox"/> 16D (5)	<input type="checkbox"/> 16E (4)	<input type="checkbox"/> 16G (2)	<input type="checkbox"/> 16I (1)	<input type="checkbox"/> 16L	<input type="checkbox"/> 16O (2)
<input type="checkbox"/> 16B	<input type="checkbox"/> 16D (2)	<input type="checkbox"/> 16E (1)	<input type="checkbox"/> 16E (5)	<input type="checkbox"/> 16G (3)	<input type="checkbox"/> 16I (2)	<input type="checkbox"/> 16M	<input type="checkbox"/> 16O (3)

2. Is this DRP being filed to change or update any information regarding a previously reported event or proceeding?  Yes  No  
If yes, complete items 1-8, and circle the item which are being changed.

3. Who initiated this event or proceeding? (enter name of firm, regulator, court, customer, etc.)

\_\_\_\_\_

4. What type of event or proceeding was this? (i.e., Customer Complaint, Termination, Civil, Administrative, Criminal, Arbitration)

\_\_\_\_\_

5. On what date was the event or proceeding initiated?

\_\_\_\_\_

6. Identify the docket or case number of the event or proceeding (if any)

\_\_\_\_\_

7. What were the allegations against you? (Include amounts of actual or alleged damages or claims.)

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8. a. What is the current status of the event or proceeding? \_\_\_\_\_  
b. On what date was this status reached? \_\_\_\_\_  
c. What was the result? (Include felony/misdemeanor, a description of the penalties, amount of fine, payment or settlement, terms of the disposition, length of suspension or restriction, etc.) \_\_\_\_\_

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9. You may provide a brief summary of this event or proceeding.

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\_\_\_\_\_  
Month / Day / Year

\_\_\_\_\_  
SIGNATURE OF APPLICANT

**SECURITIES AND EXCHANGE COMMISSION**

**SEC FORM ICA-CIS**

**APPLICATION FOR INDIVIDUAL REGISTRATION AND AMENDMENT TO REGISTRATION  
OF A CERTIFIED INVESTMENT SOLICITOR (CIS)  
OF AN INVESTMENT COMPANY ADVISER**

**GENERAL INSTRUCTIONS**

**INTRODUCTION**

Section 40 of Republic Act No. 2629, otherwise known as the Investment Company Act provides that an agent or investment company may not solicit investments unless he has obtained a certificate of authority to so act from the Securities and Exchange Commission. A requirement for obtaining such a certificate is that the agent or investment solicitor must have passed a mental and moral test. Application for registration as a salesman is made by filing SEC Form ICA-CIS with the Commission and paying the prescribed fee.

**Salesperson/Certified Investment Solicitor** is a natural person, employed as such or as an agent or an investment solicitor by an investment company to solicit investments

An individual applies for registration by filing a complete SEC Form ICA-CIS with the Securities and Exchange Commission. A new and complete form must be filed when an individual changes employment and desires to become registered with another investment company/mutual fund manager/adviser.

The information contained on SEC Form ICA-CIS shall be kept current, thus requiring an individual to make an amended filing on SEC Form ICA-CIS whenever there is any change. However, the form may be completed only with regard to those items affected by the changes, with the exception of Items (1) through (6) which shall be completed on all amending applications for identification purposes. Amended filings should be made to correct deficiencies in a previous filing and to update and keep current the information required by the form.

Termination of registration is made by the employer by filing SEC Form ICA-CIS/CO-T no later than thirty (30) days after such termination.

**General Instructions**

1. All information shall be typed or neatly printed in blank ink.
2. All information required shall be submitted on the officially prescribed SEC Form ICA-CIS or mechanical reproduction thereof. All pages containing this information may be mechanically reproduced by any method producing clear, legible copies of identical type size.
3. All questions must be answered. Enter "none" or "N/A" (not applicable) where this is the appropriate response. Failure to complete all required items may cause the form to be returned unprocessed or considered deficient.
  - A) Items 1 through 7 shall be completed by the employer.
  - B) Items 8 through 16 shall be completed by the applicant.

Item (2): Include all names by which you are or have been known other than your current legal name. This includes any nicknames, maiden names or married names by which you are now or have been known since adulthood.

Item (13): The following information should be furnished:

- 1) The full name and address of the business;
- 2) The nature of the business;
- 3) Your title or position;
- 4) A brief description of your duties;
- 5) The amount of time you devote to the business; and
- 6) Whether it is during securities trading hours.

Item (16): Use the Disclosure Reporting Page (DRP) for providing details to “yes” answers.

4. All space provided on the form must be used before using SEC Form ICA-CIS ATTACHMENT SHEET. Except for copies of supporting documents, additional and/or explanatory information must be submitted on the ATTACHMENT SHEET. Copied documents must be clearly identified with the applicant’s name and Tax Identification Number (TIN) as well as the item number being answered.
5. All required signatures must be original. Mechanical reproductions of signatures will not be accepted.
6. Registered individuals are under a continuing obligation to update information required by filing SEC Form ICA-CIS no later than seven (7) days of such changes. To amend information, indicate in the appropriate space on page 1 of the form that it is an amended filing, and make changes to the form where appropriate accompanied by the Execution Page.
7. A change of employment requires a complete filing of the form except that individuals who have been previously registered and have filed a complete or an amended application within the past two years, and there has been no other change within that period, may omit responses to items (11) and (12).
8. For purposes of this form, “appropriate signatory” means the individual designated and authorized by the employer to execute SEC Form ICA-CIS. Such individual must be an Officer or Partner of the employer.
9. Forms and the following prescribed fees should be submitted to the Securities and Exchange Commission, SEC Building, EDSA, Greenhills, Mandaluyong City, Metro Manila:

**\* Certified Investment Solicitor - Php2,125.00**

10. The completed application with Cover Sheet shall be submitted in four (4) copies accompanied by the following attachments:
  - A) If the applicant is a foreigner, certified true copy of valid work permit duly issued by the Department of Labor and Employment (DOLE) or any appropriate agency;
  - B) Copies of identity cards/passport of applicant;
  - C) Evidence, preferably a certified true copy, that applicant has complied with applicable examination requirements and/or meets other educational, professional or technical qualifications;
  - D) Written evidence that an Investment Company Adviser has agreed to employ applicant contingent upon the Commission’s approval of his registration application; and
  - E) Two (2) pcs. recent colored ID pictures with signature at the back to be attached on the first two sets of the application from by stapling the ID picture on the top edge for easy inspection of the signature affixed on its dorsal side.

**ICA-CIS ATTACHMENT SHEET**

**APPLICANT'S COMPANY NAME:** \_\_\_\_\_

**NAME OF CIS:** \_\_\_\_\_ **TIN:** \_\_\_\_\_

Use this attachment sheet to report details of additional and/or explanatory information.

Provide complete and concise information.

<b>ITEM OF FORM</b> Item # and Letter	<b>ANSWER</b>