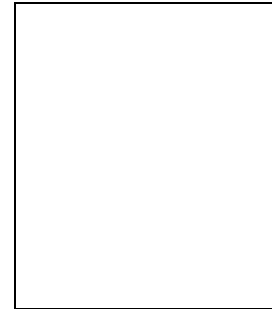


**NON-BANK FINANCIAL INSTITUTIONS REGULATORY AUTHORITY
("NBFIRA")**



Two passport size Photographs

PERSONAL QUESTIONNAIRE

To be completed and signed for by the prospective Shareholders, Directors, Key Persons & Controllers of Non-Bank Financial Institutions.

Name of financial institution in connection with which this form is being completed:

Please state the position you are being appointed for, e.g., as a Director, Chief Executive Officer, Finance Manager, Principal Officer, Trustee etc.

Please also describe the specific duties & responsibilities that you will assume, indicating whether you will be acting on the directions or instructions of any other person(s). If you are completing this form in the capacity of a director, please indicate whether you will assume executive responsibilities for the management of the company or whether your appointment is for a non-executive role, also indicate whether you are independent or not.

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Please provide details of any other entities of which you are a director, shareholder, or manager and the countries in which these are incorporated:

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1. PERSONAL DETAILS

(a) Name of Controller/Key person: (Please give the name of the person completing the questionnaire, i.e., the key person or controller)

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(i) Have you ever had your name changed? () YES () NO
If "YES", give the reason for the change:

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.....

(ii) Other names used at any time.

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(b) Date & Place of Birth

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(c) Postal Address:

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(d) Telephone and Fax Numbers

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(e) Residential Address

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(f) Nationality

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(g) Passport No. (non-citizens)/National Identity No.(citizens)

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(h) Gender.....

Previous residential address 1 (if address stated above is less than 5 years)

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Number of years resident at this address.....

Previous residential address 2 (if address 1 stated above is less than 5 years)

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Number of years resident at this address

Previous residential address 3 (if address 2 stated above is less than 5 years)

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.....
.....

Number of years resident at this address

2. QUALIFICATIONS

Please give details of both professional and educational qualifications:

a. Qualifications

Type:

Name and location of institution:

Date received

Type:

Name and location of institution:

Date received

b. List membership of Professional Bodies and Associations:

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c. Other relevant training

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4. EMPLOYMENT HISTORY

List complete employment record (up to and including present jobs, positions, directorships) for the past 10 years giving:

DATE

EMPLOYER & ADDRESS

TITLE

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(a) Can your present employer be contacted? YES NO
If the answer above is NO, please state the reason

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(b) Can your former employers be contacted? YES NO
If the answer above is NO, please state the reason

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- (c) List names, addresses, phone/fax numbers of the two independent referees who have known of your business activities over the last 5 years or more:

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5. REPUTATION & CHARACTER

Please answer “Yes” or “No” to each of the following questions. If the answer is “Yes”, please give full details on a separate sheet of paper.)

- (a) Are you, through any previous or current occupation, employment, or otherwise, precluded in any way from carrying on (fully or partially) the services which the company identified above?

YES/NO

- (b) Have you at any time been convicted of any offence by any court in any jurisdiction?

YES/NO

- (c) Have you or any entity with which you are or have been associated ever been the subject of any disciplinary, legal, other investigations or other comparable proceedings, by any law enforcement, regulatory, or professional body in any jurisdiction, whether or not there were any sanctions or other findings as a result?

YES/NO

- (d) Have you or any entity with which you are or have been associated ever been refused a licence or equivalent authorisation to carry on a business activity in any jurisdiction?

YES/NO

- (e) Have you ever been the subject of an internal disciplinary enquiry at any institution you worked for, or have you ever resigned from a position in any

jurisdiction in circumstances where, but for the resignation, there would likely have been an alternative sanction such as dismissal?

YES/NO

- (f) Have you been disqualified from acting as a director or disqualified from acting in any managerial position?

YES/NO

- (g) Have you or any entity with which you have been associated, ever been subject, in any jurisdiction, to bankruptcy, liquidation, insolvency proceedings, or compulsorily winding up, as the case may be, or made other agreements or arrangements with creditors?

YES/NO

- (h) Are you engaged in any personal litigation in any jurisdiction with respect to the management of any business entity?

YES/NO

- (i) Have you ever aided or abetted another person in breach of any law or regulation, business rules or codes of conduct, be it in Botswana or elsewhere?

YES/NO

- (j) Have you ever demonstrated an unwillingness to comply with any regulatory requirement or to uphold any professional and ethical standards in Botswana or elsewhere?

YES/NO

- (k) Have you ever provided false or misleading information to NBFIRA or been uncooperative in any dealings with NBFIRA or any other regulatory authority in any jurisdiction?

YES/NO

(l) Have you always been fair, truthful, and forthcoming in dealing with customers, superiors, subordinates, auditors, and regulatory authorities?

YES/NO

(m) Are you aware of any other matter that may be material to an assessment, by the Regulatory Authority of your competence, integrity, or financial standing?

YES/NO

(n) Are you, or any immediate member of your family, or close associate, a “Prominent Influential Person” as defined by Section 2 of the Financial Intelligence Act of Botswana? (see addendum for definition of “prominent influential person”)

YES/NO

(o) Is there any information that has not been requested through the above questions, which, in your opinion, might be material and/or of interest to the Regulator?

YES/NO

(p) If the answer to the above question is YES, please state the information.

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Certification

I certify that the above information is complete and correct to the best of my knowledge. I undertake to advise the Regulatory Authority of any material change that occurs at any time after this form is submitted and until such time as I am no longer connected to the applicant entity.

I authorise the Regulatory Authority to contact any person named herein to counter-verify the contents of this form. In so doing the Regulatory Authority may refer to the Application.

Name of Respondent

Signature.....Date.....

Sworn/Affirmed before me.....at.....

this..... day of.....20.....at.....hrs.;
the applicant having acknowledged that the information he/she has provided on this form is true, complete, and correct to the best of his/her knowledge and belief and made in good faith and has no objection to making an oath or affirmation.

.....

Commissioner of Oaths

ADDENDUM

In terms of section 2 of the Financial Intelligence Act, Prominent Influential Person *means:*

“A person who is or has been entrusted with public functions within Botswana or by a foreign country, his or her close associates or immediate member of the family or an international organization and includes —

- (a) a President.*
- (b) a Vice-President.*
- (c) a Cabinet minister.*
- (d) a Speaker of the National Assembly.*
- (e) a Deputy Speaker of the National Assembly.*
- (f) a member of the National Assembly.*
- (g) a Councilor.*
- (h) a senior government official.*
- (i) a judicial officer.*
- (j) a Kgosi.*
- (k) a senior executive of a private entity where the private entity is of such turnover as may be prescribed.*
- (l) a senior executive of a public body.*
- (m) a senior executive of a political party.*
- (n) senior executives of international organisations operating in Botswana; or*
- (o) such person as may be prescribed”*