

CUSTOMER ACCOUNT REVIEW FORM

Individual customer ("Customer") who wishes to trade in Specified Investment Product listed or quoted on a securities market or a futures market ("SIP") is required to complete this form for RHB Sec to conduct a Customer Account Review ("CAR").

*Kindly provide <u>supporting documents</u> if you have answered "YES" to any of the questions below.

MAIN APPLICANT		
Name		
Client Code(s)	NRIC/Passport Number	
JOINT APPLICANT		
Name		
Client Code(s)	NRIC/Passport Number	
(A) EDUCATIONAL QUALIFICATIONS		
Do you have any of the following qualifications: (a) Diploma or higher qualification in: 1. Accountancy 2. Actuarial Science 3. Business/business administration/business management/business studies 4. Capital Markets 5. Commerce (b) Professional finance-related qualifications: 1. Chartered Financial Analyst (CFA) 2. Chartered Institute of Securities & Investment (CISI) 3. Chartered Alternative Investment Analyst (CAIA) 4. Certified Financial Technician (CFTe) 5. Financial Risk Manager (FRM) 6. Chartered Financial Consultant (ChFC)	 Economics Finance Financial Engineering Financial Planning Computational Finance Insurance Associate Financial Planner (AFP) Associate Wealth Planner (AWP) Certified Financial Planner (CFP) Certified Public Accountant (CPA)/ Association of Chartered Certified A CMFAS Module 6 – Securities Products and Module 7 – Futures Products an 	cts and Analysis
(B) INVESTMENT EXPERIENCE		
Have you transacted in Specified Investment Products ² which are listed or quoted on a securities market or a futures market at least 6 times in the preceding three years?		Main Applicant Joint Applicant ☐ Yes ☐ No ☐ Yes ☐ No
(C) WORK EXPERIENCE		
Do you have relevant work experience (not inclusive of somentioned that are administrative or clerical in nature) for 3 consecutive years in the past 10 years in any of the form. 1. Development/Structuring of investment products 2. Management of investment products 3. Sale/trading of investment products 4. Research/analysis of investment products	or a period of minimum ollowing: acts 6. Working experience in ac treasury or financial risk	or possession of legal expertise
5. Provision of training in investment products		

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(D) SGX ONLINE MODULE			
If none of your answers for questions (A) – (C) is "YES", please be adwww.sgx.com/onlineeducation/specifiedinvestmentproducts. If you have please answer the following for our assessment:			
1. Have you passed the SGX online education module?		Main Applicant ☐ Yes ☐ No ☐ N.A.	Joint Applicant Yes No
2. How many times have you attempted the SGX online educ	ation module?	N.A.	N.A.
3. What are the previous score(s) of every assessment at the	end of the SGX online ed	ucation module?	
** Please note that your result is valid for 3 years.			
(E) OTHERS			
(E) OTHERS 1. Have you been refused by another licensed person or exer	nnt financial	Main Applicant	Joint Applicant
institution on the opening of a SIP trading account?	iipt iiiiaiiciat	Yes No	Yes No
2. If yes, how many times have you been refused?			
IMPORTANT NOTE:			
 This form is valid only for Customer who is an individual and w 	ho is not an accredited in	vestor or expert invester.	
 Examples of Specified Investment Products ("SIP") include stru- linked insurance policies, warrants and options, futures and ce- and any investment product that is only listed on an overseas e a) Shares 	ctured notes, exchange tr	aded funds, exchange traded r	
 b) Fully-paid depository receipts representing shares c) Subscription rights pursuant to rights issues d) Company warrants e) Units in business trusts 			
f) Units in real estate investment trusts g) Debentures (other than asset-backed securities and structure h) Life insurance policies (other than investment-linked life ins			
3. Regardless of the outcome of this CAR, you can, at any time, red	quest for advice concerni	ng a listed SIP.	
4. Please note the outcome of this CAR is valid for a period of 3 years.	ears.		
CUSTOMER'S DECLARATION / ACKNOWLEDEGMENT			
 I/We acknowledge that the information given is for RHB Sec to derivatives before approving my/our account for trading in liste 	ed SIP.	•	·
 I/We acknowledge that if I/we am/are deemed not to possess to completed the SGX online module, it will be at the sole disc understanding of the features and risks of derivatives to trade 	cretion of RHB Sec to de in listed SIP to approve m	termine if I/we have demons y/our account for trading in li	strated sufficient sted SIP.
I/We acknowledge that if none of my/our answers for questions or experience in derivatives.	s (A) – (D) is a "Yes", I/we	e am/are deemed not to posses	ss the knowledge
 I/We declare that all information submitted by me/us in this forr information provided by me/us may affect the outcome of this CA 	AR.	·	·
5. I/We acknowledge that I/we have personally undergone and pa	ssed the assessment at th	ne end of the SGX Online Modu	le (if applicable).
Signature of Main Applicant	Signature of Joint Ap	plicant	
FOR OFFICIAL USE			
SGX online module Score		Recommended Tagging	
Year	(if applicable)	SIP	
Client Services' Staff Name/Initial		(Indicate "NA", if customer is asses knowledge or experience in deriva	
APPROVAL: Head of Client Services Yes No Initial			

Executive Director

Yes No Initial