# Introduction

**What is the purpose of this form?**

Prospective appointments, changes in position, portfolio and/or responsibility must be notified to the Netherlands Authority for the Financial Markets (AFM). The AFM will conduct a fit and proper assessment for the prospective candidates.

# Signatory Statement and Banker’s Oath or Affirmation

The Notification Form must be signed by one (or two as the case may require) authorised signatory of the institution. If the screening is performed under article 1:1 Financial Supervision Act (Wet op het financieel toezicht or Wft), the candidate must take the Banker’s oath or affirmation within three months of the appointment.

# Annexes

You must return the completed and signed form, with the following annexes:

1. Standardised Curriculum Vitae\*
2. Completed and signed integrity screening form\*
3. Copy of the prospective appointee's valid passport or valid identity card\*
4. Position profile
5. Decision making process and Consideration for this appointment
6. Supervisory board suitability matrix or policy makers suitability matrix (whichever is applicable)
7. Cover letter (if applicable)

\*These forms are applicable for the integrity screening of co-policymakers and a holder of a qualified participation.

# Notes to the annexes 1. Standardised Curriculum Vitae of the prospective appointee

The CV must include:

* Education and relevant training courses (name and city of educational institutions, type of education/training, years, diplomas/certificates);
* Professional experience (legal name and place of the company, position, period) preferably accompanied by further information on:
	+ Management experience, number of persons for whom the prospective appointee was direct or indirectly responsible, description of duties and powers that are relevant for the assessment.
	+ Managerial experience in development, implementation and evaluation of an institution’s policy.
* Additional positions (such as supervisory board memberships and other positions/committees, both remunerated and unremunerated, stating legal name and location of the institution, description of the position or focus area, degree of control or (co-) responsibility for the policy and the average weekly or monthly time commitment for each position; preferably, the CV should include a list of demonstrable competences in the relevant areas of expertise in relation to the prospective positions.

# Profile

The profile that the institution has drawn up for the positon for which the person is being assessed. This position profile must at least contain information about the duties and/or activities and focus areas, the responsibilities and the expected (real) time commitment, the required competences and the required level of education and experience for the position.

# Decision-making process and considerations for the appointment

Please enclose the decision making process concerning the selection of the candidate, including considerations and the outcome of an assessment, if available.

Considerations should reflect to what extent the prospective candidate fits the job profile, in terms of knowledge and education as well as work experience and professional behavior. It should be substantiated why the candidate is suitable for the job. Also, explain how the candidate fits in with the collective and what he or she will contribute to the group. Substantiating documentation may include regular job assessments.

# Suitability matrix

A suitability matrix is a diagram providing insight into the level of suitability of individual members of the collective and the candidate. Be aware that the scores must be substantiated in explanatory notes.

If there are any changes in the roles/responsibilities of the policy members, the institution needs to notify the AFM of these changes. A comprehensive overview of the proposed changes in the roles and responsibilities needs to submitted for assessment by the AFM.

**The explanatory notes to the matrix should in any case provide answers to the following questions (for each suitability section in the matrix).**

1. Please indicate in which respects the collective board scores best and worst, and why?
2. In what manner will weaker points be compensated?
3. How does the collective board offsets fields of weakness of the candidate? Do knowledge and skills resting with other board members sufficiently offset those weaker areas? If so, why?

# Data Privacy

The AFM Privacy Policy describes how your personal data are handled. For more information on this topic please check the AFM [website.](https://www.afm.nl/nl-nl/over-afm/organisatie/privacy)

**Make sure to submit all relevant information correctly. This enables the AFM to process your application without undue delay.**

Return the completed and duly signed form, with annexes, to the AFM via the AFM Portal. Only complete dossiers will be considered. So please check that all relevant information is included. You can find more information in the Supplementary data.

# Questions

Please check our website for more information about the assessment of policy makers, co-policy makers and supervisory board members. If you have other questions please contact the AFM Business Desk. You can find the [contact information](https://www.afm.nl/en/over-afm/contact/ondernemersloket) on our website.

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|  **1. Institution** These data relate to the institution where the prospective appointee is to be given a (new) position. |
| 1.a. Legal name of institution  |   |
| 1.b.Street address Postal code and city  |   |
| 1.c. Telephone number  |   |
| 1.d. Here please fill in any other supervised institutions (that are affiliated with the above-mentioned institution) where the prospective appointee is to be given a (new) position or role.  |   |
|  **2. Personal Data Appointee**  |
| 2.a. Full first names and initials  |   |
| 2.b. Prefixes and surname  |   |
| 2.c. Educational Titles  |   |
| 2.d. Date of birth (DD-MM-YYYY)  Male/female  |   |
| 2.e. Place of birth  |   |
| 2.f. Country of birth  |   |
| 2.g. Nationality  |   |
| 2.h. Street name and house number  |   |
| 2.i. Postcal code and city  |   |
| 2.j. Country  |   |
| 2.k. Telephone number and mobile number (during office hours)  |   |
| 2.l. E-mail address  |   |

The prospective appointee declares that he or she will take the Banker’s Oath or Affirmation under the Financial Supervision Act within three months after his or her appointment (only applies to Financial Supervision Act assessment). If you have taken the Banker’s Oath or Affirmation in the past while working for another institution than the one you intend to work for now, you must take the Banker’s Oath again.

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| Date (DD-MM-YYYY)  |   |
| Signature particulars of the prospective appointee  |   |

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| **3. Position**  |
| 3.a. Tick the box to indicate the position of the prospective appointee at the supervised institution. Fill in the details of the prospective appointee. The letters in brackets after the position show whether the person is to undergo a suitability (S) and/or integrity (I) test.         |     Person determining day-to-day policy (l+S)   Member of the Supervisory board (l+S)   Holder of declaration of no objection (VVGB) (majority interest) (I / l+S)  Applicant for declaration of no objection (VVGB) (I)  Holder of a qualifying holding in a payment institution (I) Legal representative (insurers only) (l+S))  |
| 3.b. What is the official name of the position?  |  |
| 3.c. What are the principal duties and responsibilities? If the notification concerns any changes in the portfolio or duties, please state these explicitly here. Supervisory Board Members should state their committee memberships here.  |  |
| 3.d. Intended date of commencement in the new position? (DD-MM-YYYY)  |  |
| 3.e. For what term is the person being appointed?  |  |
| 3.f. Does the prospective appointee replace someone?   | Last name and initial(s)  |
|   |    |
| Resigned on (DD-MM-YYYY)  |
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| **4. Previous tests**  |
| 4.a. Has the prospective appointee been previously tested for integrity by AFM or DNB? If the answer is 'No', the AFM will conduct an integrity assessment of the prospective appointee. The Integrity Screening Form must be completed by the prospective appointee.  |    Yes   No  |

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| 4.b. Have any relevant facts or circumstances as stated in the Integrity Screening Form occurred since the previous test which might provide grounds for a new assessment? If yes, then fill in the Integrity Screening Form again.    |    Yes   No   |
|  **5. Referent** Three referents must be named in the case of (a) suitability screening and (b) in | tegrity screening when applying for exemption under Section 3:5 Wft.  |
| Referents must meet the following conditions: •The named referents must be jointly capable of providing a substantive pictur | e of the knowledge, experience and professional conduct of the prospective |
| appointee over the past ten years. The named referees must preferably be pers | ons to whom the prospective appointee was accountable in his former  |
| position or positions. The referents should, of course, be willing to provide infor | mation and be available to do so.  |
| •One of the referents is the last immediate superior or a fellow management or |  supervisory board member of the person being tested.  |
| •The referents must have a relevant professional background, preferably - and  | at least one - from the financial sector. If possible, at least one of the  |
| referents works for a company other than the company of the person being tes | ted.  |
| •Referents must be capable of being sufficiently independent. Referents may n | ever be blood relations or other direct or indirect relatives to the third  |
| degree or a spouse, cohabiting partner or confidant. The referents must be pre | pared to provide information.  |
|  If no referents can be found who meet the above conditions, other referents m | ay be named. In this case, an explanation must be provided (in an  |
| enclosure). If the named referent fails to meet the required criteria or provides will be requested. | insufficient insight into the prospective appointee, a new or extra referent  |
| **Referent 1**   |   |
| Initials, prefixes, surname  |   |
| Positon  |   |
| Country  |   |
| Telephone number and e-mail address (during office hours)  |   |
| What is the relation with the referent?  |   |
| **Referent 2**   |   |
| Initials, prefixes, surname   |   |
| Positon  |   |
| Country  |   |
| Telephone number and e-mail address (during office hours)  |   |
| What is the relation with the referee?  |   |
| **Referent 3**  |   |
| Initials, prefixes, surname  |   |
| Positon  |   |
| Country  |   |

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| Telephone number and e-mail address (during office hours)  |   |
| What is the relation with the referee?  |   |
| **Supplementary data**  The files submitted by the institution must be correct and complete. Below you find a checklist. You must check which annexes you will send for the fit and proper assessment. Please state clearly the name of the file and clarify to which person the document relates to.  This list is not exhaustive. You may choose to add enclosures serving to demonstrate the suitability of the prospective appointee or the board as a whole (the collective).  |
| **Supplementary data checklist for the integrity assessment**  |
| **Enclosure**   |  **Check**  |
| 1. Completed and signed integrity screening form  |  □  |
| 2. Legible copy of the prospective appointee's valid passport or valid identity card  |  □  |
| 3. Prospective appointee's Curriculum Vitae  |  □  |
| **Supplementary data checklist for the suitability assessment**  |
| 4. Position profile  |  □  |
| 5. Decision making and consideration for this nomination  |  □  |
| 6. Supervisory board suitability matrix or Policy makers suitability matrix  |  □  |
| 7. Cover letter (if applicable)  |  □  |
| 8. Additional annexes (please give a description)  |  □  |
| 9. Additional annexes (please give a description)  |  □  |
|  **Signature** Particulars of contact person at undertaking  |
| Given names and initials  |   |
| Prefixes and surname  |   |
| Position  |   |
| E-mail address  |   |
| Telephone number  |   |
| This form has been completed to the best of the signatory's knowledge. The form should be printed and signed by one (or, if necessary, two) authorised signatory/ies.  |   |
| Name   |   |
| Position  |   |
| Date (DD-MM-YYYY)  |   |
| Signature  |   |
| Name   |   |
| Position   |   |
| Date (DD-MM-YYYY)  |   |
| Signature  |   |

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