

Affix Picture
(3 Copies)

PERSONALITY NOTES FORM
(Please fill in duplicate)

Please type or print your answers in the space provided below each item

SECTION A – Personal Details

1.1 Surname	1.2 First and Middle Names	1.3 Previous names (Maiden, aliases, etc)
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1.4 Reasons for change of name (if any)

1.5 Date & Place of Birth	1.6 Hometown	1.7 Nationality Present	Previous (if any)
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1.8 Passport (if any) Type	Number	Place & Date of Issue	Expiry Date

1.9 Travel History (include dates)	2.0 Hobbies	2.1 Occupation/Profession
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2.2 Parentage – Provide particulars of your parents (where deceased state date of death)
FATHER

Full name	Date/Place of birth	Hometown	Nationality	Occupation (last)
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Residential Address (include popular spot close to residence)	Business Address (if any)
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MOTHER

Full name	Date/Place of birth	Hometown	Nationality	Occupation (last)
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Residential Address (include popular spot close to residence)	Business Address (if any)
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2.3 List all professional, social, political parties, charitable organization to which you belong(ed) or contribute(ed) or with which you work (have worked)

2.4 Marital Status (please tick appropriate box)

Single Married Widowed Separated Divorced

Please complete 2.5-3.1 as applicable otherwise go to 3.2

2.5 Indicate type of marriage (please tick appropriate box (es))

Customary Church Ordinance Islamic Registration

2.6 Date & Place of Marriage
witness

2.7 Marriage Certificate
If any

2.8 Name & Address of one key

2.9 Spouse(s) details (even if divorced, separated or widowed)

Full Name <u>Present</u>	Date & Place of Birth	Residential/Business Address	Occupation/Profession
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<u>Former</u>			
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3.0 Names and ages of children with present Spouse (s)

3.1 Names and ages of children with former spouse(s) – (if any)

SECTION B – Contact Information

3.2 Current Residential Address (include house #, street, suburb, town, district, state or region)

3.3 Provide name of any popular spot close to your residence	3.4 Home or mobile phone number
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3.5 Fax number	3.6 Your e-mail address	3.7 Your correspondence Address, if different from 3.2
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3.8 Previous Residential Address (if any)
(Include house #, street, suburb, town, district, state or region & any close popular spot or personality)

3.9 Home Town Address (include house #, street, town, state or region & close popular spot or personality)

4.0 Employment Address (if any)
(include business name, street name, town, state or region & any close popular spot)

4.1 Employer’s Telephone number (s)	4.2 Employer fax number	4.3 Employer’s e-mail address
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Section C – Educational History (Please attach copies of educational certificates)

Formal Education (List all educational institutions you attend or have attended)

4.4 Secondary Education (Senior Secondary School & Colleges)

Name and address of School	Dates Attended	Qualification and Grades Achieved

4.5 Higher/Professional/Vocational Education (indicate whether full or part time study)

Name and address of Institution	Dates Attended	Subject(s) Studied	Qualification & Grades Achieved

Educational History (Cont'd)

4.6 List all Examinations Taken (including remedial, if any)

Examining Authority/Board	Exam Title & Index No.	Result	Place/Date

4.7 Informal Education (list all training centres or places you acquired a particular training)

Name and address of trainer	Specialised Skills or Training Acquired	Dates Acquired

Section D – Employment History (Career)

4.8 Provide particulars of your employment since leaving school including periods of apprenticeship, self-employment, unemployment and National Service

Dates (from/to) Include month & year	Organisation Full Name & Address <small>(include telephone number if any)</small>	Post	Brief Description of duties & reasons for leaving if any
1.			
2.			
3.			
4.			
5.			
6.			

Employment History (Cont'd)

Dates (from/to Include month & year)	Organisation Full Name & Address	Post	Brief Description of duties & reasons for leaving, if any
7.			
8.			
9.			

4.9 Provide the following details if you serve(d) in any security service:

Branch of Service/ Unit	Rank/Position	Service Number	Date & Place of enlistment	Date & Reasons for leaving, if any

Section E – Economic Status

5.0 Do you own any assets (e.g immovable property) Yes No
If yes, list and provide particulars (including location) on each and how obtained

5.1 Tax details (Where applicable)
(Provide evidence of last tax payment (s) on the assets; state type of tax, tax certificate number & date issued)

Section F – Company’s Profile

5.2 Name & Address of Company (include house #, street name, town & any close popular spot)

5.3 Date of Incorporation & Registration No.

5.4 No. of initial workforce

5.5 Name and Address of Bankers

5.6 Name & Address of Auditors

5.7 Name and Address of other Director (s) of the Company

5.8 Reasons for establishing the Company

Section G: This section refers to applicant relationship or intended relationship with
(BANK/NBFI/CRB/FOREX BUREAUX)

- 5.9. CAPACITY
- A CURRENT DIRECTOR
 - B PROSPECTIVE DIRECTOR
 - C KEY MANAGEMENT STAFF
 - D SIGNIFICANT SHAREHOLDER
 - E COMBINATION OF ANY A - D

6.0 CURRENT RELATIONSHIP WITH OTHER INSTITUTION(S)

NAME OF INSTITUTION(S)	FROM	-	TO
<input type="checkbox"/> A DIRECTOR			
<input type="checkbox"/> B KEY MANAGEMENT STAFF			
<input type="checkbox"/> C SIGNIFICANT SHAREHOLDER			
<input type="checkbox"/> D COMBINATION OF ANY <input type="checkbox"/> A - <input type="checkbox"/> D			

IF MORE THAN ONE INSTITUTION, PLEASE PROVIDE INFORMATION ON ADDITIONAL SHEET

6.1 STATE WHETHER OTHER INSTITUTIONS ARE RELATED TO THE INSTITUTION AND SPECIFY THE TYPE OF RELATIONSHIP

6.2 PREVIOUS RELATIONSHIP WITH OTHER INSTITUTION(S), PERIOD AND REASONS FOR LEAVING

- A DIRECTOR
- B KEY MANAGEMENT STAFF
- C SIGNIFICANT SHAREHOLDER
- D COMBINATION OF ANY OF A-C

IF MORE THAN ONE INSTITUTION, PLEASE PROVIDE INFORMATION ON ADDITIONAL SHEET

6.3 PREVIOUS APPLICATION FOR BANKING LICENCE IN GHANA/ELSEWHERE

- A APPROVED
- B REFUSED
- C WITHDRAWN
- D REVOKED

PROVIDE REASON(S) FOR B - D

6.4 HAVE YOU BEEN

- A CENSURED
- B DISCIPLINED
- C WARNED AS TO FUTURE CONDUCT
- D PUBLICLY CRITICISED
- E INVESTIGATED BY ORDER OF COURT
- F INVESTIGATED BY REGULATORY BODY
- G INVESTIGATED BY PROFESSIONAL BODY
- H PRACTICED PROFESSION SUBJECT TO CONDITIONS?

IF YES, GIVE DETAILS

6.5 DO YOU

- A OWE ANY PERSON
- B ADJUDGED BY COURT AS JUDGEMENT DEBTOR
- C ARRANGED WITH CREDITORS TO SUSPEND PAYMENT OF DEBT?

IF YES, GIVE DETAILS

6.6 HAVE YOU BEEN

- A DECLARED INSOLVENT
- B BANKRUPT
- C ASSOCIATED WITH AN INSTITUTION WHICH IS BEING WOUND UP OR HAS BEEN WOUND UP?

IF YES, GIVE DETAILS

6.7 HAVE YOU BEEN ASSOCIATED WITH AN INSTITUTION THAT HAS BEEN

- A SANCTIONED OR
- B HELD LIABLE FOR FRAUD, MALFEASANCE OR OTHER MISCONDUCT BY YOU TOWARDS THE INSTITUTION OR OTHER PERSON?

IF YES, GIVE DETAILS

6.8 INDICATE NUMBER, VALUE AND CLASS OF SHARES YOU HAVE IN THE INSTITUTION

6.9 INDICATE NUMBER, VALUE AND CLASS OF SHARES NOT REGISTERED IN YOUR NAME BUT WHICH YOU ARE ULTIMATE BENEFICIAL OWNER OR BENEFICIALLY INTERESTED

7.0 DO YOU HOLD SHARES AS TRUSTEE OR NOMINEE IN THE INSTITUTION?

IF YES, GIVE DETAILS

7.1 CONFIRM WHETHER SHARES AS INDICATED ARE LEGALLY OR EQUITABLY CHARGED TO ANY PARTY.

7.2 DOES QUANTUM OF YOUR SHARES INCLUDING THOSE OF RELATED PARTY IN THE INSTITUTION (OR SUBSIDIARY) ENTITLE YOU TO EXERCISE CONTROL IN INSTITUTION?

IF YES, GIVE DETAILS

7.3 DO YOU ANTICIPATE ANY LIGATION RELATED TO YOUR SELF, PROFESSION OR ANY OTHER PARTY IN GHANA OR ABROAD.

GIVE DETAILS

Section H – Police Report

Directors completing this form should apply to the Director, Criminal Investigation Department (CID) for a police Report. The Police Report should be submitted under the seal of the Director of CID to the following address:

The Head
Banking Supervision Department
Bank of Ghana
P.O Box 2674
Cedi House
Accra

NB: Under no circumstance should the applicant (director) himself submit the report directly to the Bank of Ghana.

Name----- Position to be held-----

Signed----- Date-----



APPENDIX 1

STATEMENT OF AFFAIRS AS AT.....

ASSETS

1. CURRENT ASSETS

Cash on Hand
Current Account
Savings Account
Fixed Deposits
Loans to Others
Prepayments

2. MARKETABLE SECURITIES

Investment in shares
Investment in Unit Trusts
Treasury Bills
Others

3. PROPERTY

Buildings (State locations)
Vehicles
Furniture
Equipment/Appliances
Jewellery, Valuables
Other personal property, Land etc.

4. TOTAL ASSETS (1+2+3)

LIABILITIES

5. CURRENT LIABILITIES

Home/Car Insurance Accrued
Rent & Rates Accrued
*Taxes Accrued
Other Accruals

6. OUTSTANDING LOANS

Car Loans
Housing Loan
Bank Loans/Overdrafts
Personal Loans
Others

7. TOTAL LIABILITIES (5 + 6)

8. EXCESS OR ASSETS OVER LIABILITIES (4-7)

Signature-----

Full Name-----

Certification by-----

AUDITORS

* *Latest Tax Clearance Certificate should be attached*