

ENHANCED DUE DILIGENCE QUESTIONNAIRE FOR PROPOSED DIRECTORS AND KEY MANAGEMENT PERSONNEL OF BANKS, SAVINGS AND LOANS COMPANIES, FINANCE HOUSES AND FINANCIAL HOLDING COMPANIES

Name of Institution:

Full Name of Proposed Appointee:.....

Proposed Designation/Position:
(i.e. Executive Director/Non-Executive Director/Independent Director)

Date of Birth:

Nationality:

Please answer the following questions by entering a tick (✓) in the appropriate box.

Kindly note that in this questionnaire, any reference to 'related person' has the same meaning ascribed to it in section 4 of the Corporate Governance Directive, 2018 which includes a spouse, son, daughter, step son, step daughter, brother, sister, father and mother, cousin, nephew, niece, aunt, uncle, step sister and step brother.

1. Do you or any related person own any direct or indirect stake or any beneficial ownership in the Bank/SDI or in any of its related companies?

Yes

No

☐
☐

2. If yes, state the name of institution(s) and respective percentage ownership(s)?

Name of Institution

Ownership (%)

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

3. Have you been in the employment of the Bank/SDI or in any of its related companies as a key management personnel? *(for proposed directors only)*

Yes

No

☐
☐

4. If yes, state the name and date(s) of retirement or disengagement of relationship with the institution(s)

Name of Institution

Date of Retirement/Disengagement

(dd/mm/yyyy)

.....

.....

.....

.....

.....

.....

5. Do you have any related person(s) in the employment of the Bank/SDI or any of its related companies as key management personnel or director?

Yes

No

☐
☐

- 5.1 If yes, please complete the table at page 8 question (iii)

6. Have you engaged in any transaction within the last two (2) years with the Bank/SDI on terms that were not less favourable to the bank/SDI than those normally offered to other persons?

Yes

No

☐
☐

7. Are you related to persons who have significant shareholding or are beneficial owners of the Bank/SDI or have any business or employment connections to any significant shareholder or beneficial owner of the Bank/SDI appointing you?

Yes

No

☐
☐

- 7.1 If yes, state the full name(s) of such significant shareholders or beneficial owners of the Bank/SDI

.....

.....

.....

.....

8. Do you have any business relationships or financial interests that could potentially conflict with your duties as a director or key management personnel?

Yes

No

☐☐

8.1 If yes, please provide details.

.....

.....

.....

9. Are you serving on any other board with any member of the board of the Bank/SDI?

9.1 If yes, state the name(s) of such member(s)

Name of person

Name of institution

.....

.....

.....

.....

.....

.....

10. Are you related to any person on the board of the Bank/SDI?

Yes

No

☐☐

10.1 If yes, state the name(s) of such persons

.....

.....

.....

.....

11. Are you representing an institutional shareholder of the bank or SDI?

Yes

No

☐☐

11.1 If yes, what is the name and percentage shareholding of the institutional shareholder of the bank or SDI?

Name

% shareholding

.....

.....

12. Is the Bank/SDI a member of a financial holding company?

Yes

No

☐☐

13. If yes, are you on the board of the financial holding company?

Yes

No

☐☐

14. Do you have a related person(s) on the board of the financial holding company?

Yes

No

☐☐

15. Are you on the board of any of the regulated financial institution(s) within the holding group?

Yes

No

☐☐

16. If yes, list the names of the institutions

.....

.....

.....

.....

17. Are you a former Bank of Ghana employee?

Yes

No

☐☐

18. If yes, state the date of retirement or disengagement of relationship? (dd/mm/yyyy)

.....

- | | | | | | | | | | | |
|--|--------------------------------|--------------------------------|-------|-------|-------|-------|-------|-------|--|--|
| 19. Have you worked for any auditing firm that is rendering or has rendered services to any Bank/SDI? | Yes | No | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | |
| 20. If yes, is the firm currently auditing the institution seeking to appoint you? | Yes | No | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | |
| 21. State the date of retirement or disengagement of relationship with the auditing firm? | Yes | No | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | |
| 22. Are you serving as a key management personnel of a financial institution supervised by a regulatory body? | Yes | No | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | |
| 23. If yes, provide details below | | | | | | | | | | |
| <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;"><u>Name of institution</u></td> <td style="width: 50%;"><u>Name of Regulatory Body</u></td> </tr> <tr> <td>.....</td> <td>.....</td> </tr> <tr> <td>.....</td> <td>.....</td> </tr> <tr> <td>.....</td> <td>.....</td> </tr> </table> | <u>Name of institution</u> | <u>Name of Regulatory Body</u> | | | | | | | | |
| <u>Name of institution</u> | <u>Name of Regulatory Body</u> | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 24. Are you or have you been the subject of any proceedings of a disciplinary or criminal nature? | Yes | No | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | |
| 25. Have you been notified of any impending proceedings or any investigations? | Yes | No | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | |
| 26. Have you contravened any of the requirements or standards of a regulatory body, professional body, government or its agencies? | Yes | No | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | |
| 27. Have you or has any business in which you have a controlling interest, or exercises significant influence, been investigated, disciplined, suspended or reprimanded by a regulatory or professional body, a court or tribunal whether publicly or privately? | Yes | No | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | |
| 28. Have you been dismissed, asked to resign or resigned from employment or from a position of trust, fiduciary appointment or similar position? | Yes | No | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | |

- | | | |
|--|--|---------------------------------------|
| 29. Have you been associated, in ownership or management capacity, with a company, partnership or other business association that has been refused registration, authorisation, membership or a licence to conduct any trade, business or profession, or has had that registration, authorisation, membership or licence revoked, withdrawn or terminated? | Yes
<input type="checkbox"/> | No
<input type="checkbox"/> |
| 30. Have you been a director of, or directly involved in the management of, any company which is being or has been wound up by a court or other authority competent to do so within or outside Ghana? | Yes
<input type="checkbox"/> | No
<input type="checkbox"/> |
| 31. Have you held a position of responsibility in the management of a business that has gone into receivership, insolvency, or involuntary liquidation while you were connected with that business? | Yes
<input type="checkbox"/> | No
<input type="checkbox"/> |
| 32. Have you been declared insolvent or has entered into agreement with another person for payment of the debt of that person and has suspended payment of the debt? | Yes
<input type="checkbox"/> | No
<input type="checkbox"/> |
| 33. Have you been involved in any offences? | Yes
<input type="checkbox"/> | No
<input type="checkbox"/> |
| 34. Have you contravened any provision made by or under any written law designed to protect members of the public against financial loss due to dishonesty, incompetence or malpractice? | Yes
<input type="checkbox"/> | No
<input type="checkbox"/> |
| 35. Have engaged in any business practices which are deceitful, oppressive or otherwise improper (whether unlawful or not), or which otherwise reflect discredit on his professional conduct? | Yes
<input type="checkbox"/> | No
<input type="checkbox"/> |
| 36. Have you been a director of, or directly concerned in the management of any licensed institutions, the license of which has been revoked? | Yes
<input type="checkbox"/> | No
<input type="checkbox"/> |
| 37. Have you, in the past, acted unfairly or dishonestly in his dealings with his customers, employer, auditors and regulatory authorities? | Yes
<input type="checkbox"/> | No
<input type="checkbox"/> |

38. Have you contributed significantly to the failure of an organisation or a business unit?

Yes

No

☐☐

39. Are you involved in any business or other relationship which could materially pose a conflict of interest or interfere with the exercise of his judgment when acting in the capacity of a director or key management personnel?

Yes

No

☐☐

CONFIDENTIAL

ADDITIONAL INFORMATION

Kindly provide below your academic and professional qualifications

Name of Qualification

Date of Completion

- | | |
|---------|-------|
| a. | |
| b. | |
| c. | |
| d. | |
| e. | |
| f. | |
| g. | |
| h. | |

CONFIDENTIAL

- i. Kindly list all your related person(s) working with the Bank/SDI or its related companies.

Name of person	Name of institution	Nature of relationship	Position

- ii. Kindly provide below details of past directorship positions (if any)

Name of Institution	Date of appointment (dd/mm/yyyy)	Date of retirement or disengagement (dd/mm/yyyy)

--	--	--

iii. Kindly complete the table below in respect of your current directorship positions in any other institution(s)

Name of Institution	Name of Regulatory Authority (if any)	Date of appointment (dd/mm/yyyy)

I HEREBY DECLARE THAT ALL ANSWERS PROVIDED HEREIN ARE IN ACCORDANCE WITH FACT OR TRUTH AND I BEAR THE RESPONSIBILITIES FOR THE CORRECTNESS AND COMPLETENESS OF THE ABOVE MENTIONED INFORMATION.

NAME:

SIGNATURE:

DATE:

CONFIDENTIAL