

**MANDATORY PROVIDENT FUND SCHEMES AUTHORITY**  
**Application for Registration as MPF Individual Intermediary**

**Notes on Completion of this Form**

1. Please read the *Guide to Registration as MPF Intermediaries* (available at the Mandatory Provident Fund Schemes Authority (“MPFA”) website at [www.mpfa.org.hk](http://www.mpfa.org.hk)) and the *Notes on Personal Information Collection* below before completing this Form.
2. All questions must be answered. If any question is not applicable, please write ‘N/A’.
3. ‘\*’ means delete whichever is inappropriate.
4. Please provide any other information which may assist the MPFA in reaching a decision on the application if necessary.
5. Please either present your Hong Kong identity card/passport to the MPFA in person or attach a copy of your Hong Kong identity card/passport to this application.
6. If you have been previously registered as an MPF intermediary, please ensure that you have already complied with the MPF Continuing Professional Development (“CPD”) requirement, where applicable, for the current and the past three calendar years. You should also provide all relevant CPD records to your sponsoring corporation to support your application.
7. Please note that your application will not be accepted unless you have already passed an MPF intermediaries examination recognized by the MPFA and possessed the required capacity at the time of submitting the application. Copies of documentary evidence of your examination result and registration capacities, where applicable, should accompany the application.
8. Please sign next to any amendments made in this Form.

**Notes on Personal Information Collection and Transfer**

These notes are provided in accordance with the Personal Data (Privacy) Ordinance and in relation to the applicable provisions under the Mandatory Provident Fund Schemes Ordinance and its regulations. You are advised to read the following regarding your rights and obligations in relation to personal data held by the MPFA (which data may relate to yourself or other persons) and the manner in which the MPFA may use or deal with such data in connection with this application and other related matters:

1. Failure to supply the requested personal data may result in delay or refusal of your application if it affects the MPFA’s ability to assess your compliance with the applicable criteria.
2. The personal data will be used by the MPFA for the purposes of performing its functions and, in particular, the registration, monitoring, inspection, investigation, or enforcement action in relation to MPF schemes and service providers including MPF intermediaries. The personal data will also be used to compile a public register which contains the name of the MPF intermediary, the corporation(s) which he represents, his MPF registration number and whether he is permitted to advise on securities and/or insurance policies, or permitted to sell MPF schemes without rendering specific investment advice.
3. The MPFA may, as permitted by law, transfer to, and match, compare, verify or exchange personal data with data held by, or obtained from, (including but not limited to) the following bodies:
  - (a) Hong Kong Monetary Authority;
  - (b) Insurance Authority and self-regulatory organizations of the insurance industry (including the Insurance Agents Registration Board under The Hong Kong Federation of Insurers, The Hong Kong Confederation of Insurance Brokers, and the Professional Insurance Brokers Association);
  - (c) Securities and Futures Commission;
  - (d) Hong Kong Securities Institute;
  - (e) Vocational Training Council; and
  - (f) Official Receiver’s Office.
4. You are entitled under the Personal Data (Privacy) Ordinance to request access to or to request the correction of any personal data relating to you held by the MPFA, in the manner and subject to the limitations prescribed therein. All enquiries should be directed to the Personal Data Privacy Officer of the MPFA at Level 16, International Commerce Centre, 1 Austin Road West, Kowloon, Hong Kong.

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<b>Section I – PARTICULARS OF APPLICANT</b>		
Name in English <i>(same as HKID Card/ Passport)</i>	Mr./Miss/Mrs./Ms.* _____ <i>(family name) (other name)</i>	A recent passport size photo of the applicant
Name in Chinese <i>(if any)</i>		
HKID Card/Passport No. <i>(Passport No. only if HKID Card is not available)</i>	<i>(If Passport No. is given, please provide the country and place of issue: _____)</i>	
Have you ever been registered as an MPF intermediary? If yes, please provide the MPF Registration No.		Yes / No*    MPF Registration No.: _____

<b>Section II – MPF INTERMEDIARIES EXAMINATION</b>		
Examination Body <i>(please tick the appropriate box)</i>	<input type="checkbox"/> VTC	<input type="checkbox"/> HKSI

<b>Section III – SPONSORING CORPORATION(S)</b>
Name of Sponsoring Corporation(s)
Primary Sponsoring Corporation:
Secondary Sponsoring Corporation:
Total Number of Sponsoring Corporation(s): _____

<b>For Official Use Only</b>			
Application No.		MPF Registration No.	
Receipt Date		MPF Registration Date	
Input Officer		Approving Officer	

<b>Section IV – REGISTRATION CAPACITY</b> (Please tick the registration capacity/capacities intended to use in MPF selling/advising activities.)	
	Name of Employer/Principal
<b>Insurance Authority Regime</b>	
<input type="checkbox"/> Officer/Employee of Authorized Long Term Insurer	
<input type="checkbox"/> Appointed Long Term Insurance Agent (including an agent of an appointed long term insurance agent)	Name of agent (if applicable): _____ Name of principal: _____
<input type="checkbox"/> Registered Responsible Officer of Appointed Long Term Insurance Agent	Name of agent: _____ Name of principal: _____
<input type="checkbox"/> Technical Representative of Appointed Long Term Insurance Agent	Name of agent: _____ Name of principal: _____
<input type="checkbox"/> Registered Chief Executive of Authorized Long Term Insurance Broker who is: <input type="checkbox"/> Member of The Hong Kong Confederation of Insurance Brokers <input type="checkbox"/> Member of Professional Insurance Brokers Association <input type="checkbox"/> Directly Authorized by Insurance Authority	
<input type="checkbox"/> Technical Representative of Authorized Long Term Insurance Broker who is: <input type="checkbox"/> Member of The Hong Kong Confederation of Insurance Brokers <input type="checkbox"/> Member of Professional Insurance Brokers Association <input type="checkbox"/> Directly Authorized by Insurance Authority	
<b>Monetary Authority Regime</b>	
<input type="checkbox"/> Officer/Employee of Bank	
<input type="checkbox"/> Officer/Employee of Restricted Licence Bank	
<input type="checkbox"/> Officer/Employee of Deposit Taking Company	
<input type="checkbox"/> Name entered in Hong Kong Monetary Authority Register: engaging in Type 1 (dealing in securities) regulated activity	
<input type="checkbox"/> Name entered in Hong Kong Monetary Authority Register: engaging in Type 4 (advising on securities) regulated activity	
<b>Securities and Futures Commission Regime</b>	
<input type="checkbox"/> Licensed Representative engaging in Type 1 (dealing in securities) regulated activity	
<input type="checkbox"/> Licensed Representative engaging in Type 4 (advising on securities) regulated activity	

**Section V – DECLARATION**

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| 1. Have you ever been charged with or convicted of any offence, other than a minor traffic offence (e.g. invalid parking/driving in excess of speed limit), in Hong Kong or elsewhere? | Yes / No* |
| 2. Have you ever been subject to bankruptcy proceedings or adjudicated bankrupt or been a senior executive of a corporation that has become insolvent, in Hong Kong or elsewhere?      | Yes / No* |
| 3. Have you ever been denied membership/registration or disqualified, censured, disciplined or publicly reprimanded by any professional or regulatory body, in Hong Kong or elsewhere? | Yes / No* |

If your answer to any one of the above questions is “Yes”, please enclose the following information with this application for the MPFA’s consideration:

- (a) details of the incident;
- (b) copies of court judgement/bankruptcy order/Official Receiver report/judgement of the professional or regulatory body concerned, etc; and
- (c) recommendation letter from your sponsoring corporation indicating that it will support your application after considering the incident.

I certify that I have read the *Notes on Personal Information Collection and Transfer*. I understand my rights and obligations in relation to personal data held by the MPFA and agree to the manner in which the MPFA may use or deal with the data as set out in paragraphs 2 and 3 of those Notes.

I certify that, where applicable, I have complied with the MPF CPD requirement for the current and the past three calendar years. Relevant supporting evidence (“CPD Supporting Evidence”) has been passed to my sponsoring corporation to support my application.

I declare that to the best of my knowledge and belief the information given in this Form is correct and complete.

I undertake to notify the MPFA of any matter which affects the validity of any information given in support of my application.

I undertake to notify the MPFA, after the application is approved, of any material changes to, or affecting the completeness or accuracy of, the information provided in this Form within seven working days of the change via my sponsoring corporation.

For the purposes of my application for registration, and my registration as an MPF individual intermediary and any purpose incidental thereto, I consent to the release of my personal data by my former and/or existing sponsoring corporation, the MPF CPD course providers and any of the bodies referred to in paragraph 3 of the *Notes on Personal Information Collection and Transfer* to the MPFA and hereby authorize the MPFA to request for such release and to release my personal data to these corporations and bodies.

For the purpose of monitoring my compliance with the CPD requirements for an MPF individual intermediary by the MPFA, I consent to my former and/or existing sponsoring corporation(s) and the MPF CPD course provider(s) transferring my personal data (including but not limited to my name, MPF registration number, the name, date and CPD hours of the MPF CPD courses that I have attended and the CPD Supporting Evidence)(“Data”) to the MPFA.

For the purpose of the MPFA performing matching procedure or process between the Data and my personal data collected by the MPFA from me as part of the MPFA’s monitoring procedures in relation to my compliance with the CPD requirements for an MPF individual intermediary, I further consent to my former and/or existing sponsoring corporation(s) and the MPF CPD course provider(s) releasing my personal data to the MPFA.

Signature	
Name of Applicant ( <i>same as HKID Card/Passport</i> )	
HKID Card/Passport No.	
Date of Application	