**APPENDIX 2**

**FORM 1(a)**

**APPLICATION FOR THE REGISTRATION OF A SHARIAH ADVISER (INDIVIDUAL)**

Applicant’s

passport-sized

colour photograph

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| **A. PERSONAL DETAILS**  |
| **Full name of applicant** | **:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Identity card number** | **:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Passport number** | **:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Country of issue :** | **\_\_\_\_\_\_\_\_\_** |
| **Date and place of birth** | **:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Gender** | **:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Nationality** | **:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Religion** | **:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
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| **B. ADDRESS AND CONTACT DETAILS**  |
| **Residential Address** | **:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
|  |  | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Office Address** | **:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
|  |  | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Tel number**  | **:** | **Home :** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
|  |  | **Office :** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
|  |  | **Mobile :**  | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
|  |  | **Fax :**  | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
|  |  | **E-mail :**  | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
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| **C. ACADEMIC OR PROFESSIONAL QUALIFICATION**  |
| **Qualification** | **Institution of Learning** | **Country** | **Year** |
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| **D. EMPLOYMENT HISTORY (PAST AND PRESENT)**  |
| **Name of Employer** | **Designation Held** | **Description** | **Period** |
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| **E. PUBLISHED WORKS, RESEARCH, PAPERWORK, FACILITATOR, ETC**  |
| **Topic** | **Year** | **Publisher** |
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| **F. APPOINTMENT AS SHARIAH ADVISER/COMMITTEE/CONSULTANT IN OTHER ORGANISATIONS**  |
| **Organisation** | **Year** |
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|  **G. SUPPORTING DOCUMENTS** *(please ensure all scanned documents are clear and legible)* |
| No | Description | Reference |
| 1 | A copy of the Shariah adviser’s NRIC (for Malaysian citizen) or passport(s) (for non-Malaysian citizen) *(must crossed out with the remarks “For the SC Use Only”)* | - |
| 2 | Result of bankruptcy search on Shariah adviser from the Malaysian Department of Insolvency or, if outside Malaysia, the competent authority *(no more than 31 days old as at the date of submission)*  | Paragraph 5.05(a)(iv) |
| 3 | A copy of degree or relevant academic certificate of the Shariah adviser.  | Paragraph 5.05(a)(ii) |

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| **DECLARATION** |
| I hereby declare that all information given in this application and the attached documents are true and accurate.**………………………………****Signature :** |
| **Full Name :** |
| **Date of Signature** *(dd mm yyyy)* ***:*** |

Notes

 (i) If a question is not applicable, please state “N/A” in the space provided.

(ii) Please initial on each page of the form.

(iii) If there is insufficient space in the application form to give the required information, the information is to be given in a separate paper. Please indicate which question the additional information relates to.

**FORM 1(b)**

**APPLICATION FOR THE REGISTRATION OF A SHARIAH ADVISER (CORPORATION)**

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| **A. GENERAL** |
| **Name of company** | **:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Address** | **:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
|  | **:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Contact Number**  | **:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Fax Number**  | **:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **E-mail** | **:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Date of incorporation** | **:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Date of commencement of operations** | **:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Company number** | **:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Issued/paid up capital** | **:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Board of Directors** | **:** | **Name** | **Directorship** |
|  | 1 |  |  |
|  | 2 |  |  |
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| **B. SHAREHOLDERS AND THEIR RESPECTIVE SHAREHOLDINGS** |
| **Shareholders** | **Percentage Shareholding***(as at / / )* |
| **Direct** | **Indirect** |
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| **Total** |  |  |

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| **C. SHARIAH OFFICER (BASED ON THE CRITERIA IN THE GUIDELINES)** |
| **Name** | **Position** | **Religion** |
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| **D. SHARIAH OFFICER - ACADEMIC OR PROFESSIONAL QUALIFICATION**  |
| **Qualification** | **Institution of Learning** | **Country** | **Year** |
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| **E. SHARIAH OFFICER - EMPLOYMENT HISTORY (PAST AND PRESENT)**  |
| **Name of Employer** | **Designation Held** | **Description** | **Period** |
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| **F. PRINCIPAL ACTIVITIES OF THE CORPORATION** |
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| **G. JUSTIFICATION/COMMENT** |
| Justification/comment on the ability of the Shariah adviser to advise matters related to Shariah-compliant products. |
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| **H. RELEVANT INFORMATION** |
| Any other relevant information to support this application. |
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| **I. SUPPORTING DOCUMENTS** *(please ensure all scanned documents are clear and legible)* |
| No | Description | Reference |
| 1 | A copy of the Shariah officer’s NRIC (for Malaysian citizen) or passport(s) (for non-Malaysian citizen) *(must crossed out with the remarks “For the SC Use Only”)* | - |
| 2 | Result of bankruptcy search on Shariah officer from the Malaysian Department of Insolvency or, if outside Malaysia, the competent authority *(no more than 31 days old as at the date of submission)*  | Paragraph 5.05(b)(i) |
| 3 | A copy of degree or relevant academic certificate of the Shariah officer.  | Paragraph 5.05(a)(ii) |
| 4 | A copy of certificate of incorporation under the Companies Act 2016 or any equivalent form under foreign jurisdiction. | - |

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| **DECLARATION**  |
| I hereby declare that all information given in this application and the attached documents are true and accurate.**…………………………….****Signature :** |
| **Name of Director of the Company:** |
| **Designation :**  |
| **Date of Signature** *(dd mm yyyy)* **:** |

Notes

1. If a question is not applicable, please state “N/A” in the space provided.
2. If there is insufficient space in the application form to give the required information, the information is to be given in a separate paper. Please indicate which question the additional information relates to.