

Application Form for Certified AML Professional (CAMLP) Certification

(with HKIB Professional Membership)

Please read carefully the "<u>Guidelines of Application for Certified AML Professional (CAMLP)</u>
<u>Certification</u>" BEFORE completing this application form.

This application form is ONLY for Relevant Staff of an <u>Authorized Institution (AI)</u> supervised by the Hong Kong Monetary Authority (HKMA).

Please obtain endorsement from HR department for the verification on Key Roles/ Responsibilities for AML/CFT practitioners (Annex) before submission to HKIB.

Section A: Personal Particulars

(Please use block letters to complete the information requested below. The name should match that on your HKID / passport)

Note: Related personal data in your examination and membership records (if you already have membership			
record(s) kept in HKIB) will also be updated with the information provided in this form. Title: □ Mr ☑ Ms □ Dr HKIB Membership: □ Yes			
Title. Livii Eivis Libi	HKIB Membership: ☐ Yes	e Membership No.)	
Name in English: (as shown on identity document) LEE CHI NAN (Surname) (Given Name)	Name in Chinese: (as shown on id	dentity document)	
HKID / Passport Number* (please delete where inappropriate):			
Name of Employer (Authorized Institution):	YZ Bank		
Mobile Phone No.: 9876 5432	Office Telephone No.: 2345	6789	
Primary Email Address1: lecchinan@xyzbank.com	Secondary Email Address (if any):	:	
Position / Job Title: Compliance Manager Department: Legal and Compliance			
Office Address: 30/F, xYZ Bank Building, 20 compliance Road, Hong Kong			
Residential Address: Flut A, 3 b/F, Home Towers, 78 Family Road, Central, Hong Kong			
Correspondence Address: Office Address Residential Address			
Division (for customized service): ☐ Asset Management ☐ Commercial / Corporate Banking ☐ Compliance & Risk Management ☐ General Management ☐ Investment Banking	☐ Operations & Support ☐ Private Banking ☐ Retail Banking ☐ Treasury ☐ Others:		
Highest Academic Qualification Obtained: Master of Business Administration	University / Tertiary Institution: ABC University	Year of Completion: 2011	
Other Professional Qualifications:	Professional Bodies:		
Total Number of Years and Months of Work Experie	ence in the AML / CFT Compliance F	Position	

¹ Note: All HKIB designations and membership related communication will be sent via email by using the Primary Email Address. Please"√"the appropriate boxes.

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Section B: Disciplinary Actions and Investigations, Financial Status and Character

You are required to answer the following questions by selecting "Yes" or "No".

1.	Have you ever been reprimanded, censured or disciplined by any professional or regulatory authority?	□ Yes No
2.	Have you ever had a record of non-compliance with any non-statutory codes, or been censured, disciplined or disqualified by any professional or regulatory body in relation to your profession?	□ Yes No
3.	Have you ever been investigated about offences involving fraud or dishonesty, or been adjudged by a court to be criminally or civilly liable for fraud, dishonesty or misfeasance?	□ Yes 교∕ No
4.	Have you ever been refused or restricted from the right to carry on any profession for which a specific license, registration or other authorization is required by law?	□ Yes ঢ় No
5.	Have you ever been adjudged bankrupt, or served with a bankruptcy petition?	☐ Yes No

Notes: If you have answered "Yes" to any of the above questions, please provide more details by attaching all relevant documents relating to the matter(s) at issue.

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Section C: Application Fee

Nor - - - -	n-refundable Certification Fee for CAMLP (Valid Non-HKIB Member: HKD1,650 HKIB Student Member: HKD1,650 HKIB Ordinary Member: HKD570 HKIB Professional Member: Waived HKIB Default Member: HKD3,650	until 31 December 2020):
	Paid by Employer	
(Cheque / e-Cheque* made payable to "The Cheque no. 123456) For e-Cheques, please state the programme code under 'remark application form, to ecf.aml@hkib.org	rs' and email, together with the completed
	Credit Card: (□ VISA □ Mastercard)	
С	ardholder's Name:	Signature:
C	ard No.:	Expiry Date:
		(mm/yy)
Se	ction D: Statement on Collecti	on of Personal Data
 2. 3. 5. 	It is necessary for applicants to supply their person requested in the application documents, as otherwonsider their applications. The personal data provided in this form will be membership, programme and examination, stamarketing) purposes. The data will be solely handle an authorised third party providing services to HK prescribed purposes as allowed by the law from time When the processing and consideration of all the have been completed: (a) the application paper destroyed (if you have indicated to receive our preyour contact details and related papers would be application papers of successful candidates will student records and will be handled by HKIB stamproviding services to HKIB in relation to the state please be assured that any personal information you applicants understand that they have the right to about me and that, if so, they have a right of access HKIB to correct any inaccurate personal data and personal data or have it corrected, they can write to permitted by law to charge a reasonable fee for the Personal data provided on the application form will to application and admission. For details of the Statement, please refer to the website:	

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Section E: Acknowledgement and Declaration

- I declare that all information I have provided in this form is true and correct and will be used for the purpose of administration and communication by The Hong Kong Institute of Bankers (HKIB).
- I understand that the fees paid are non-refundable and non-transferable.
- I authorise HKIB to obtain and the relevant authorities to release, any information about my
 qualifications and / or employment as required for my application.
- I acknowledge that HKIB has the right to withdraw AAMLP Certification if I do not meet the requirements.
- I understand that as a member of the HKIB, I shall be bound by the prevailing rules and regulations of the Institute. I agree to abide by HKIB's rules and regulations in HKIB Members' Handbook.
- I agree to notify HKIB of any material changes to my responses to any of the questions in this application, including my contact details. I understand and agree that HKIB may investigate the statements I have made with respect to this application, and that I may be subject to disciplinary actions for any misrepresentation (whether fraudulent and otherwise) in this application.
- I understand and agree to comply with all conditions, requirements, policies and procedures established by HKIB as may be amended from time to time.
- I confirm that I have read and understood the Policy of Personal Data Protection set out on the HKIB website at https://www.hkib.org/, and consent to the terms set out therein. I also understand that the Institute will use the information provided and personal data collected for administration and communication purposes.
- I understand that Professional Membership shall run from 1 January to 31 December in each calendar year. Members who fail to pay their subscription/certification fees by 31 January of each calendar year will be treated as default members and the reinstatement policy will therefore be applied.
- I understand that it is compulsory for all individuals to maintain a valid membership status with HKIB if the applicants want to be certified and maintain HKIB professional designations (e.g. CB, CB (Stage II), CB (Stage I), CFMP, AAMLP, CAMLP, ACSP, ACRP, CCRP(CL) and CCRP(CPM)). For all professional designation holders, they have to maintain HKIB professional membership status and fulfill annual CPD requirement.
- I attach herewith copies of "Certified for ECF on Anti-Money Laundering and Counter-Financing of Terrorism [AML/CFT]" or grandfathering approval letter.
- I have read and agreed to comply with the "Guidelines of Application for Certified AML Professional (CAMLP) Certification" BEFORE completing this application form.

Lee		1 Feb 2020	
Signature of Applicant		Date	
(Name: Lee Chi Nan)		
Please"√"the appropriate boxes.	4		

Application Form for

Annex

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HR Department Verification on Key Roles / Responsibilities for AML / CFT Practitioners

Note:

- 1. Please fill in ONE form for each relevant functional title / position in your application.
- 2. Please use BLOCK LETTERS for completion of the information requested below.
- Criteria for CAMLP Certification Application: 3 years of relevant work experience in AML/CFT compliance of AI.

Position / Functional Title	Compliance Manager
Full Name of Applicant (as set out on HKID / Passport)	lee chi Nun
Name of Employer (Authorized Institution)	XYZ Bank
Business Division / Department	legal and compliance
Employment Period (DD / MM / YYYY)	From: 1 Feb 2016 To: 1 Feb 2020
Number of Years and Months in the AML / CFT Compliance Position	
Work Location	☐ Hong Kong ☐ Others, please specify:

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Please tick the appropriate key roles / responsibilities in relation to your current and past functional title / position.

Key Roles / Responsibilities	Please ✓ where appropriate		
		Hong Kong	Others, please specify:
1.	Develop, implement and periodically review the AML/CFT compliance risk management framework and the related controls for identification, management, monitoring and reporting of AML/CFT compliance risks and issues (including the operation of AML/CFT systems).		
2.	Review, analyse and communicate AML/CFT management information such as trends surrounding suspicious transactions / filed Suspicious Transaction Reports (STR) and sanctions screening hits. Report results of AML/CFT risk management reviews and identify key areas of improvements. Monitor remedial actions for identified weak AML/CFT controls that require corrective actions.	✓	
3.	Evaluate and communicate new laws and regulations and stay abreast of all legislative and regulatory developments relating to AML/CFT, both at local and international levels.	V	
4.	Review suspicious activity that has been investigated and concluded as reportable and file STRs to the Joint Financial Intelligence Unit (JFIU) in accordance with regulatory requirements.	✓	
5.	Plan periodic compliance tests on the bank's AML/CFT program against compliance testing policies, procedures and regulations.	✓	
6.	Provide guidance and training to business units on AML/CFT related matters, including but not limited to transaction monitoring, filtering, sanctions screening, trade based money laundering and correspondent banking.		

Last updated: 31 December 2019

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Key Roles / Responsibilities	Please ✓ where appropriate	
	Hong Kong	Others, please specify:
7. Other Key Roles / Responsibilities related to AML / CFT compliance work (please specify):		

Verification by HR Department

The employment information provided by the applicant in this form has been verified to be consistent with the information on the applicant which is retained by the HR department of the employer of the applicant where the firm has a record of this information.

Chan Tai Man

Name:

31 Jan 2020

Date

Signature & Company Chop

Chan Tai Man

Department: Hk Department

Position: HR Munager

JOB EXPERIENCE WITHOUT COMPANY VERIFICATION WILL NOT BE COUNTED

Last updated: 31 December 2019

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Document Checklist

To facilitate the application process, please check the following items before submission to the Institute. Thank you.

- ☑ Completed and Signed Application Form
- Key Roles / Responsibilities verified by the HR/ relevant department of your organisation
- Certified true copies of your HKID / Passport enclosed²
- Copies of your examination result for ECF on Anti-Money Laundering and Counter-Financing of Terrorism [AML/CFT] (Professional Level)

 OR grandfathering approval letter enclosed OR letter of completion for bridging training programme
- Payment or evidence of payment enclosed (cheque or completed Credit Card Payment Instructions)

We suggest that you keep a copy of all relevant documents for your own records, before submission.

FOR INSTITUTE USE ONLY			
Received by:	(Staff Name)	(Date)	
Assessed by :	(Staff Name)	(Date)	
Approved / Rejected :	(Staff Name)	(Date)	

Please"√"the appropriate boxes.

AML-G-011

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Submitted copies of documents to the HKIB must be certified as true copies of the originals by:

⁻ The HKIB staff; or

⁻ HR/authorized staff of current employer(Authorized Institution); or

⁻ A recognized certified public accountant / lawyer / banker / notary public; or

⁻ Hong Kong Institute of Chartered Secretaries (HKICS) member.

Certifier must sign and date the copy document (printing his/her name clearly in capitals underneath) and clearly indicate his/her position on it. Certifier must state that it is a true copy of the original (or words to similar effect)



查毫永久性居民身份龄

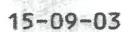
餐本 SAMPLE

李智能 LEE, Chi Nan



2621 2535 9174

出生日期 Date of Birth 01-01-1968 ***AZ 簽發日期 Date of Issue (01 - 79)





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CERTIFIED TRUE COPY

THE HONG KONG INSTITUTE OF BANKERS -> Name of Org.

(Company Chop)

Staff Name: Chin Tai Man (I-IR Manager)

Date: 31 Jan 2020

ID Copy without company or HKIB Verification will not be processed