



	(For office use only)
Received on:	
Acknowledged on:	
Application no:	

Certification Application Form for ECF on Compliance (Professional Level)

Important Notes:

- 1. The application is applicable for the Relevant Practitioner (RP) engaged by an Authorized Institution (AI) at the time of application.
- Read carefully the "Guidelines of Certification Application for ECF on Compliance" (COM-G-022) BEFORE completing this application form.
- 3. Only the completed application form with all valid supporting documents, including the HR Verification Annexes, will be processed.

Section A: Personal Particulars 1

Title:		HKIB Member: Yes (Membership No.)	
Name in English ² :		Name in Chinese ² :	
(Surname) (Given Name)			
HKID/Passport Number:		Date of Birth: (DD/MM/YYYY)	
Contact Information			
(Primary) Email Address ³ :		Mobile Phone Number:	
(Secondary) Email Address:			
Correspondence Address:			
Employment Information			
Name of Current Employer:		Office Telephone Number:	
Position/Functional Title:		Department:	
Office Address ⁴ :			
Academic and Professional Qualification			
Highest Academic Qualification Obtained:	University/Ter	tiary Institution/College:	Year of Award:
Other Professional Qualifications:	Professional B	odies:	Year of Award:

- 1. Put a "\square" in the appropriate box(es).
- 2. Information as shown on identity document.
- 3. All the HKIB communication will be sent to the <u>Primary Email Address</u> (personal email preferred).
- 4. Provide if not the same as the correspondence address above.





Section B: Indication of Certification Applied

Indicate the certification(s) applied by putting a " \checkmark " in the appropriate box(es).

Certi	Certification Application for			
	Certified Compliance Professional (General Compliance) (CCOP(GC))			
	Elig	gibility*:		
	1	☐ Completed <u>Module 4</u> of the HKIB ECF on Compliance Professional Level training programme and passed the examination on top of the Core Level qualification or CCOP(IIC) qualification; or		
		□ Possessing ECF Affiliate of CCOP(GC);		
	and	d and a second and		
	2.	Possessing at least 5 years of relevant work experience in the general compliance function within 10 years immediately prior to the date of application for certification as specified in the "Key Roles/Responsibilities" of Role 1 of the HR Verification Annex (CCOP(GC)/CCOP(IIC)) form (p.AP2-AP4), but does not need to be continuous; and		
	3.	Employed by an AI at the time of application.		
	and	l/or		
	Cei	rtified Compliance Professional (Investment and Insurance Compliance) (CCOP(IIC))		
	Elig	gibility*:		
	1.	 □ Completed Module 4 and Module 5 of the HKIB ECF on Compliance Professional Level training programme and passed the examinations on top of the Core Level qualification or CCOP(GC) qualification; or □ Possessing ECF Affiliate of CCOP(IIC); 		
	and			
	2.	Possessing at least 5 years of relevant work experience in the investment and/or insurance compliance function within 10 years immediately prior to the date of application for certification as specified in the "Key Roles/Responsibilities" of Role 2 of the HR Verification Annex (CCOP(GC)/CCOP(IIC)) form (p.AP2-AP4), but does not need to be continuous; and		
	3.	Employed by an AI at the time of application.		

*Application will be processed based on the option(s) you chose.





Section C: Relevant Employment History

List all the relevant employment history in the general compliance function or in the investment and/or insurance compliance function in <u>reverse chronological order</u>. Work experience does not need to be continuous. Each position listed requires a <u>separate HR Verification Annex (Professional Level)</u> form (p.AP1-AP4).

Job Number	Employer	Position	Employment Period for the Position (DD/MM/YYYY)
Current			From To
Job 2			From To
Job 3			From To
Job 4			From To
Job 5			From To
Job 6			From To
Job 7			From To
Job 8			From To
Job 9			From To

Total relevant work	experience:	Year(s)	Month(s)
Total number of HR Verification Annex	(Professional Le	evel) form submit	ted:





Section D: Declaration Related to Disciplinary Actions, Investigations for Non-compliance, and Financial Status

Put a " \checkmark " in the appropriate box(es). If you have answered "Yes" to any of the questions, provide details by attaching all relevant documents relating to the matter(s).

1.	Have you ever been reprimanded, censured, 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 adjudged by a court to be criminally or civilly liable for fraud, dishonesty or misfeasance?	□ Yes	□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 authorisation is required by law?	□ Yes	□No
5.	Have you ever been adjudged bankrupt, or served with a bankruptcy petition?	☐ Yes	□No





Section E: Payment

Payment Amount	
Indicate the fee by putting a " \checkmark " in the appropriate box	
1 st Year Certification Fee for CCOP(GC)/CCOP(IIC) (Membership valid until 31 December 2026 ¹)	
□ Not a HKIB member	HKD2,230 ²
☐ Current and valid HKIB Ordinary member	HKD2,230 ²
☐ <u>Current and valid</u> HKIB Professional member	Waived
 Current Professional Member excluded. Professional Member will be required to renew the mem The 1st Year Certification Fee includes a complimentary CPD course (up to 3 hours) that supports you and career progression. For more details of the CPD course, please contact our Customer Experience 	our professional growth
Payment Method	
☐ Paid by Employer	
☐ Company Cheque (Cheque No:)
☐ Company Invoice ()
☐ A cheque/e-Cheque made payable to "The Hong Kong Institute of Bank	ertification" under
☐ Credit Card	
□ Visa	
☐ Mastercard	
Card No:	-
Expiry Date (MM/YY):	
Name of Cardholder (as on credit card):	
Signature of Cardholder (as on credit card):	



Section F: Privacy Policy Statement

It is our policy to meet fully the requirements of the Personal Data (Privacy) Ordinance. The HKIB recognises the sensitive and highly confidential nature of much of the personal data of which it handles, and maintains a high level of security in its work. The HKIB does its best to ensure compliance with the Ordinance by providing guidelines to and monitoring the compliance of the relevant parties.

For more details, please refer to this <u>Privacy Policy Statement</u> or contact us at the address and telephone number below:

The Hong Kong Institute of Bankers 3/F Guangdong Investment Tower 148 Connaught Road Central, Hong Kong

Tel: (852) 2153 7800 Fax: (852) 2544 9946 Email: cs@hkib.org

The HKIB would like to provide the latest information to you via weekly eNews.	If you do not wish to
receive it, please tick the box.	



Section G: Acknowledgement and Declaration

- I declare that all information I have provided in this form is true and correct.
- I understand that the fee paid is non-refundable and non-transferable regardless of the final application result.
- I authorise the HKIB to obtain the relevant authorities to release, any information about my qualifications and/or employment as required for my application.
- I acknowledge that the HKIB has the right to withdraw approval of certification if I do not meet the requirements. I understand and agree that the 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 or otherwise) in this application.
- I confirm that I have read and understood the <u>Privacy Policy Statement</u> set out on the HKIB website at http://www.hkib.org, and consent to the terms set out therein. I also understand that the HKIB will use the information provided and personal data collected for administration and communication purposes.
- I have read and agreed to comply with the "Guidelines of Certification Application for ECF on Compliance" (COM-G-022).

	Document Check	<u>ist</u>	
	acilitate the application process, please check the following	•	
	re to submit the documents may cause delays or tern opriate box(es).	nination of the application.	Please "✓" the
арргор	opriate box(es).		
	All necessary fields on this application form filled in incl	uding your signature	
	The completed form(s) of HR Verification Annex (Profe stipulated for certification application	ssional Level) fulfilling the req	uirements as
	Cop(ies) of your compliance examination result(s)		
	Copy of your HKID/Passport (Non HKIB members only)		
	Payment or evidence of payment enclosed (e.g. Cheque Instructions)	e or completed Credit Card Pay	ment
<u> </u>			
	ature of Applicant Date		
(Name	ne:)		

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Certification Application Form for ECF on Compliance (Professional Level)

HR Department Verification Form on Employment Information for Compliance Practitioner

Important Notes:

- 1. A completed <u>Certification Application Form for ECF on Compliance (Professional Level)</u> should contain p.1-7 plus this **HR Verification Annex (<u>Professional Level)</u>** form(s) (p.AP1-AP4).
- 2. Fill in <u>ONE</u> set of HR Verification Annex form for EACH relevant position/functional title in your application. You can make extra copies of this blank form for use.
- 3. All information filled in including company chop must be true and original.
- 4. Use BLOCK LETTERS to complete this form.

Employment Information				
Name of the Applicant:				
HKID/Passport Number:				
Job Number (as stated in Section C on P.3):	Current/Job No:			
Position/Functional Title:				
Name of Employer:				
Business Division/Department:				
Employment Period of the	From:			
Stated Position/Functional Title:				
(DD/MM/YYYY)	То:			
Key Roles/Responsibilities in Relation to the Stated Position/Functional Title: (Tick the appropriate box(es); Application will be processed based on the role(s) ticked)	 □ Role 1 – General Compliance (fill in p.AP2-AP3) □ Role 2 – Investment and Insurance (fill in p.AP3-AP4) 			
Total Time Spent for the Specified Functional Role(s) in the Stated Position	Year(s)Month(s)			

COM-G-025 Last updated: 1 October 2025





Please declare the "Key Roles/Responsibilities" in relation to your position/functional title stated on **p.AP1** of this HR Verification Annex (Professional Level) form by ticking the appropriate box(es).

	Key Roles/Responsibilities	Please "√" Where Appropriate
	Role 1 - General Compliance	
1.	Develop, review, evaluate and update the Al's compliance policies, procedures, guidelines and compliance related documents to ensure congruence with its legal and regulatory obligations and the Al's internal requirements	
2.	Establish and review compliance monitoring programmes to ensure the Al's compliance with applicable legal and regulatory requirements, and codes of conduct	
3.	Conduct independent compliance assessments and reviews as mandated by the compliance function to identify, assess and monitor compliance risk and mitigate any conduct and reputational risk issues	
4.	Report to and advise senior management on compliance related matters	
5.	Investigate suspicious activities and report any possible breaches of laws and regulations in business activities	
6.	Analyse areas of non-compliance and identify actions for improvement	
7.	Monitor the effectiveness of any remedial actions taken	
8.	Provide advice and recommendations on laws, rules and standards to the business units	
9.	Maintain a strong understanding of new and emerging products and services and the compliance implications on the AI of such products and services	
10.	Develop, review, evaluate and update escalation and whistleblowing policies and procedures for identifying and reporting potential and actual non-compliance issues	





	Key Roles/Responsibilities	Please "√" Where Appropriate
11.	Maintain regular communication and interaction with operational risk, market risk and credit risk colleagues to understand current areas of heightened operational risk, market risk and credit risk	
12.	Liaise with local regulators on a regular basis to ensure open lines of communication, maintain reporting obligations and handle requests	
13.	Develop and implement transactions monitoring and surveillance infrastructure on general banking activities	
14.	Track and capture key legal and regulatory changes both in Hong Kongand relevant overseas jurisdictions and notify relevant stakeholders to ensure the business operations of the AI could meet the relevant requirements	
15.	Provide advice and compliance related training to business units in Hong Kong	
	Key Roles/Responsibilities	Please "√" Where Appropriate
	Role 2 - Investment and Insurance Compliance	
1.	Develop, review, evaluate and update the Al's compliance policies, procedures, guidelines and compliance related documents to ensure congruence with its legal and regulatory obligations and the Al's internal requirements	
2.	Establish and review compliance monitoring programmes to ensure the Al's compliance with applicable legal and regulatory requirements, and codes of conduct covering the selling process	
3.	Report to and advise senior management on compliance related matters including sales suitability, financial need analysis and cross border selling restrictions	
4.	Investigate suspicious activities and report any possible non-compliance incidents related to Al's investment and insurance business activities	

AP3





	Key Roles/Responsibilities	Please "√" Where Appropriate
5.	Identify and handle non-compliance issues and monitor the effectiveness of any remedial actions taken	
6.	Provide advice on business initiatives, product development, and review and approve marketing materials for dissemination	
7.	Provide advice and guidance on compliance related matters to relationship managers and investment and insurance product managers	
8.	Liaise with local regulators on a regular basis to ensure open lines of communication, maintain reporting obligations and handle requests	
9.	Develop and implement transactions monitoring and surveillance infrastructure on investment and insurance business activities	
10.	Track and capture key local and regulatory changes both in Hong Kong and relevant overseas jurisdictions and notify relevant stakeholders to ensure the business operations of the AI could meet the relevant requirements	
11.	Provide advice and training on investment and insurance compliance to business units in Hong Kong	

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 that is retained by the HR department of the Bank.



Signature & Company Chop	Date
Name:	
Department:	
Position:	





Authorisation for Disclosure of Personal Information to a Third Party

,	, (name of applicant) hereby authorise
The Hong Kong Institute of Bankers (HKIB) to	disclose my results and/or progress of the
"Grandfathering/Examination/Certification/Exemption	on application for ECF-Compliance (Professional
Level)" to any Third Party, including but not limited t	o my current employer and future employer(s),
upon requested. The HKIB shall try its best endeavor	rs to ensure that the Disclosure of the Personal
nformation is proper and harmless to the applicant.	
Signature	HKIB Membership No./HKID No.*
Date	Contact Phone No.

Important Notes:

- 1. Personal information includes but is not limited to grandfathering/examination/certification/exemption application of a module/designation and award(s) achieved.
- 2. This authorisation form must be signed and submitted to the HKIB.
- 3. Applicant may rescind or amend consent in writing to the HKIB at any time, except where action has been taken in reliance on this authorisation.

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^{*}The HKIB Membership No./HKID No. is needed to verify your identity. We may also need to contact you concerning the authorisation.