



Updated Fit and proper questionnaire – ECB template (December 2021)

Supervised entities and appointees may use the relevant national questionnaire available via the information management system (IMAS) portal.

Follow the links to the portal on *the NCA website*¹ and the European Central Bank (ECB) banking supervision website.

Fit and proper questionnaire – ECB template

This is an ECB document adopted by the Supervisory Board on 25 November 2021 as a template to be used by national competent authorities (NCAs). NCAs are asked to implement the questionnaire using the content and layout shown in the template, also including the agreed national specificities and taking into consideration the technical implementing instructions that will be provided. This template is to be used as a guide to the information that the ECB and the NCAs expect to receive in order to assess the fitness and propriety of appointees.

The questionnaire should be read in conjunction with Article 91 of the Capital Requirements Directive (CRD),² the relevant guidelines of the European Banking Authority (EBA) and the European Securities and Markets Authority (ESMA), relevant data protection legislation and applicable national law. The appointee and the supervised entity are jointly responsible for providing the ECB and the NCA with complete and accurate information regarding the proposed appointment. Providing inaccurate or incomplete information causes delays in the assessment and may make it impossible to take a positive decision. In addition, both the appointee and the supervised entity have a responsibility to disclose to the NCA all matters that may be relevant to the assessment. You must be candid and truthful and provide a full and accurate response to all the questions. If you are uncertain how to respond to any part of the questionnaire, please give as much information as possible in the text boxes provided. However please do not submit or disclose any personal data other than those required in the context of this questionnaire, especially any data related to the “special categories of personal data” (pursuant to Article 10 of Regulation (EU) 2018/1725). Such data are not needed for a Fit and proper assessment³.

¹ [Link to the NCA website].

² Directive 2013/36/EU of the European Parliament and of the Council of 26 June 2013 on access to the activity of credit institutions and the prudential supervision of credit institutions, amending Directive 2002/87/EC and repealing Directives 2006/48/EC and 2006/49/EC (OJ L 176, 27.6.2013, p. 338).

³ For example: racial or ethnic origin, political opinions, religious or philosophical beliefs, trade union membership, or data concerning health or a natural person's sex life or sexual orientation. Regulation (EU) 2018/1725 of the European Parliament and of the Council of 23 October 2018 on the protection of natural persons with regard to the processing of personal data by the Union institutions, bodies, offices and agencies and on the free movement of such data, and repealing Regulation (EC) No 45/2001 and Decision No 1247/2002/EC (OJ L 295, 21.11.2018, p. 39).

Declaration by the appointee

This declaration concerns an application or notification regarding the appointment of a *text field for function* in accordance with the relevant national law. It will be reviewed by [name of the NCA] and the European Central Bank (ECB).

The undersigned:

- confirms that the information provided in this questionnaire and in the annexes attached hereto is accurate and complete to the best of his/her knowledge;
- confirms that s/he will notify [the name of the supervised entity] immediately if there is a material change⁴ in the information provided;
- authorises the ECB and [name of the NCA] to make such enquiries and seek such further information as is deemed appropriate in accordance with European and national law in order to identify and verify information considered relevant to the fit and proper assessment;
- confirms that s/he is aware of his/her responsibilities arising from European and national legislation and international standards, including regulations, codes of practice, guidance notes, guidelines and any other rules or directives issued by [the NCA] or by the ECB and the European Banking Authority (EBA) and the European Securities and Markets Authority (ESMA), which are relevant to the function for which a positive assessment is sought, and also confirms the intention to ensure continued compliance with such responsibilities;
- declares that s/he is aware of the processing and storage of personal data in accordance with the applicable data protection regulations and the [privacy statement of the ECB](#) and [the NCA];
- declares that s/he is aware that providing false or incomplete information may constitute grounds for refusal or withdrawal of the fit and proper authorisation, without prejudice to the possible imposition of legal and/or administrative sanctions.

Name:

Signature:

Date:

⁴ A material change is any change that may affect the suitability of the appointee.

Declaration by the supervised entity

This declaration concerns an application or notification regarding the appointment of a *text field for function* in accordance with the relevant national law. It will be reviewed by [name of the NCA] and the European Central Bank (ECB).

The undersigned:

- confirms that the information provided in this questionnaire and in the annexes attached hereto is accurate and complete to the best of his/her knowledge;
- confirms that the supervised entity will notify [name of the NCA] immediately if there is a material change in the information provided;
- confirms that the supervised entity has requested the full and most up-to-date information necessary to assess the appointee's suitability [in accordance with the applicable regulations/statutory provisions] and that it has given due consideration to that information in determining the appointee to be fit and proper;
- confirms that the description of the function for which a positive assessment is sought accurately reflects the aspects of the activities of the supervised entity for which it is intended that the appointee will be responsible;
- confirms that the supervised entity believes, on the basis of due and diligent enquiry and the information provided by the appointee and by reference to the fit and proper criteria as laid down in national and European law, international standards, including regulations, codes of practice, guidance notes, guidelines and any other rules or directives issued by the [NCA] or by the ECB and the European Banking Authority (EBA) and the European Securities and Markets Authority (ESMA), that the appointee is a fit and proper person to perform the function as described in this questionnaire;
- confirms that the supervised entity has made the appointee aware of the legal and regulatory responsibilities associated with the function as described in this questionnaire;
- confirms that the documents provided in the annexes are copies of the documents originally provided by the supervised entity or by the appointee that are kept in the archives of the supervised entity;
- confirms that s/he has authority to issue this notification/application and provide the declarations made by the supervised entity, and to sign this questionnaire on its behalf;
- declares that s/he is aware of the processing and storage of personal data in accordance with the applicable data protection regulations and the [privacy statement of the ECB](#) and [the NCA].

Name of the supervised entity:

Name(s) of the signatory (or signatories):

Position(s) in the supervised entity:

Signature(s):

Date:

1

Identity of the supervised entity and appointee

IMPORTANT: throughout Section 1 “you” means “the appointee”

| Information on the supervised entity | |
|---|--|
| Name of the supervised entity | Free text |
| Legal Entity Identifier Code | Free text |
| National company code | Free text |
| Is the supervised entity a “CRD significant institution” ⁵ in accordance with national law? ⁶ | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable |
| Governance structure of the supervised entity ⁷ | <input type="checkbox"/> One-tier structure <input type="checkbox"/> Two-tier structure <input type="checkbox"/> Other structure |
| If “Other structure” is selected, please specify which governance structure is adopted | Free text |
| Contact person within the supervised entity (name/email/phone number) | Free text |

⁵ See Section 3.4.1 of the Guide to fit and proper assessments.

⁶ [If applicable] According to Article XX of [national law].

⁷ One-tier structure for supervised entities where a single board of directors performs management and supervisory tasks. Two-tier structure in the case of supervised entities where the various functions are performed by separate bodies (e.g. a management body in its management function in charge of the executive (management) function, and a management body in its supervisory function). Some supervised entities may also have hybrid governance structures.

Information on the appointee

A
Name

| | |
|---|--|
| Gender | <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other |
| Family name | Free text |
| First name | Free text |
| Middle name(s) | Free text |
| Have you had or used other names at any time? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

If "Yes" is selected, please provide the following details, specifying all names that you have ever used (e.g. family name at birth, other legal names, assumed names)

| | |
|---------------------|--|
| Gender | <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other |
| Family name | Free text |
| First name | Free text |
| Middle name(s) | Free text |
| Date of name change | (YYYY-MM) |

B
Current residence

| | |
|--|---|
| Address | Free text |
| Postcode and city | Free text |
| Country | Free text |
| Start date of residence at this address: | (YYYY-MM) |
| Have you lived in a country other than your current country of residence at any time during the past five years? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If "Yes" is selected, please specify which country (or countries) and the period(s) of residence. | Free text |
| | |
| | |
| | |

C**Other information on the appointee**

| | |
|---|--------------|
| Date of birth | (YYYY-MM-DD) |
| Place of birth | Free text |
| Country | Free text |
| Nationality (or nationalities) | Free text |
| Number of current valid identity document or passport | Free text |
| Issuing country | Free text |
| Expiry date | (YYYY-MM-DD) |
| Contact phone number (including country code) | Free text |
| Email address | Free text |

D**Previous supervisory assessments**

| | |
|--|---|
| Have you ever been subject to any supervisory assessment in the financial sector (including assessments for functions abroad ⁸)? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|--|---|

If "Yes" is selected, please provide the following details on any supervisory assessments that the appointee has been subject to in the financial sector in the last five years, carried out by any supervisory authority in the financial sector.

| Competent authority involved | Institution involved | Function involved |
|----------------------------------|--------------------------------|---|
| Free text | Free text | Free text |
| | | |
| | | |
| | | |
| Start date of the term of office | End date of the term of office | Date of the decision (if not applicable, date of application for an assessment) |
| (YYYY-MM) | (YYYY-MM) | (YYYY-MM-DD) |
| | | |
| | | |
| | | |

If any previous assessment has resulted in a negative decision, withdrawal of authorisation, or a positive assessment but with conditions, recommendations or obligations, please explain the reasons for this

Free text

2**Function for which the questionnaire is submitted****Information on the function for which the questionnaire is submitted**

State the name of the function (to be) held

Free text

⁸ The term "abroad" means any territory outside of the scope of competence of the ECB or of the NCA of the supervised entity to which you are being appointed.

| | |
|--|---|
| <p>Select whether the function is executive, non-executive⁹, key function holder or branch manager</p> | <input type="checkbox"/> Executive <input type="checkbox"/> Non-executive <input type="checkbox"/> Key function holder <input type="checkbox"/> Branch manager |
| <p>Select the specific function(s)</p> | <input type="checkbox"/> Chair of the supervisory board <input type="checkbox"/> Deputy chair of the supervisory board <input type="checkbox"/> Member of the supervisory board <input type="checkbox"/> Independent member of the supervisory board <input type="checkbox"/> Chair of the board of directors <input type="checkbox"/> Deputy chair of the board of directors <input type="checkbox"/> Member of the board of directors <input type="checkbox"/> Independent member of the board of directors <input type="checkbox"/> Chair of the management body in its supervisory function <input type="checkbox"/> Chair of the management body in its executive function <input type="checkbox"/> Deputy chair of the management body in its supervisory function <input type="checkbox"/> Deputy chair of the management body in its executive function <input type="checkbox"/> Member of the management body in its supervisory function <input type="checkbox"/> Member of the management body in its executive function <input type="checkbox"/> CEO <input type="checkbox"/> Deputy CEO <input type="checkbox"/> General manager <input type="checkbox"/> Executive manager <input type="checkbox"/> Director general <input type="checkbox"/> CFO <input type="checkbox"/> CRO <input type="checkbox"/> CFRO <input type="checkbox"/> CIO <input type="checkbox"/> COO <input type="checkbox"/> Chair of the risk committee <input type="checkbox"/> Member of the risk committee <input type="checkbox"/> Chair of the remuneration committee <input type="checkbox"/> Member of the remuneration committee <input type="checkbox"/> Chair of the nomination committee <input type="checkbox"/> Member of the nomination committee <input type="checkbox"/> Chair of the audit committee <input type="checkbox"/> Member of the audit committee <input type="checkbox"/> Head of risk <input type="checkbox"/> Head of compliance <input type="checkbox"/> Head of audit <input type="checkbox"/> Statutory auditor of the board of statutory auditors <input type="checkbox"/> Procurator |
| <p>Provide a detailed description of the duties, responsibilities and reporting lines of the function. Please specify which other functions, if any, the appointee will exercise within the supervised entity</p> <p>Free text</p> | |
| <p>Specify whether the appointee will be qualified as a formal independent¹⁰ member of the management body in its supervisory function</p> | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable |
| <p>Is the application for the renewal of an appointment?</p> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <p>Additional details about the (planned) start date and length of the term of office¹¹</p> | |

⁹ See the definitions in Section 2, paragraph 15 (Definitions) of the joint ESMA and EBA Guidelines on the assessment of the suitability of members of the management body and key function holders under Directive 2013/36/EU and Directive 2014/65/EU (EBA/GL/2021/06).

¹⁰ [If applicable] According to Article XX of [national law].

¹¹ If a date is not certain, please give an estimated date.

| | |
|---|--|
| (Planned) date of the formal decision on the appointment issued by the competent governance body of the supervised entity | (YYYY-MM-DD) |
| (Planned) start date of the term of office | (YYYY-MM-DD) |
| (Planned) end date of the term of office | (YYYY-MM) If the exact month is not known, please estimate a month using the free text box below, also by referring to a specific, not yet calendarised, event (e.g. approval of financial statements for YYYY): Free text |
| Is the appointee replacing another person? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If "Yes" is selected, please state the name of the person being replaced and the reasons for the replacement Free text | |
| Is the application or notification submitted within the time period stipulated in "national law" ¹² | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable |
| If "No" is selected, please state the reasons Free text | |

3

Experience

| A Education | | | | |
|--------------------------------|--|----------------|-------------|---|
| Official degree or certificate | Level of educational qualification obtained | Field of study | Date issued | Educational organisation (e.g. university, centre of studies, etc.) |
| Free text | <input type="checkbox"/> Bachelor <input type="checkbox"/> Master <input type="checkbox"/> PhD <input type="checkbox"/> Certificate <input type="checkbox"/> Other | Free text | (YYYY-MM) | Free text |
| | | | | |
| | | | | |

¹² [If applicable] According to Article XX of [national law].

B**Practical experience related to banking and/or the financial sector gained in the last ten years**

| Position | Main responsibilities | Degree of seniority of the position¹³ / hierarchical level | Name of the entity. Please indicate the nature of the business and/or type of licence |
|---|------------------------------|---|--|
| Free text | Free text | <input type="checkbox"/> Senior level <input type="checkbox"/> High level <input type="checkbox"/> Other managerial <input type="checkbox"/> Other | Free text |
| | | | |
| | | | |
| | | | |
| Approximate number of subordinates in the appointee's area of responsibility | Areas of activity | Held from | Held to |
| Free text | Free text | (YYYY-MM) | (YYYY-MM) |
| | | | |
| | | | |
| | | | |

C**Other relevant experience outside of banking and/or the financial sector (e.g. academic positions, political mandates, other non-commercial mandates, or other specialised experience)**

| Position | Main responsibilities | Degree of seniority of the position / hierarchical level | Name of the entity. Please indicate the nature of the business and/or type of licence |
|---|------------------------------|---|--|
| Free text | Free text | Free text | Free text |
| | | | |
| | | | |
| | | | |
| Approximate number of subordinates in the appointee's area of responsibility | Areas of activity | Held from | Held to |
| Free text | Free text | (YYYY-MM) | (YYYY-MM) |
| | | | |
| | | | |
| | | | |

¹³ See Table 1 and Table 2 of Section 3.1.3.2 of the Guide to fit and proper assessments.

D

Presumption of sufficient experience

| |
|---|
| Does the appointee meet the presumption of sufficient experience in Tables 1 and 2 of Section 3.1.3.2 of the Guide to fit and proper assessments? |
|---|

- | |
|---|
| <input type="checkbox"/> Yes <input type="checkbox"/> No |
|---|

If "No" is selected, please list below any potential complementary (or compensating) factors as provided for in the Guide to fit and proper assessments

Free text

E

Assessment of the level of banking experience

| General banking experience, including, inter alia, in the fields indicated in EBA/GL/2021/06 ¹⁴ | Assessment by the appointee of the level of experience (high, medium, low) | Grounds for your answer |
|---|--|-------------------------|
| banking and financial markets | <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low | Free text |
| legal requirements and regulatory framework | <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low | Free text |
| prevention of money laundering and terrorist financing | <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low | Free text |
| strategic planning, the understanding of a credit institution's business strategy or business plan and accomplishment thereof | <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low | Free text |
| risk management (identifying, assessing, monitoring, controlling and mitigating the main types of risk of a credit institution) | <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low | Free text |
| knowledge and experience of climate-related and environmental risks | <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low | Free text |
| accounting and auditing | <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low | Free text |
| assessing the effectiveness of a credit institution's arrangements, ensuring effective governance, oversight and controls | <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low | Free text |
| interpreting a credit institution's financial information, identifying key issues based on this information and appropriate controls and measures | <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low | Free text |

¹⁴ Joint ESMA and EBA Guidelines on the assessment of the suitability of members of the management body and key function holders under Directive 2013/36/EU and Directive 2014/65/EU (EBA/GL/2021/06).

F

Relevant training in the last five years

| | |
|--|---|
| Has the appointee undertaken any relevant training in the last five years? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|--|---|

If "Yes" is selected, please provide details of the training

| Content of the training | Length (hours) | Year of completion |
|-------------------------|----------------|--------------------|
| Free text | Free text | (YYYY) |
| | | |
| | | |

G

Training prior to the commencement of the function or within the first year of the commencement of the function

| | |
|---|---|
| Will the appointee undertake training prior to the commencement of the function or within the first year of the commencement of the function? ¹⁵ | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|---|---|

If "Yes" is selected, please provide details of the training

| Content of the training | Training provider (specify whether the provider is internal or external and state the names of external organisations) | Term (hours) | If the training will take place later than six months after the authorisation is granted, state the start and end date |
|--|--|--------------|--|
| <input type="checkbox"/> banking and financial markets <input type="checkbox"/> legal requirements and regulatory framework <input type="checkbox"/> prevention of money laundering and terrorist financing <input type="checkbox"/> strategic planning, the understanding of a credit institution's business strategy or business plan and accomplishment thereof <input type="checkbox"/> risk management (identifying, assessing, monitoring, controlling and mitigating the main types of risk of a credit institution) <input type="checkbox"/> risk management of climate-related and environmental risks; <input type="checkbox"/> accounting and auditing <input type="checkbox"/> assessing the effectiveness of a credit institution's arrangements, ensuring effective governance, oversight and controls <input type="checkbox"/> interpreting a credit institution's financial information, identifying key issues based on this information and appropriate controls and measures <input type="checkbox"/> other. In this case, please specify the content of the training in the row beneath this column | Free text | Free text | (YYYY-MM) - (YYYY-MM) |
| Free text | Free text | Free text | (YYYY-MM) - (YYYY-MM) |
| | | | |

¹⁵ The response to this question will be taken as confirmation by the supervised entity that the training programme will take place as shown.

Reputation

IMPORTANT: throughout Section 4 “you” means “the appointee personally” and also includes all corporate entities, partnerships or unincorporated entities with which the appointee is or has been associated as a board member¹⁶, key function holder, senior manager, owner, partner, associate, or qualifying shareholder. Information should be provided only for alleged wrongdoing which happened in the period in which the appointee was associated with the entity.

The answers to the questions below must include any situations that occurred in countries outside the European Union.

| A | |
|--|---|
| <p>Are you or have you been subject to any criminal¹⁷ or relevant administrative or civil proceedings¹⁸ (including any that are pending, concluded or under appeal)? Investigations, sanctioning proceedings or measures conducted or imposed by public or supervisory authorities or professional bodies (i.e. warnings, reprimands, etc.) in any jurisdiction are included in the scope of this question</p> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <p>If “Yes” is selected, please provide the following details</p> | |
| <p>Type of proceedings</p> | <input type="checkbox"/> Criminal <input type="checkbox"/> Administrative <input type="checkbox"/> Civil <input type="checkbox"/> Other |
| <p>If “Other” is selected, please specify the type of proceedings</p> | |
| <p>Stage of proceedings</p> | <p>Free text</p> <input type="checkbox"/> Pending <input type="checkbox"/> Concluded <input type="checkbox"/> Under appeal |
| <p>Provide a brief description of the charge, nature of the alleged wrongdoing (e.g. intentional or owing to negligence, etc.) and of the stage of the proceedings</p> | |
| <p>Free text</p> | |
| <p>Authority in charge of the proceedings and file reference (if available)</p> | |
| <p>Free text</p> | |
| <p>Are the proceedings related to you personally or related to an entity with which you are or have been associated?</p> | <input type="checkbox"/> Yes, they are related to me personally <input type="checkbox"/> Yes, they are related to an entity with which I am or have been associated <input type="checkbox"/> No |
| <p>In the case of alleged wrongdoing, proceedings, investigations or sanctions involving you directly:</p> | |
| <p>i. Specify the circumstances of and reasons for your direct involvement</p> | |
| <p>Free text</p> | |
| <p>ii. Specify what you did to prevent and/or avoid the wrongdoing</p> | |

¹⁶ Board member includes also the position of member of the board of statutory auditors.

¹⁷ Criminal records that have been deleted from the official criminal registry should not be listed. Criminal records that have not been deleted should be disclosed regardless of the time elapsed since the underlying facts.

¹⁸ Relevant civil or administrative proceedings include (but are not limited to) proceedings in the following fields: banking, insurance activities, investment services, securities markets, payment instruments, money laundering, pensions, asset management or in any financial regulated sector including any formal notification of investigation or committal for trial, pending disciplinary actions or pending bankruptcy, insolvency or similar procedures, or breach of competition law. In any case, the information on administrative and civil proceedings must include proceedings that are relevant to the five fit and proper criteria in accordance with the national law implementing the CRD. For further information on what should be regarded as relevant, please refer to Section 3.2 of the Guide to fit and proper assessments.

Free text

iii. Could you have done more to avoid the alleged wrongdoing and did you learn anything from it?

Free text

In the case of alleged wrongdoing, proceedings, investigations or sanctions involving entities in which you hold or have held functions:

i. Specify the name of the entity involved

Free text

ii. Specify your role in the entity involved and whether you are or were responsible for a division or business line to which the proceedings (including sanctions or measures imposed) relate

Free text

iii. Were you a member of the management body, a key function holder or a senior manager at the time of the alleged wrongdoing?

Free text

iv. In your role in the entity, what did you do to prevent and/or avoid the alleged wrongdoing?

Free text

v. Could you have done more to avoid the alleged wrongdoing and did you learn anything from it?

Free text

Date and/or time frame of the alleged wrongdoing

(YYYY-MM)

Date on which the decision, ruling or finding was made (if applicable)

(YYYY-MM-DD)

Summary of the reasoning of the decision, ruling or finding

Free text

Sanction or penalty received (or likely if convicted in the case of pending proceedings)

Free text

Provide the range (namely the minimum and maximum level) of the sanctions that potentially could be or could have been applied

Free text

Have the proceedings been settled (including through any out-of-court settlement)?

Yes

No

If "Yes" is selected, please provide details (including the parties to the settlement, date, agreed settlement amounts and other relevant information)

Free text

Provide details on your subsequent conduct, including lessons learned and remedial action taken

Free text

Describe any other mitigating or aggravating factors using the Guide to fit and proper assessments¹⁹ as a basis

Free text

Were there any remuneration clawbacks linked to the above proceedings?

Yes

No

If "Yes" is selected, please provide details

Free text

¹⁹ By way of example, mitigating factors could include (i) the time elapsed since the alleged wrongdoing, (ii) the absence of further investigations or proceedings, (iii) the absence of dismissal from employment or any position of trust.

B

Are you or have you been personally subject to any disciplinary decisions²⁰ (including disqualification as a member of a management body or discharge from a position of trust)? Yes
 No

If "Yes" is selected, please provide the following details

i. reason for the disciplinary decision

Free text

ii. date or time frame of the alleged wrongdoing

Free text

iii. have you appealed against the disciplinary decision?

Free text

iv. if applicable, provide details of the entity involved in the decisions

Free text

v. any mitigating or aggravating factors

Free text

C

Are you or have you been subject to any bankruptcy, insolvency or similar procedures? Yes
 No

If "Yes" is selected, please provide the following details

i. length of time since the date of the decision (if applicable)

Free text

ii. status and (if not ongoing) outcome of the procedure (if final, please indicate whether it was considered intentional or owing to negligence)

Free text

iii. precautionary or attachment measures

Free text

iv. was the procedure triggered by you or by the entity concerned?

Free text

v. if applicable, provide details of the entity involved in the procedure

Free text

vi. details of your personal involvement, particularly if you were declared responsible for the insolvency of the entity

Free text

vii. any mitigating or aggravating factors

Free text

D

Has any financial institution in which you hold or have held any managerial function, or whose management you influence or have influenced materially in any other way, ever been the subject of a bailout or a restructuring, recovery or resolution procedure? Yes
 No

If "Yes" is selected, please provide details

Free text

²⁰ For instance, in the context of professional activity or employment.

E

To your knowledge, have you personally ever been included in a list of unreliable debtors or do you have a negative record on a list established by a recognised credit bureau or have you been subject to an enforcement measure for a debt on any such list?

- Yes
 No

If "Yes" is selected, please provide details

Free text

F

Have you ever been the subject of a refusal of registration, authorisation, membership or licence to carry out a trade, business or profession, or have you had such a registration, authorisation, membership or licence withdrawn, revoked, suspended or terminated? This question refers also to previous suitability assessments by other competent authorities (including abroad²¹)

- Yes
 No

If "Yes" is selected, please provide details

Free text

G

Apart from the cases already mentioned elsewhere in your replies, have you been directly or indirectly involved in a situation that led to concerns or suspicions of money laundering or terrorist financing?

- Yes
 No

If "Yes" is selected, please provide details

Free text

H

Have you personally ever failed to appropriately disclose any information of which the supervisor would reasonably have expected notice?

- Yes
 No

If "Yes" is selected, please provide details

Free text

I

To be completed by the supervised entity: If the answer to any question above is "Yes", assess the appointee's reputation taking the relevant facts into consideration and expressly stating the reasons why such facts are not considered to affect his/her suitability.

Free text

²¹ The term "abroad" means any territory outside of the scope of competence of the ECB or of the NCA of the supervised entity to which you are being appointed.

5 Conflicts of interest

IMPORTANT: throughout Section 5 “you” means “the appointee personally”, but also their close relatives (spouse, registered partner, cohabitee, child, parent or other relation with whom they share living accommodation) and any legal person in which the appointee is or was a board member, or a qualifying shareholder, at the relevant time.

A

| | |
|---|---|
| <p>Do you have any personal relationship with any of the following:</p> <ul style="list-style-type: none">- other members of the management body and/or key function holders of the supervised entity, the parent undertaking or their subsidiaries- qualifying shareholders of the supervised entity, the parent undertaking or their subsidiaries- clients, suppliers or competitors of the supervised entity, the parent undertaking or the supervised entity's subsidiaries | <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
|---|---|

If “Yes” is selected, please provide details

Free text

B

| | |
|---|---|
| <p>Are you currently involved either directly or indirectly in any legal proceedings or out-of-court disputes²² against the supervised entity, the parent undertaking or their subsidiaries?</p> | <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
|---|---|

If “Yes” is selected, please provide the following details

i. The content and current status of the proceedings in question

Free text

ii. Which entity (or entities) is (are) involved

Free text

²² These include alternative dispute resolution procedures provided by neutral out-of-court bodies such as conciliators, mediators and arbitrators, and out-of-court claims.

C

Do you personally or as a board member have any business, professional²³ or commercial relationship or have you had such a relationship in the past two years with any of the following:

- the supervised entity, the parent undertaking or their subsidiaries
- clients, suppliers or competitors of the supervised entity, the parent undertaking or the supervised entity's subsidiaries

 Yes No

If "Yes" is selected, please provide the following details

| Name of the entity | Main activities of the entity | Type of relationship with the entity | Start date and (if applicable) end date of the relationship |
|--|---|---|---|
| Free text | Free text | Free text | Free text |
| | | | |
| | | | |
| Annual payments made by the payer (in EUR thousands) | Annual payments made by the payer expressed as a percentage of the payer's (consolidated) gross revenue | Annual payments received by the payee expressed as a percentage of the payee's (consolidated) gross revenue | |
| Free text | Free text | Free text | |
| | | | |
| | | | |

D

Are you subject to any cooling-off period (either under an agreement or under the law)?

 Yes
 No

²³ Such as holding a management or senior position(s).

E

Do you have any financial obligations towards the supervised entity, the parent undertaking or their subsidiaries cumulatively exceeding EUR 200,000 (excluding private mortgages²⁴) or any loans of any value that are not negotiated "at arm's length" or that are non-performing²⁵ (including mortgages)?

- Yes
 No

If "Yes" is selected, please provide the following details

| Name of the debtor (if other than the appointee, indicate the relationship with the appointee) | Name of the entity | Nature of the obligation(s) (e.g. mortgage, personal loan, credit line) | Amount of the obligation(s), specifying the granted and the drawn amount (in EUR millions) | Guarantee (if any) (type and amount) |
|---|--|--|--|--|
| Free text | Free text | Free text | Free text | Free text |
| | | | | |
| | | | | |
| | | | | |
| Status of the obligation(s) (e.g. performing, non-performing) | Conditions of the obligation(s) | Start date of the obligation(s) | Value of the obligation expressed as a percentage of the total loans of the debtor | Value of the obligation expressed as a percentage of the total eligible capital ²⁶ of the supervised entity |
| <input type="checkbox"/> Performing <input type="checkbox"/> Non-performing | <input type="checkbox"/> Market conditions <input type="checkbox"/> Negotiated at arm's length <input type="checkbox"/> Special conditions <input type="checkbox"/> Supported under the collective bargaining agreements <input type="checkbox"/> Contracts with standardised terms applied together and on a regular basis to a large number of customers <input type="checkbox"/> Other | (YYYY-MM) | Free text | Free text |
| | | | | |
| | | | | |

²⁴ Private mortgages of any value do not need to be disclosed (if they are performing, negotiated at arm's length and not contrary to any internal credit approval rules) if they are not of a commercial/investment nature. Moreover, all personal loans (e.g. credit cards, overdraft facilities and car loans) granted to the appointee by the supervised entity (if performing, negotiated at arm's length and not contrary to any internal credit rules) do not need to be disclosed as long as they are cumulatively under the threshold of EUR 200,000. Note that such mortgages or loans should be disclosed if they are, or are likely to become, non-performing for any reason.

²⁵ Or subject to forbearance measures.

²⁶ As defined in Regulation (EU) No 575/2013 of the European Parliament and of the Council of 26 June 2013 on prudential requirements for credit institutions and investment firms and amending Regulation (EU) No 648/2012, OJ L 176 27.6.2013, p. 1.

F

Do you have any financial interest (such as ownership or investment)²⁷ in any of the following?

- the supervised entity, the parent undertaking or their subsidiaries
- clients, suppliers or competitors of the supervised entity, the parent undertaking or the supervised entity's subsidiaries

Yes
 No

If "Yes" is selected, please provide the following details

| Name of the entity | Main activities of the entity | Type of relationship between the entity and the supervised entity | Start date of the financial interest | Size of the financial interest (expressed as a percentage of the capital and voting rights of the entity or value of the investment) |
|--------------------|-------------------------------|---|--------------------------------------|--|
| Free text | Free text | Free text | (YYYY-MM-DD) | Free text |
| | | | | |
| | | | | |
| | | | | |

G

Do you in any way represent a shareholder of the supervised entity, the parent undertaking or their subsidiaries?

Yes
 No
 Not applicable

If "Yes" is selected, please provide the following details

i. Name of the shareholder

Free text

ii. Size of the participation (as a percentage of the capital and voting rights)

Free text

iii. Nature of the representation

Free text

H

Do you personally have or have you had in the past two years any position of high political influence (internationally, nationally or locally)?

Yes
 No

If "Yes" is selected, please provide the following details

i. The nature of the position

Free text

ii. The specific role and responsibilities of this position

Free text

iii. The relationship between this position (or the entity where this position is or was held) and the supervised entity, the parent undertaking or their subsidiaries

Free text

²⁷ Current shareholdings of less than 1% or other investments of an equivalent value do not need to be disclosed.

I

| | |
|--|---|
| Do you have any other relationships, positions or involvement that are not covered in the questions above and could affect the interests of the supervised entity? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|--|---|

If "Yes" is selected, please provide the following details

i. Nature and content of the relationship, position or involvement
Free text

ii. Start date of the relationship, position or involvement
Free text

iii. How this relationship, position or involvement may affect your appointment
Free text

J

To be completed by the supervised entity: If the answer to any questions above is "Yes", assess whether the potential conflict of interest is material (if it is not considered material, give the grounds for this finding) and indicate how the potential conflict of interest is proposed to be mitigated or managed.

To assess the materiality of the potential conflict of interest, please see Section 3.3 of the Guide to fit and proper assessments and include relevant documentation (if applicable by-laws, rules of procedure, conflict of interest policy etc.).

Free text

Time commitment

A

Information to be provided by the supervised entity: the supervised entity is required to provide its assessment on how much time is the appointee expected to commit to his/her functions (the time commitment for similar positions within the institution, similar entities in the group or other supervised entities²⁸ must be taken into account as a peer comparison)

When providing the above information, the supervised entity must take into account the factors set forth in the joint ESMA and EBA Guidelines on suitability (EBA/GL/2021/06)²⁹

Free text

B

Assessment by the appointee regarding his / her time commitment for the functions³⁰

Free text

C

Has an additional non-executive directorship been authorised by a competent authority (Article 91(6) CRD)?

- Yes
 No
 Not applicable

If "Yes" is selected, please specify the competent authority

Free text

²⁸ See the [Report on declared time commitment of non-executive directors in the SSM](#), August 2019. While this report provides valuable information on the current situation, it does not stipulate requirements or supervisory expectations and its figures do not affect the principle of proportionality or the established case-by-case assessment approach as described in the Guide to fit and proper assessments.

²⁹ See the rules provided in Chapter 4, Title III, of the joint ESMA and EBA Guidelines on the assessment of the suitability of members of the management body and key function holders under Directive 2013/36/EU and Directive 2014/65/EU (EBA/GL/2021/06).

³⁰ See the rules provided in Chapter 4, Title III, of the joint ESMA and EBA Guidelines on the assessment of the suitability of members of the management body and key function holders under Directive 2013/36/EU and Directive 2014/65/EU (EBA/GL/2021/06).

D

| List of executive and non-executive directorships and other professional activities | | | | | |
|---|---|-----------|--------------------------------------|---|--|
| | Entity (please state whether the entities are listed) | Country | Description of the entity's activity | Size of the entity ³¹ (in EUR millions) | Function within the entity |
| Function for which this questionnaire is being completed | Free text | Free text | Free text | Free text | <input type="checkbox"/> Executive function <input type="checkbox"/> Non-executive function <input type="checkbox"/> Key function holder <input type="checkbox"/> Branch manager <input type="checkbox"/> Other activities ³² |
| All other directorships and/or activities³³ | | | | | |
| | | | | | |

| | Privileged counting (Article 91(4) CRD) ³⁴ or no counting ³⁵ | Additional responsibilities (such as membership of committees, Chair functions, etc.) | Time commitment per year (in days) ³⁶ | Term of mandate (start date and end date) | Number of meetings per year ³⁷ | Any additional information or comments |
|---|--|---|--|---|---|--|
| Function for which this questionnaire is being completed | <input type="checkbox"/> Yes, part of a group <input type="checkbox"/> Yes, part of an institutional protection scheme <input type="checkbox"/> Yes, a qualifying holding <input type="checkbox"/> No, nor part of any group, institutional protection scheme or qualifying holding <input type="checkbox"/> No counting | Free text | Number | Free text | Number | Free text |
| | | | | | | |

³¹ E.g. year-end data on total assets for a financial entity or data on total turnover and international presence for other entities.

³² "Other activities" means lecturing, charity work, pursuing a profession different from a directorship, etc.

³³ For each directorship or other activity, a separate row needs to be filled in.

³⁴ Privileged counting applies to directorships held within the same group, in institutions that are part of the same institutional protection scheme and in undertakings in which the institution holds a qualified holding.

³⁵ This applies to directorships in organisations that do not pursue predominantly commercial objectives and positions representing the State.

³⁶ Please include time needed for attendance at meetings of the management body, additional responsibilities such as (but not limited to) membership of committees, training, preparation and follow-up time needed for the meetings, buffer for crises, etc.

³⁷ Meetings of the management body and board committees and any other meetings that the appointee will be involved in owing to the position.

| | | | | | | |
|---|--|--|--|--|--|--|
| All other directorships and/or activities ³⁸ | | | | | | |
| | | | | | | |

E

| | |
|---|-----------|
| Total number of executive directorships if privileged counting ³⁹ is applied and if exceptions ⁴⁰ are not counted ⁴¹ | Free text |
|---|-----------|

F

| | |
|---|-----------|
| Total number of non-executive directorships if privileged counting is applied and if exceptions are not counted ⁴² | Free text |
|---|-----------|

G

| |
|--|
| If privileged counting is applied, please provide details of any synergies that exist between the entities concerned, such that there is a legitimate overlap in terms of the time commitment with respect to those entities |
| Free text |

H

| | |
|--|-----------|
| Total days per year of time committed to all functions over and above the function for which this questionnaire is being completed ⁴³ | Free text |
|--|-----------|

³⁸ For each directorship or other activity, a separate row needs to be filled in.

³⁹ See Section 3.4.3.1 of the Guide to fit and proper assessments.

⁴⁰ As provided in paragraph 57, Chapter 5, Title III, of the joint ESMA and EBA Guidelines on the assessment of the suitability of members of the management body and key function holders under Directive 2013/36/EU and Directive 2014/65/EU (EBA/GL/2021/06).

⁴¹ In accordance with the rules provided in Chapter 5, Title III, of the joint ESMA and EBA Guidelines on the assessment of the suitability of members of the management body and key function holders under Directive 2013/36/EU and Directive 2014/65/EU (EBA/GL/2021/06).

⁴² In accordance with the rules provided in Chapter 5, Title III, of the joint ESMA and EBA Guidelines on the assessment of the suitability of members of the management body and key function holders under Directive 2013/36/EU and Directive 2014/65/EU (EBA/GL/2021/06).

⁴³ Do not include the time commitment for the function in the supervised entity for which this questionnaire is being completed (since this time is already recorded in row A).

7

Collective suitability

To be completed by the supervised entity if the appointee is being appointed as a member of the management body.

| A | |
|--|---|
| Is the supervised entity subject to national requirements ⁴⁴ on gender diversity? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If "Yes" is selected, in making this appointment, is the supervised entity compliant with the national requirements on gender diversity? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

| B | |
|--|--|
| In making this appointment, is the supervised entity compliant with its internal target or rules for gender diversity in the composition of the management body? | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No internal target or rules exists |

| C | |
|---|---|
| In making this appointment, is the supervised entity compliant with its internal principles for other aspects of diversity? | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable/no internal principles exist |

| D | |
|--|--|
| Describe the extent to which the appointee contributes to the collective suitability of the management body. In addition, explain in general terms the weaknesses that have been identified in the management body's collective composition and the extent to which the appointee contributes to solving some or all of these weaknesses | |
| Free text | |

⁴⁴ [If applicable] According to Article XX of [national law].

E

List of members of the management body (as applicable)

| First name, last name | Function(s) (Member of the management body in its management function; Chair of the management body in its management function; Deputy Chair of the management body in its management function; Chief Executive Officer (CEO); Deputy Chief Executive Officer (CEO); Chief Financial Officer (CFO); Chief Risk Officer (CRO); Member of the management body in its supervisory function; Chair of the management body in its supervisory function; Deputy Chair of the management body in its supervisory function) | Date of appointment or renewal | Skills and main areas of expertise or trainings received (banking and financial markets; legal requirements and regulatory framework; prevention of money laundering and terrorist financing; strategic planning, the understanding of a credit institution's business strategy or business plan and accomplishment thereof; risk management (identifying, assessing, monitoring, controlling and mitigating the main types of risk of a credit institution); climate-related and environmental risks; accounting and auditing; assessing the effectiveness of a credit institution's arrangements, ensuring effective governance, oversight and controls; interpreting a credit institution's financial information, identifying key issues based on this information and appropriate controls and measures; insurance; IT; human resources; other) |
|-----------------------|--|--------------------------------|---|
| Free text | Free text | (YYYY-MM-DD) | Free text |
| | | | |
| | | | |

A

If there is any other information that the appointee or supervised entity considers to be relevant to the assessment, it must be included here

Free text

B

Please upload (if applicable) the following accompanying documents

- Criminal record check
- Board minutes regarding the appointment (draft if final version not yet available)
- Minutes of the Nomination Committee (draft if final version not yet available), any other minutes regarding the appointment and/or other records of suitability assessments conducted within the supervised entity
- Copy of identity card/passport
- Suitability reports (both individual and collective in the case of tasks performed in a collegiate body)
- CV
- Conflict of interest policy
- Diversity policy
- Other documents (in accordance with national specificities)

9 Privacy statement for fit and proper

The [privacy statement](#) sets out the legal basis and details for the processing of personal data by the ECB. The ECB is required to process personal data in respect of any application in order to assess the suitability of the appointee for the position.

With the submission of the completed questionnaire you acknowledge that you have read and understand the privacy statement.

© European Central Bank, 2022

Postal address 60640 Frankfurt am Main, Germany

Telephone +49 69 1344 0

Website www.bankingsupervision.europa.eu

All rights reserved. Reproduction for educational and non-commercial purposes is permitted provided that the source is acknowledged.

For specific terminology please refer to the [SSM glossary](#) (available in English only).