

DECLARATION BY THE PROPOSING MFB

(To be signed either by the President/Chief Executive Officer, Head of Human Resources or the Company Secretary of the incorporated MFB)

I, _____ on behalf of _____ (*name of proposing MFB*) ("the proposing MFB") submit the FPT Proforma in respect of Mr./Ms. _____ for the proposed position of _____ and declare that:

- (i) To the best of my knowledge, information and belief, the information that is being submitted to SBP is true, accurate and supports my view that this person fulfils all the criteria for the post for which he/she is proposed.
- (ii) Select (✓) as appropriate:

- a) The MFB has satisfied itself that the proposed person meets the requirements of all the applicable laws, rules and regulations including Companies Ordinance, 1984, Microfinance Institutions Ordinance, 2001 and applicable FPT Criteria and is, in the opinion of the MFB, capable of fulfilling the assigned role.

OR

- The MFB acknowledges that the proposed person needs an exemption from some provision(s) of the applicable laws, rules and regulations, details of which are given in the attached letter along with justifications thereof.
- b) The MFB has obtained copies of educational degrees/certificates and verified the same from relevant institutions/universities or obtained certified copies of verification from previous employer directly.

OR

- The MFB undertakes to confirm to the SBP within a period of four (4) months hereof that educational degrees/certificates shall be got verified by them and status of the same shall be communicated to SBP accordingly.
- c) The MFB has obtained satisfactory confidential reports from the former employer(s).

Signatures & Stamp of MFB's official: _____

OR

The MFB undertakes to obtain confidential reports from the former employer(s) within a period of three (3) months hereof and status of the same shall be communicated to SBP accordingly.

- (iii) I am aware that it may be:
- a. an offence and/or
 - b. grounds for refusal of this application and/or
 - c. grounds for revocation of an authorization granted on the basis of this application and/or
 - d. grounds for SBP to commence an administrative sanctions procedure against both myself and/or the MFB

if the undersigned and/or the MFB knowingly or recklessly

- provide false or misleading information and/or to make a false or misleading statement (which, I acknowledge, may include the withholding by me and/or the MFB of relevant information) in this application for authorization
- fail to inform and/or withhold from the SBP details of any change in circumstances/new information which is relevant and/or material to the status of the proposed person anytime from now on.
- fail to inform to SBP immediately any legal and/or contractual infirmity resulting from behavior, conduct or incapacity in whatever form any time from now on which could potentially debar the person from holding the position.

Dated this _____ day of _____

Name: _____ Signature _____

Position/Designation _____

For and on behalf of (name of MFB): _____