



IMPORTANT: Please complete in CAPITAL LETTERS and BLACK INK only, and tick where applicable. Any alteration made must be countersigned.

This Investor Suitability Assessment Form will guide you in choosing the investment products that suit your investment objectives, risk tolerance, financial profile and investment experience. The information you provide will form the basis of our recommendation. Therefore, it is important to provide accurate and complete information to ensure that suitable unlisted capital market products are recommended according to your investment needs and objectives.

Full Name (as per NRIC / Passport)

NRIC No. - -

Passport No. / Other

FINANCIAL CAPACITY	SCORE															
What is your age? <input type="checkbox"/> > 60 (0) <input type="checkbox"/> 50-60 (1) <input type="checkbox"/> 40-49 (2) <input type="checkbox"/> 30-39 (3) <input type="checkbox"/> < 30 (4)																
Tell us about your annual income: <input type="checkbox"/> RM 0 - 100,000 (0) <input type="checkbox"/> RM 100,001 - 150,000 (1) <input type="checkbox"/> RM 150,001 and above (2)																
As of the date of this assessment, share with us your estimated liability: <input type="checkbox"/> RM 1,000,001 and above (0) <input type="checkbox"/> RM 100,001 - 1,000,000 (1) <input type="checkbox"/> RM 0 - 100,000 (2)																
As of the date of this assessment, share with us your estimated net worth: <input type="checkbox"/> RM 0 - 100,000 (0) <input type="checkbox"/> RM 100,001 - 1,000,000 (2) <input type="checkbox"/> RM 1,000,001 and above (4)																
What is your investment objective? <input type="checkbox"/> Capital Preservation (0) <input type="checkbox"/> Income (1) <input type="checkbox"/> Income and Growth (3) <input type="checkbox"/> Growth (4)																
How long will you hold your investments for? <input type="checkbox"/> < 3 years (0) <input type="checkbox"/> 3 to 5 years (2) <input type="checkbox"/> > 5 years (4)																
What is your expected annualised gain? <input type="checkbox"/> 0-4% (0) <input type="checkbox"/> > 4-6% (1) <input type="checkbox"/> > 6-8% (2) <input type="checkbox"/> > 8-12% (3) <input type="checkbox"/> > 12% and above (4)																
What is your risk tolerance? <input type="checkbox"/> Capital preservation is very important (0) <input type="checkbox"/> Capital preservation is my objective but I can accept some capital reduction (2) <input type="checkbox"/> I understand market risk and willing to accept capital reduction in my investment (4)																
Share with us your investment experience: <table style="width:100%; border: none;"> <tr> <td style="width: 30%;">Bonds</td> <td><input type="checkbox"/> < 1 year (0)</td> <td><input type="checkbox"/> > 1 year (1); and</td> </tr> <tr> <td>Derivatives</td> <td><input type="checkbox"/> < 1 year (0)</td> <td><input type="checkbox"/> > 1 year (1); and</td> </tr> <tr> <td>Equities</td> <td><input type="checkbox"/> < 1 year (0)</td> <td><input type="checkbox"/> > 1 year (1); and</td> </tr> <tr> <td>Unit Trust Fund</td> <td><input type="checkbox"/> < 1 year (0)</td> <td><input type="checkbox"/> > 1 year (1)</td> </tr> <tr> <td>Please specify fund category</td> <td><input type="checkbox"/> Balance</td> <td><input type="checkbox"/> Bond <input type="checkbox"/> Income <input type="checkbox"/> Equity</td> </tr> </table>	Bonds	<input type="checkbox"/> < 1 year (0)	<input type="checkbox"/> > 1 year (1); and	Derivatives	<input type="checkbox"/> < 1 year (0)	<input type="checkbox"/> > 1 year (1); and	Equities	<input type="checkbox"/> < 1 year (0)	<input type="checkbox"/> > 1 year (1); and	Unit Trust Fund	<input type="checkbox"/> < 1 year (0)	<input type="checkbox"/> > 1 year (1)	Please specify fund category	<input type="checkbox"/> Balance	<input type="checkbox"/> Bond <input type="checkbox"/> Income <input type="checkbox"/> Equity	
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Please specify fund category	<input type="checkbox"/> Balance	<input type="checkbox"/> Bond <input type="checkbox"/> Income <input type="checkbox"/> Equity														
Grand Total																

Based on the above, your risk profile falls under Group

Score	Group	Risk Category
0-5	<input type="checkbox"/> G1	Very Low
6-11	<input type="checkbox"/> G2	Low
12-18	<input type="checkbox"/> G3	Moderate
19-25	<input type="checkbox"/> G4	High
26-32	<input type="checkbox"/> G5	Very High

RECOMMENDATION BY AUTHORISED UTC / PRC**Fund / Portfolio***

1.	2.
3.	4.
5.	6.

Basis of recommendation

*The investment portfolio is constructed according to the investor's investment objective, risk appetite and time horizon. The fund manager may / will construct the investment portfolio based on the category of funds that are considered to be suitable for the investor.

DECLARATION**I hereby declare that I:**

- agree to invest in the fund(s) recommended
- agree to invest in the fund(s) recommended, and I also have decided to purchase other unit trust fund(s) that is/are not recommended by Authorised UTC/PRC. (please specify below) (This could be in addition to the recommended funds)

Name of Fund(s) that I wish to invest into but are not recommended by Authorised UTC/PRC, are:

1. _____	2. _____
3. _____	4. _____
5. _____	6. _____

- disagree with the recommendation prescribed above

All information disclosed is true, complete and accurate.

The adviser has explained and I have understood the features and risks of the product.

I acknowledge receipt of a copy of Product Highlight Sheet and the disclosure document which have been given to me.

Signature of Client

Date:

WARNING:

The recommendation is made based on information obtained from the suitability assessment. Investors are advised to exercise judgment in making an informed decision in relation to the unlisted Capital Market product.

COMPULSORY FOR DISTRIBUTOR (AUTHORISED UTC / PRC)

Name of *UTC / PRC: _____

*UTC / PRC Contact No: _____

*UTC / PRC Code: _____

*Delete where not applicable.

Signature

Date: