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Part A – General information

A7 – Responsible person details – Senior Manager

Title	Mr			Mrs	Ms			Dr			Other								
Name of Senior Manager																			
Date of birth	D	D	/	M	M	/	Y	Y	Y	Y									
Former name(s) (if applicable)																			
Main responsibilities	DETAI	LS BE	LOW																
Curriculum vitae		At	tach	ned	(che	ck b	ox)												
Postal address																			
Telephone numbers																			
- Direct business number																			
- Mobile number																			
Email																			
Nationality	Attached (check box)																		
Australian residency	Attached (check box)																		
Date of appointment	D	D	/	M	M	/	Y	Y	Y	Y									

Application form continues on the next page



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Part A – General information (continued)

Directorships and shareholdings

Attached (check box)

Fit and proper considerations

Attached (check box)

Disqualified person status

Attached (check box)