

## Director Nomination Form

(1) I (Mr. / Mrs. / Ms. / Others) \_\_\_\_\_, am a shareholder of Thaivivat Insurance Public Company Limited, holding \_\_\_\_\_ shares.

Contact address: \_\_\_\_\_  
\_\_\_\_\_ Phone  
number \_\_\_\_\_ Fax number \_\_\_\_\_ Email address

\_\_\_\_\_ (2) I wish to nominate the qualified person to be a director of Thaivivat Insurance Public Company Limited in which such nominated person's profile as shown as follow:

### **Part 1: Personal Information**

#### 1.1 First name – Last name

First name \_\_\_\_\_ Last name \_\_\_\_\_ First name – Last name  
(former name) First name \_\_\_\_\_ Last name \_\_\_\_\_ Nationality  
\_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ year Status  Single  Married   
Divorced  Widowed The evidence of identity  Identification Card  Passport (in case of foreigner)  
Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

#### 1.2 First name – Last name: Spouse

First name \_\_\_\_\_ Last name \_\_\_\_\_ Age \_\_\_\_\_ year First name – Last  
name (former name)  
First name \_\_\_\_\_ Last name \_\_\_\_\_

#### 1.3 Having \_\_\_\_\_ children as follows:

First name \_\_\_\_\_ Last name \_\_\_\_\_ Age \_\_\_\_\_ year First name  
\_\_\_\_\_ Last name \_\_\_\_\_ Age \_\_\_\_\_ year First name  
\_\_\_\_\_ Last name \_\_\_\_\_ Age \_\_\_\_\_ year

1.4 address: \_\_\_\_\_  
\_\_\_\_\_

1.5 Education

Institution	Qualification / Major	Year of Graduation

1.6 Work experience (last 5 years until now)

Place of work	Position	Period

1.7 Completed Program from Thai Institute of Directors Association (IOD)

Program	Year of Completed
<input type="checkbox"/> Director Certification Program (DCP)	_____
<input type="checkbox"/> Director Accreditation Program (DAP)	_____
<input type="checkbox"/> Audit Committee Program (ACP)	_____
<input type="checkbox"/> The Role of Chairman (RCM)	_____
<input type="checkbox"/> Finance for Non-Finance Director (FN)	_____
<input type="checkbox"/> Other (please specify) _____	_____
<input type="checkbox"/> _____	_____

**Part 2: Prohibited qualifications**

- 2.1 Currently or ever having been bankrupt, put under court order on receivership, incompetence or quasi-incompetence (Yes/No)  Yes  No
- 2.2 Being named on the list of ineligible executives under the regulations of the Stock Exchange of Thailand (SET) (Yes/No)  Yes  No
- 2.3 Being under accusation or proceedings by the competent agency whereby such actions are instituted for wrongdoing in respect of unfair securities or derivatives trading, or fraudulent, dishonest or deceitful management (Yes/No)  Yes  No
- 2.4 Being subject to a prohibition period ordered by competent agencies empowered by international law to suspend, withdraw or ban from serving or acting as a management of the Company (Yes/No)  Yes  No
- 2.5 Ever having been convicted or imprisoned or suspension of the execution of imprisonment due to dishonesty as follow 2.3 (Yes/No)  Yes  No

**Part 3 : Independent qualifications**

3.1 Holding the Shares of Thaivivat Insurance Public Company Limited

Holding	No. of Shares ( Shares)
(1) The nominee	
(2) Spouse	
(3) Non sui juris children (First name – Last name) ..... .....	..... .....
(4) The juristic person that person in(1) (2) (3), hold more than 30% ..... ..... .....	..... ..... .....

3.2 Ever having been an Executive Director<sup>1</sup>, staff, employee or advisor whom received salary in other listed companies

Yes  No

Please specify, if choose “Yes”

Name Of Business	Position	Period

3.3 Ever having been an Executive Director, staff, employee or advisor whom received salary in other non-listed company.

Yes  No

Please specify, if choose “Yes”

Name Of Business	Position	Period

<sup>1</sup> Executive Director mean the Director who execute the day-to-day operation including management committee and the Director who authorized to sign for a binding commitment excluded the transaction which sign according to the resolution approved from the Board of Director and sign together with the other authorized Director.

3.4 Ever having been an Executive Director, staff, employee or advisor whom received salary in other business which are the rival companies.

Yes  No

Please specify, if choose “Yes”

Name Of Business	Position	Period

3.5 Being a close relative (e.g. father, mother, brother, sister, spouse, son, daughter including spouse of the son and daughter) of the executive, major shareholder, controlling person or person to be nominated as executive or controlling person of the Company

Yes  No

Please specify, if choose “Yes”

First Name – Last Name	Name of Business / Position	Related as

3.6 Business relationships with the Company

3.6.1 Having relationship as professional service provider at the present and the last 2 years

(1) Not being professional service provider as auditor  Yes  No

(2) Not being other professional service provider that  Yes  No

the value of transaction > 2 million baht/year (such as legal advisor, financial advisor, asset valuer)



บริษัท ไทยวาทประกันภัย จำกัด (มหาชน)  
THAIWAT INSURANCE PCL

3.6.2 Having business relationship

Not do all business transactions which value > 20 million baht  Yes  No  
or > 3% of the Company's NTA (depend on which amount is  
lower) in the last 6 months

I hereby certify that all information and evidence attached hereto are complete and accurate.

Sign \_\_\_\_\_ Shareholder

( \_\_\_\_\_ )

Date \_\_\_\_\_

(3) I (Mr./Mrs./Miss/Others) \_\_\_\_\_ have been nominated to be the  
Company's director of Thaivivat Insurance Public Company Limited, I accept and acknowledge this  
nomination and I hereby certify that

(A) I give all information and supplementary documents are true and complete and

(B) I hereby give my permission to the Company to use information and

supplementary documents as enclose for nomination as the Company's Director and to disclose such  
information about prohibited qualifications to the Company and the authorize person of the Company

Sign \_\_\_\_\_ Nominee

( \_\_\_\_\_ )

Date \_\_\_\_\_

## **The required documents for consideration**

### 1. The evidence of identity

1.1 Person: enclose a certified copy of Identification Card or Passport (in case of foreigner).

1.2 Juristic Person: enclose a copy of Certificate of Incorporation certified by the authorized person(s) together with the company's seal affixed (if any) and a certified copy of Identification Card or Passport (in case of foreigner) of such authorized person(s).

2. The evidence of shareholding, namely the letter of certification from the Securities Company or the Thailand Securities Depository Co., Ltd. (TSD) or other evidence from the Stock Exchange of Thailand (SET) or Custodian.

3. In case where many shareholders have unified to propose agenda, one of those shareholders must fill the Form of Shareholders Meeting Agenda Proposal completely and affix the name as evidence. The rest of shareholders must individually fill part (1) of the Form completely and affix the name as evidence of the shareholding must be collected from each shareholder and presented together.

4. Other supporting documents beneficial for the Board of Director's consideration (if any).

