

# Application for Nomination to the Board of Directors of Abu Dhabi National Insurance Company PJSC

## Instructions for Completing this Application Form

- 1. Please fill out all required fields in this application form. Any application that is incomplete will be excluded by the Company.
- 2. This application along with the requested documents shall be sent to ADNIC by e-mail to <u>boardnominations@adnic.ae</u> no later than Thursday 6 February 2025 5:00pm.

I, the undersigned, submit this application form to nominate myself for the position of a member of the Board of Directors of Abu Dhabi National Insurance Company PJSC for the term 2025 - 2028 including all requested information and documents.

| Full Name                     |                          |
|-------------------------------|--------------------------|
| Nationality                   | Place &<br>Date of Birth |
| Address                       |                          |
|                               |                          |
| Telephone No.                 | Mobile No.               |
| Email                         |                          |
| Current Job<br>& Designation  |                          |
| Emirates Identity<br>Card No. |                          |

## 1. Personal Details of the Candidate

## 2. Type of Membership for Nomination (mark where applicable)

Independent Member

Non-Independent Member

P.O.Box 839 - Abu Dhabi, U.A.E. Tel: +971 (0) 2 4080100 Fax: +971 (0) 2 4080604 • www.adnic.ae • Toll free: 800 8040 بالمائين المحافية +971 (0) 2 4080604 • (2000 Fax: +971 (0) 2 4080100 Fax: +971 (0) 4 4080 Fax: +971 (0) 4080 Fax: +971



#### 3. The Candidate's Work Experience

#### 4. The Candidate's Academic Qualifications

## 5. Interests with ADNIC (mark where applicable)

i. Does the candidate or or any of his/her Relatives (father, mother, brother, sister, children, spouse, father-in-law, mother-in-law and children of the spouse) have any direct or indirect interests with ADNIC (previous or current)?

|     | Yes No   |  |  |  |
|-----|--|--|--|--|
|     | If yes, please provide full details below:   |  |  |  |
|     |  |  |  |  |
|     |  |  |  |  |
| ii. | i. Does the candidate have or participate in any business that competes or may compete<br>with ADNIC's business? |  |  |  |
|     | Yes No   |  |  |  |

If yes, please provide full details below:

P.O.Box 839 - Abu Dhabi, U.A.E. Tel: +971 (0) 2 4080100 Fax: +971 (0) 2 4080604 • www.adnic.ae • Toll free: 800 8040 من 10 التحايين المتاديب (0) 2 4080604 من 10 التحايين (0) توليغ المتحدة - معانية (0) توليغ المتحدة - معانية (0) توليغ المتحدو من من (0) من (0) تحديلاته. شركة مساهمة عامة تأسست عام 1972 ورأسمالها المدفوع 2070,7084 لوهم ورقم القيد لد م هيئة التأمين: (1) تاريخ 40/0710 حواضعة للاكام القانون الاتحاد مي قم (0) سنة 2070,000 وعديلاته. Public Joint Stock Company estabilished in 1972 with Paid μa Cpatiel of AED 570,000,000 and licensed by the Insurance authority under No. (0) add subject to the Federal Law No. (6) of 2007 (as anended).



| iii. | Does the candidate carry out the operations of an insurance agent or insurance broker?  |
|------|---|
|      | Yes No  |
|      | If yes, please provide full details below:  |
|      |   |
|      |   |
| iv.  | Did the candidate or any of his/her Relatives, work as Staff of the Company, or its subsidiaries during the past two (2) years?   |
|      | Yes No  |
|      | If yes, please provide full details below:  |
|      |   |
|      |   |
|      |   |
| v.   | Did the candidate work for, or is a partner, in a company that performs consulting works for the Company or its Group or he/she has acted in such capacity during the past two (2) years? |
|      | Yes No  |
|      | If yes, please provide full details below:  |
|      |   |
|      |   |
|      |   |
| vi.  | Did the candidate have any personal services contracts with the Company or its Group during the past two (2) years?   |
|      | Yes No  |
|      | If yes, please provide full details below:  |
|      |   |
|      |   |
|      |   |



| <b>vii.</b> Has the candidate been affiliated with any non-profit organisation that receives funding from the Company or its Group?   |
|---|
| Yes No  |
| If yes, please provide full details below:  |
|   |
| viii. Does the candidate and/or any of his/her Relatives (individually or collectively) own directly or indirectly 10% or more of the Company's capital or is a representative of a shareholder who owns directly or indirectly more than 10% of the Company's capital? |
| Yes No  |
| If yes, please provide full details below:  |
|   |
|   |
| ix. Have the candidate or any of his/her Relatives, been a partner or employee of the Company's auditor during the past two (2) years?  |
| Yes No  |
| If yes, please provide full details below:  |
|   |
|   |
| 6. Current Membership in the Boards of Directors of other Public Listed Companies in the UAE  |
| 1.  |
| 2.  |
| 3.  |
| 4.  |
| 5.  |

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## 7. Current Membership in the Boards of Directors of other Companies in the UAE.

| 1. |  |  |
|----|--|--|
| 2. |  |  |

#### 8. Attachments

- 1. Comprehensive curriculum vitae of the candidate.
- 2. Copy of the EID of the candidate.
- 3. Copy of passport of the candidate.
- 4. Coloured photograph (passport size with white background).
- 5. Complete Family Book.
- 6. No objection/National Service Letter from the UAE Ministry of Defense for UAE Citizens under the age of forty (40).
- 7. Copies of previous employments Certificates.
- 8. Copies of the attested academic qualifications certificates.
- 9. Valid certificate of good conduct (Police Clearance) addressed to the Central Bank of UAE.
- 10. A signed acknowledgment of the candidate's commitment to the provisions of the applicable laws and regulations, and to exercise the care of the keen person in the performance of his/her work.
- 11. Any other information or documents that may be requested by the Company or by the Central Bank of UAE.

#### 9. Ratification of Information & Signature

I, the undersigned, confirm the accuracy of the information contained in this application form, and declare my full knowledge of the nomination criteria and conditions to the membership of the Board of Directors of the Company as announced by the Company through its website (https://www.adnic.ae/web/guest/investor-relations), and grant the Company's Nomination and Remuneration Committee full authority to exclude this application if:

- 1. Any of the information contained in this application is inaccurate or incomplete;
- 2. Any of the documents mentioned under Section 8 (Attachments) is not submitted during the Board of Directors nomination period;
- 3. My candidacy or nomination does not comply with all nomination criteria listed above;
- 4. My nomination to membership to the Board of Directors of the Company violates the provisions of the law or the Company's Articles of Association; or
- 5. If this application form or the undertaking attached to this application form is not duly signed.

| Name | Signature |
|------|-----------|
| Date |           |



#### Candidate for the Board Membership Undertaking

I, the undersigned, hereby accept the nomination for the Board membership of Abu Dhabi National Insurance Company PJSC, and to abide fully by the provisions of the Federal Decree-Law No. (32) of 2021 concerning the Commercial Companies, the Federal Law No. (48) of 2023 Regulating Insurance Activities, the Corporate Governance Regulations for Insurance Companies Standards issued by the Central Bank of the United Arab Emirates (CBUAE) and its accompanying Standards, the Fitness and Proprietary Regulation issued by the CBUAE and its accompanying Standards, and SCA Resolution No. (3/Chairman) of 2020 concerning Approval of Joint Stock Companies Governance Guide (as amended), as well as all Regulations, Instructions and Resolutions issued by virtue of any of them and any amendments thereto, in addition to my commitment to comply fully with the Company's Articles of Association. Further, I hereby acknowledge that I will spend diligent effort at work and that I have not been convicted for breach of honour, trust or public moral or declared bankrupt by court.

| Name | Signature |
|------|-----------|
| Date |           |

ص.ب: 1939 - أبو ظبي، الإمارات العربية المتحدة - هاتف: 1971 (a) 2 4080100 Fax: +971 (b) 2 408010Fax: +971 (b) 2 4080100 Fax: +