



Rules for assessment of suitability of the PZU SA Supervisory Board and Audit Committee

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Chapter 1 General provisions

§ 1

Scope and coverage

The rules for assessment of suitability of the PZU SA Supervisory Board and Audit Committee, hereinafter referred to as “the Rules”, define the rules and methodology of the primary Suitability Assessment of Supervisory Board and Audit Committee member candidates, secondary Suitability Assessment of Supervisory Board and Audit Committee members, and a collective Suitability Assessment of the PZU SA Supervisory Board and Audit Committee.

§ 2

Definitions

The terms and abbreviations used in these Rules have the following meanings:

- 1) **BCM** - Compliance Department; an organization unit within the PZU’s structure, which is responsible, among others, for systemic management of compliance risk, including compliance of the Company with the law, internal regulations and accepted standards of conduct, systemic oversight over the function of compliance with the law in accordance with the Solvency II Directive and the KNF’s guidelines or recommendations, as well as cooperation with the regulator;
- 2) **BZA** –Management Board Office; an organizational unit within the PZU’s structure, which is responsible, among others, for providing corporate services to the Management Board and the Supervisory Board of PZU;
- 3) **Form** – Suitability Assessment form filled out by the Person Being Assessed in the suitability assessment process; a template of the Form is published on the PZU’s website;
- 4) **KNF** – Polish Financial Supervision Authority;
- 5) **Nomination and Compensation Committee** – a committee appointed and functioning within the PZU Supervisory Board;
- 6) **Competencies** – the knowledge (resulting from education of the Person Being Assessed, training, certifications or professional levels and otherwise acquired during the professional career), experience (acquired by performing specific functions or holding specific positions) and skills required to perform the function;
- 7) **Commercial Company Code** – the Commercial Company Code Act of 15 September 2000;
- 8) **Methodology** – the Methodology for assessing suitability of the members of the corporate bodies of regulated entities, developed by KNF and available on KNF’s website;
- 9) **Independence of a Supervisory Board member** – a situation, in which the independence requirements set out in the PZU Articles of Association are satisfied and there are no links or relations of the Person Being Assessed with PZU or PZU Management Board that have or even may have influenced the objective and balanced assessment of PZU’s situation by a PZU Supervisory Board member when exercising oversight over the activity of PZU and therefore would restrict his or her capacity to make decisions independently;
- 10) **Independence of Judgment** – a pattern of behavior required of all Supervisory Board members to ensure that they are actively engaged in their duties, make their own reasonable, objective and independent decisions and opinions in the performance of their duties as Supervisory Board members; this includes any issues relating to potential or already existing conflicts of interest, as well as the behavioral traits and skills of the persons being assessed, which are manifested in their behavior, such as courage, assertiveness, ability to ask the correct questions, challenging decisions in a constructive manner, ability to make their own reasonable, objective and independent decisions and opinions, and to engage in constructive discussion;
- 11) **Suitability Assessment** – an assessment conducted in order to find whether the Person Being Assessed or the body meets the requirement of suitability, in particular whether he/she/it has adequate Competencies, gives an Assurance of the proper performance of the assigned responsibilities, commits sufficient time to the assigned responsibilities and whether he/she/it meets the criterion of the Independence of Judgment;
- 12) **Person Being Assessed** - candidate for Supervisory Board member, candidate for Audit Committee member, Supervisory Board member, Audit Committee member;
- 13) **Assessing Body** - respectively:
 - a) Shareholder Meeting, in the case of PZU SA Supervisory Board members, except in the case specified in letter b,

- b) State Treasury, as regards assessing the individual suitability of a Supervisory Board member prior to his or her appointment to the Supervisory Board, either for the first time or for another term of office, on the basis of the statement referred to in § 20(7) of the Articles of Association,
 - c) Supervisory Board, in the case of Audit Committee members;
- 14) **PZU** – Powszechny Zakład Ubezpieczeń Spółka Akcyjna with its registered office in Warsaw;
- 15) **Reputation** – observance of professional standards of ethics and integrity;
- 16) **Assurance** – the attribute of professionalism and impeccable character, understood as good repute, personal traits, ethical standards, including past conduct, honesty and integrity of a person and the ability to perform assigned duties in a prudent and stable manner;
- 17) **Training** – actions elevating the level of skills, knowledge or competence of Supervisory Board members in a continuous or one-off manner;
- 18) **Act** – Act of 11 September 2015 on Insurance and Reinsurance Activity;
- 19) **Act on Statutory Auditors** – Act of 11 May 2017 on Statutory Auditors, Audit Firms and Public Supervision;
- 20) **Attachment** – a questionnaire constituting part of the Form, to be filled out by the Person Being Assessed in the Suitability Assessment process; a template of which is published on the PZU’s website;
- 21) **Proportionality Principle** – the principle according to which the organization and functioning of the PZU Supervisory Board should be adapted to the specifics of PZU’s business, including the nature of the business (legal form and line of business), the scale of business (including the number of contracts, the number of the insured, the amount of technical provisions or written premium, the number of employees, the position of PZU in the financial sector) and the complexity of its activities (including the number and complexity of insurance products it offers).

Chapter 2

Types of Suitability Assessment

§ 3

Types of Suitability Assessment and prerequisites for conducting it

1. Suitability Assessment consists of:
 - 1) **the primary individual Suitability Assessment, which is conducted:**
 - a) before a person is appointed as a Supervisory Board member,
 - b) before a Supervisory Board member is appointed to the Audit Committee, to verify fulfillment of the criteria for Audit Committee members,
 - c) before submitting of a motion to change the geographic range or the line of business of PZU, in case of simultaneous changes in the composition of the Supervisory Board,
 - d) in connection with PZU receiving information about the filing of a notice of intention to purchase a qualified stake in PZU (under Article 82 of the Act) or to become the parent company of PZU (in case of simultaneous changes planned in the composition of the Supervisory Board);
 - 2) **the secondary individual Suitability Assessment, which is conducted:**
 - a) periodically, at least once a year, while this assessment also includes the assessment of Audit Committee members,
 - b) in the event of a significant change of PZU’s corporate governance rules affecting the content of the Suitability Assessment criteria or assessment of their fulfillment,
 - c) before a Supervisory Board member is appointed for the next term of office of the Supervisory Board,
 - d) in the event of a change in statutory or regulatory requirements regarding the function of a Supervisory Board member or an Audit Committee member,
 - e) in the event that circumstances come to light which may affect Suitability Assessment, especially in the event of identified cases of: potential conflict of interest, criminal charges or charges in proceedings for fiscal offenses or causing significant financial losses or substantial breach of the responsibilities by Supervisory Board members, in particular in respect to Reputation,
 - f) in the situation when a Supervisory Board member is given additional competencies or takes on additional functions and positions outside of PZU, provided that in such a case the assessment is made only with respect to sufficient time commitment and occurrence of a conflict of interest,
 - g) in case of regular or flagrant instances of negative secondary assessment, whether individual or collective, of Management Board members, providing that in such a case the assessment is made only with respect to the Assurance given by Supervisory Board members in terms of appointing or keeping

such persons in the Management Board;

- 3) **collective Suitability Assessment of the Supervisory Board, which is conducted:**
 - a) before the Supervisory Board is appointed for a new term of office, irrespective of whether the composition of the Supervisory Board has changed,
 - b) in connection with PZU receiving information about the intention to purchase a qualified stake in PZU (under Article 82 of the Act) or to become the parent company of PZU – in case of simultaneous changes planned in the composition of the Supervisory Board;
 - c) before any changes are made in the composition of the Supervisory Board, in particular changes involving appointment, dismissal, resignation or suspension of members (or immediately after those changes, if for reasons beyond the control of PZU the assessment could not have been made earlier, in particular when a Supervisory Board member tenders his/her resignation with immediate effect),
 - d) in the event of a significant change in the PZU's business model, risk appetite or risk strategies or a significant change in the organizational structure of PZU, as referred to in § 2 section 2 of PZU's Articles of Association or at the level of the PZU group, understood as a disposal or acquisition of regulated entities, within the meaning of the Act of 21 July 2006 on Supervision over the Financial Market,
 - e) in the event that any circumstances come to light that may affect the collective Suitability Assessment of the Supervisory Board,
 - f) in the event of a significant change of PZU's corporate governance rules affecting the content of the Suitability Assessment criteria or assessment of their fulfillment,
 - g) in the event of a significant change of Suitability Assessment of individual Supervisory Board members;
 - 4) **collective Suitability Assessment of the Audit Committee, which is conducted:**
 - a) upon appointment and any change in the composition of the Audit Committee, in which case the Suitability Assessment is conducted to verify whether an appropriate number of Audit Committee members meet the independence criteria referred to in the Articles of Association and have the knowledge and skills in accounting or auditing of financial statements and in the insurance industry, including relevant education,
 - b) in the event of a significant change of Suitability Assessment of individual Audit Committee members,
 - c) in the event that any circumstances come to light that may affect the collective Suitability Assessment of the Audit Committee.
2. If more than one prerequisite triggering the necessity of conducting the Suitability Assessments mentioned in sec. 1 arise simultaneously, the Suitability Assessment type with the widest scope should be conducted.
 3. If a secondary Suitability Assessment is triggered by an event referred to in sec. 1 item 2(f) or (g) then the Assessing Body will focus on assessing the situation or event that triggered the Suitability Assessment, i.e. if certain aspects have not changed since the previous Suitability Assessment, they may be omitted from that Suitability Assessment.
 4. The Suitability Assessment of Supervisory Board member candidates, Supervisory Board members and the Supervisory Board is conducted immediately, no later than on the date of the next Shareholder Meeting.
 5. Persons subject to the Suitability Assessment are obliged to notify the Assessing Body of any changes in the fulfillment of the suitability criteria in the Rules.
 6. The assessment of the individual suitability of a Supervisory Board member prior to appointment on the basis of the statement referred to in § 20 sec. 7 of the PZU SA Articles of Association is made by the State Treasury. The provisions of the Rules with respect to the assessment referred to in the first sentence shall apply accordingly.

§ 4

Competencies in the Suitability Assessment process

1. The Shareholder Meeting:
 - 1) adopts and amends the Rules;
 - 2) conducts an individual Suitability Assessment of Supervisory Board member candidates, Supervisory Board members and a collective Suitability Assessment of the Supervisory Board, pursuant to the report referred to in § 17.
2. The Supervisory Board:
 - 1) conducts an individual Suitability Assessment of Audit Committee member candidates, Audit Committee

- members and a collective Suitability Assessment of the Audit Committee;
- 2) approves the proposed individual Suitability Assessment of Supervisory Board member candidates, Supervisory Board members and a collective Suitability Assessment of the Supervisory Board prepared by the Nomination and Compensation Committee;
- 3) cooperates with the KNF in respect to the implementation of the Rules.
- 3. The Nomination and Compensation Committee:
 - 1) analyzes the documentation required to conduct the Suitability Assessment;
 - 2) proposes the primary individual Suitability Assessment of candidates for Audit Committee and Supervisory Board members, the secondary individual Suitability Assessment of Audit Committee and Supervisory Board members, and the collective Suitability Assessment of the Audit Committee and Supervisory Board and submits them to the Supervisory Board;
 - 3) cooperates with the Assessing Body and the KNF in respect to the implementation of the Rules.
- 4. The Management Board deploys the Rules and cooperates with the KNF in respect to their implementation.
- 5. BZA:
 - 1) provides explanations to and assists Persons Being Assessed in completing the Forms and Attachments;
 - 2) verifies the completeness of the completed Forms and Attachments;
 - 3) provides the necessary Training for Supervisory Board and Audit Committee members;
 - 4) archives documents related to the implementation of the Rules.
 - 5) cooperates with the Assessing Body and the KNF in respect to the implementation of the Rules;
 - 6) in consultation with BCM, updates the templates of the Forms and Attachments, publishes them on the PZU website and promptly informs the Supervisory Board of any such change.
- 6. BCM corresponds with the KNF with respect to the implementation of the Rules and provides the KNF with information on the current composition of the Supervisory Board and results of the Suitability Assessment after it receives information or documents from BZA.

Chapter 3

Adequate composition of the Supervisory Board and Audit Committee

§ 5

Composition of the Supervisory Board and Audit Committee

1. The composition of the Supervisory Board and the Audit Committee is appointed in such a way as to enable them to exercise professional supervision over the activities of PZU, in accordance with their competencies, and to provide effective support to the Management Board and to act in a proper manner.
2. Members of the Supervisory Board and the Audit Committee should have the knowledge, skills and professional experience that are necessary for the proper performance of the tasks assigned to the Supervisory Board or the Audit Committee, taking into consideration the requirements stemming from the applicable law and the PZU Articles of Association.
3. Members of the Supervisory Board should offer an Assurance of proper performance of the assigned tasks and responsibilities; this refers in particular to their Reputation and ability to perform the assigned tasks and responsibilities in a proper, prudent and stable manner.
4. During recruitment for the Supervisory Board, candidates should be proposed who, due to their integrity, ethics, willingness to work, independence and character traits, are able to duly perform the responsibilities of a Supervisory Board member and uphold the public image of PZU.

Chapter 4

Suitability Assessment criteria

§ 6

Suitability Assessment criteria - catalog

A primary or secondary individual Suitability Assessment includes the process of reviewing Supervisory Board member candidates and Supervisory Board members based on the following criteria:

- 1) Competencies;
- 2) Assurance, including Reputation and credibility;
- 3) Independence of a Supervisory Board member;
- 4) Independence of Judgment, including lack of conflicts of interest and commitment of sufficient time to perform the function of a Supervisory Board member.

§ 7

Competencies

1. A Supervisory Board member candidate and a Supervisory Board member should have appropriate education, in particular in the area of insurance, banking or finance, economics, law, accounting, auditing, management, mathematics, physics, information technology, administration, financial regulations, information technology and quantitative methods. It is important that the person being assessed has specific professional certifications, in particular certificates of an actuary, auditor, investment advisor, legal advisor or advocate.
2. For those, whose educational profile has no direct application on their position, their education should be complemented by appropriate postgraduate studies or specialist courses.
3. An appropriate level of knowledge, skills and experience to ensure effective performance of supervisory functions may be acquired in relevant academic or administrative positions, or by managing, supervising or controlling financial institutions or other undertakings, running a business activity, providing consulting services, being employed – in any form – in management positions. When assessing the appropriate level of knowledge, skills and experience of a Supervisory Board member candidate and a Supervisory Board member, the Assessing Body will take into account in particular the candidate's theoretical and practical experience in:
 - 1) the functioning of the insurance market and other financial markets;
 - 2) legal requirements and regulatory framework for the functioning of PZU;
 - 3) strategic planning, understanding of the business strategy and its implementation;
 - 4) financial and actuarial analysis;
 - 5) risk management;
 - 6) financial reporting and auditing;
 - 7) assessing the effectiveness of the institution's policies ensuring effective management, supervision and control;
 - 8) interpretation of PZU's financial information, identification of key issues based on this information and appropriate controls and measures;
 - 9) knowledge of the Polish language since it is important in order to perform the duties in an effective and independent manner, including in particular independent acquisition of information that may have a significant impact on the functioning of PZU.
4. When assessing the appropriate level of knowledge, skills and experience of a Supervisory Board member candidate and a Supervisory Board member, the Assessing Body will also consider the "soft" skills, including such behavioral skills as: authenticity, language, decisiveness, communication, judgment, quality focus, leadership skills, loyalty, external awareness, negotiation skills, persuasion, teamwork, strategic skills, resistance to stress, sense of responsibility and chairing of meetings.
5. The prerequisites referred to in sections 1-4 are assessed collectively, i.e. all the prerequisites for assessment are interrelated and must be considered together.

§ 8

Assurance

1. The term "Assurance" incorporates the totality of features, predispositions, events and circumstances pertaining to the Person Being Assessed, constituting his/her credibility. A review of this criterion allows for a prognosis regarding the future behavior of the Person Being Assessed in the context of his/her performance of their function in a manner that guarantees that PZU's activities will be conducted in accordance with the law, best practices and professional ethics principles.
2. The Assurance criterion involves in particular the evaluation of good repute and whether the past conduct of the Person Being Assessed allows for the expectation that he/she would perform their duties honestly and with integrity, and takes into account any instances of prohibition of holding managerial positions in companies, bankruptcy, remedial and liquidation proceedings, discharges granted or not granted, application of supervisory measures or other administrative sanctions, in the event of a failure to satisfy the assigned responsibilities of conducting affairs.
3. A Supervisory Board member candidate or a Supervisory Board member is deemed to be of good repute and Reputation if there are no objective and demonstrable grounds to the contrary.
4. When examining the prerequisite of Assurance of proper performance of duties, at the least the factors specified in the provided Forms and Attachments should be taken into account, in particular criteria such as:

- 1) good behavior;
 - 2) Reputation (including other sanctions and measures applied and good repute);
 - 3) financial standing of the person being assessed (affecting his/her susceptibility to any pressures or increasing the propensity to accept excessive risk);
 - 4) Independence of Judgment, including behavioral traits and conflicts of interests.
5. The following may be taken into account in the assessment of good repute and Reputation:
- 1) relevant criminal and administrative records, taking into account the type of conviction or charges, the role played by the person, the penalty imposed, the stage reached in the judicial process, and the corrective measures taken, as well as the accompanying circumstances, including mitigating factors, the severity of the offense in question, the administrative or supervisory action, the time that has elapsed since the offense was committed, the conduct of the Person Being Assessed since the offense was committed or the action was taken, and the association of the offense or action with the function performed by the Person Being Assessed;
 - 2) evidence indicating that the Person Being Assessed failed to act transparently and openly, or failed to cooperate in dealing with the KNF, the auditor, or the judicial bodies;
 - 3) refusal to grant, revocation, withdrawal or cancellation of registration, permit, membership or license to conduct commercial, business or professional activities;
 - 4) reasons for termination of employment or similar legal relationship (employment relationship), and the employer's request for resignation from such position;
 - 5) exclusion by a competent corporate body from acting as a Supervisory Board member;
 - 6) other evidence indicating that a person acts in a manner inconsistent with professional standards of conduct.
6. The assessment of Reputation of the Person Being Assessed includes also the current and past financial standing of the Person Being Assessed, because of its potential impact on the person's Reputation, honesty and integrity and ability to conduct PZU's affairs, taking into account in particular:
- 1) declaration of bankruptcy of an entity in which the Person Being Assessed serves or has served on the management or supervisory board, or dismissal of a bankruptcy petition on the grounds that the debtor's assets were insufficient to cover the costs of the proceedings, and whether and how the Person Being Assessed contributed to the situation that led to the proceedings;
 - 2) declaration of bankruptcy of the Person Being Assessed, including consumer bankruptcy, or dismissal of a bankruptcy petition on the grounds that the debtor's assets were insufficient to cover the costs of the proceedings;
 - 3) the Person Being Assessed appearing in debtors registers;
 - 4) the Person Being Assessed appearing as a party in court proceedings, whose result had a negative impact on the financial situation of the Person Being Assessed.
7. When assessing the performance of assigned duties by Supervisory Board members the following in particular is taken into account:
- 1) managing and monitoring the composition of the Management Board in a manner that considers the individual and collective suitability requirements and the need to ensure efficient succession and continuity of operation of the Management Board;
 - 2) fulfilling obligations arising out of the Commercial Company Code, including election of Management Board members;
 - 3) evaluation the financial statements (including the balance sheet and the profit and loss account) for the previous financial year in terms of their compliance with the ledgers and documents and with the facts;
 - 4) evaluating the Management Board report on the Company's activity and the Management Board motions on distribution of profit (coverage of losses);
 - 5) suspending individual or all Management Board members in their duties for important reasons and taking action to supplement the composition of the Management Board;
 - 6) delegating Supervisory Board members to temporarily (for up to 3 months) perform duties of Management Board members who cannot carry out their activities;
 - 7) convening the Shareholder Meeting (in the situations referred to in particular in Article 399 § 2 of the Commercial Company Code);
 - 8) supervising and monitoring the operation of the governance system;
 - 9) supervising the risk management system;
 - 10) supervising over and verifying the actions taken by the Management Board in relation to the results and internal audit recommendations;

- 11) supervising the functioning of information technology and ICT environment security areas;
 - 12) supervising over the insurance product development process;
 - 13) approving the solvency and financial condition report;
 - 14) selecting an audit firm to conduct a statutory audit, provided that the Supervisory Board is the selecting body referred to in Article 130 sec. 2 of the Act on Statutory Auditors.
8. When assessing the performance of assigned duties by Audit Committee members, in particular the performance of duties arising out of the Act on Statutory Auditors is considered, including:
- 1) monitoring of the financial reporting process, effectiveness of internal control systems, risk management systems and internal audit, including in the area of financial reporting; performing financial audit activities, in particular conducting the audit by the audit firm, taking into account the findings and conclusions of the Polish Audit Supervision Agency following from an inspection carried out in the audit firm;
 - 2) controlling and monitoring the independence of a statutory auditor and an audit firm, especially in the event that other services besides an audit are rendered in favor of PZU;
 - 3) advising the Supervisory Board of the audit's findings and clarifying how this audit has contributed to the accuracy of financial reporting in PZU and also the role played by the Audit Committee in the audit process;
 - 4) assessing the independence of a statutory auditor and consenting for it to render non-audit services in PZU;
 - 5) devising a policy for selecting the audit firm to conduct an audit;
 - 6) devising a policy for entities related to the audit firm conducting an audit and a member of an audit firm's network to render permitted non-audit services;
 - 7) defining the procedure for PZU to select an audit firm;
 - 8) submitting recommendations to the Supervisory Board on the possibility of entrusting the audit to two audit firms, which includes identification of one of them, with a justification, as the preferred one, which is proposed to perform the statutory audit;
 - 9) submission of recommendations intended to ensure the reliability of the financial reporting process at PZU.

§ 9

Independence of a Supervisory Board member

When selecting the composition of the Supervisory Board, the Shareholder Meeting ensures an appropriate number of independent members, taking into account the requirements arising out of the Proportionality Principle and the independence requirements set out in the PZU Articles of Association.

§ 10

Independence of Judgment and commitment of sufficient time to perform the function of a Supervisory Board member

1. A Supervisory Board member candidate and a Supervisory Board member is obliged to actively engage in their duties and to formulate their own correct, reasonable, objective and independent decisions and opinions in performance of their functions and duties and, if necessary, to criticize in a constructive manner the decisions made by the Management Board.
2. An examination of Independence of Judgment should include the past and present conduct of the Supervisory Board Member and a verification that the Supervisory Board member:
 - 1) has the necessary behavioral skills, including:
 - a) the courage, conviction and strength to effectively assess and challenge decisions, opinions and positions proposed by other Supervisory Board members,
 - b) the ability to ask the right questions of Management Board members,
 - c) the ability to resist "groupthink";
 - 2) ability to avoid conflict of interest;
 - 3) compliance with the restrictions arising out of applicable provisions of law regarding the number of management board and supervisory board member functions held simultaneously.
3. When assessing the existence of a conflict of interest, the conflict of interest procedure applicable to the Supervisory Board should be taken into account.
4. A Supervisory Board member should commit sufficient time to the performance of the assigned duties, including an understanding of PZU's activities, its key risks and consequences arising from its activities and

its risk strategy, and should be able to fulfill his/her duties also in periods of particularly intensive activity.

5. The secondary assessment of a Supervisory Board member focusing on the sufficient time commitment should take into account the member's preparation for and participation in meetings of the Supervisory Board and its committees.

Chapter 5

Performance of Suitability Assessment

§ 11

Primary individual Suitability Assessment – scope

1. When conducting an individual assessment of a Supervisory Board member candidate or an Audit Committee member candidate, account should be taken of the traits and Competencies of the candidate that are important for ensuring the proper performance of tasks by the Supervisory Board or the Audit Committee, as well as adequacy of his/her knowledge, skills and experience for the function and the Assurance of the proper performance of this function.
2. An individual assessment includes:
 - 1) qualifications needed to perform the supervisory function;
 - 2) conduct of the Person Being Assessed, which impacts the reputation of PZU.

§ 12

Primary individual Suitability Assessment – formal requirements

1. A candidate for a Supervisory Board or Audit Committee member will submit to the BZA, with a lead time allowing for formal verification:
 - 1) a completed Form of primary individual Suitability Assessment of a Supervisory Board member candidate, in accordance with the template constituting Attachment 1 to the Rules and Attachments 1.1-1.10 to the Form;
 - 2) a completed Form of individual Suitability Assessment of an Audit Committee member, in accordance with the template constituting Attachment 2 to the Rules;
 - 3) documents confirming the information contained in the Form and Attachments.
2. BZA verifies the completeness of the Forms and Attachments. If any irregularities are found, BZA will promptly contact the candidate and demand appropriate changes or additions to be made to the contents of the Forms and Attachments.
3. In the event of the first appointment to the Supervisory Board, the shareholder proposing the candidate or the Supervisory Board member candidate should provide BZA with the Consent to candidacy, the template of which constitutes Attachment 1.10 to the Form, and any information and documents needed to conduct the Suitability Assessment of the candidate.
4. BZA will provide fully completed Forms and Attachments pertaining to the Person Being Assessed to the Nomination and Compensation Committee.
5. Upon every request of a candidate for a Supervisory Board or Audit Committee member, BZA will give explanations and assistance in completing the Form or Attachments.

§ 13

Secondary individual Suitability Assessment – scope

1. When conducting a secondary Suitability Assessment of a Person Being Assessed, account will be taken of the traits and Competencies of the Supervisory Board member are important for ensuring the proper performance of tasks by the Supervisory Board or the Audit Committee, as well as adequacy of his/her knowledge, skills and experience for the function and the Assurance of the proper performance of this function.
2. A secondary Suitability Assessment includes a determination whether the Person Being Assessed has the necessary qualifications to perform a function in the Supervisory Board or the Audit Committee and whether the conduct of the Person Being Assessed affects the reputation of PZU.
3. The secondary individual Suitability Assessment referred to in § 3 sec. 1 item 2(a) applies to the Supervisory Board members who discharge their function as at the date of the assessment by the Shareholder Meeting, and in the case of Audit Committee members as at the date of the assessment by the Supervisory Board.

4. The secondary individual Suitability Assessment includes in particular any changes in qualifications and other details, relative to the previous assessment periods.

§ 14

Secondary individual Suitability Assessment – formal requirements

1. A Supervisory Board Member will provide to BZA, for formal verification purposes:
 - 1) a completed Form of secondary Suitability Assessment of a Supervisory Board member, in accordance with the template constituting Attachment 3 to the Rules;
 - 2) documents confirming the information contained in the Form and Attachments, or
 - 3) a declaration that the documents, statements and information submitted as part of the previous Suitability Assessment have not changed.
2. An Audit Committee Member will provide to BZA, for formal verification purposes:
 - 1) a completed Form of primary Suitability Assessment of an Audit Committee member, in accordance with the template constituting Attachment 2 to the Rules; or
 - 2) a declaration that the documents, statements and information submitted as part of the previous Suitability Assessment have not changed.
3. For the purposes of the Suitability Assessment referred to in § 3 sec. 1 item 2 (a), the Forms, documents or declarations referred to in sec. 1 and 2 will be submitted by the Person Being Assessed, through BZA, to the Nomination and Compensation Committee by 31 March each year.
4. BZA verifies the completeness of the Forms and Attachments. If any irregularities are found, BZA will promptly contact the Person Being Assessed and demand appropriate changes or additions to be made.
5. BZA will provide fully completed Forms and Attachments pertaining to the Person Being Assessed to the Nomination and Compensation Committee.
6. Upon every request of the Person Being Assessed, BZA will promptly give explanations and assistance in completing the Form or Attachments.

§ 15

Collective Suitability Assessment – scope

1. The collective Suitability Assessment is to ensure that the Supervisory Board as a whole has, throughout the term of its office, an adequate level of knowledge, skills and experience to understand the activities undertaken by PZU, including the key risks, and in particular that the Supervisory Board:
 - 1) has, as a whole, appropriate qualifications, experience and knowledge of at least: insurance and financial markets, strategy and business model, governance system, financial and actuarial analysis, legal framework and requirements in which PZU operates, corporate governance in effect in PZU;
 - 2) has, as a whole, adequate Competencies in evaluating PZU's activities in order to be able to properly assess the composition of the Management Board, including candidates for Management Board member;
 - 3) is able to make appropriate supervisory decisions regarding PZU's business model, risk appetite, strategy, and the markets on which PZU operates;
 - 4) has the relevant knowledge required for operating on the insurance and other sectors of the financial market among the Supervisory Board members to be able to discuss the decisions being made, and that the composition of the Supervisory Board allows the Audit Committee to be selected from among its members;
 - 5) has the ability to monitor and, if necessary, challenge the actions of the Management Board.
2. The template of the Form of collective Suitability Assessment of the Supervisory Board constitutes Attachment 4 to the Rules.
3. The collective Suitability Assessment of the Audit Committee serves the purpose of verifying whether the Audit Committee as a whole has, throughout its term of office, an appropriate level of knowledge, skills and experience. The template of the Form of collective Suitability Assessment of the Audit Committee constitutes Attachment 5 to the Rules.
4. The Forms referred to in sections 2 and 3 are completed on the basis of information provided pursuant to § 12 sec. 1 and § 14 sec. 1 and 2.

§ 16

Processing of personal data by PZU

The personal data of the Persons Being Assessed is processed on the basis of the legitimate interest of PZU (Data Controller) or on the basis of legal regulations for the purposes stated in the Data Controller's Disclosures

for candidates and members of PZU's bodies, which constitutes an attachment to the Consent to candidacy referred to in § 12 sec. 3.

§ 17

Suitability Assessment

1. A Suitability Assessment is conducted on the basis of documents, submitted declarations and information provided by the Person Being Assessed, taking into account the requirements arising from generally binding provisions of law, the Articles of Association, the Rules and the Methodology, to the extent described in the Rules.
2. The Nomination and Compensation Committee proposes an individual Suitability Assessment of a candidate for an Audit Committee and Supervisory Board member, of an Audit Committee and Supervisory Board member, and a collective Suitability Assessment of the Audit Committee and Supervisory Board and submits such proposals to the Supervisory Board along with the Forms and Attachments.
3. The Supervisory Board, in the form of resolution:
 - 1) conducts a Suitability Assessment of an Audit Committee member candidate, an Audit Committee member and a collective Suitability Assessment of the Audit Committee;
 - 2) approves the proposed Suitability Assessment of a Supervisory Board member candidate, a Supervisory Board member and the collective Suitability Assessment of the Supervisory Board provided by the Nomination and Compensation Committee under sec. 2.
4. In the case of an individual Suitability Assessment, the Supervisory Board or Audit Committee member, to whom the assessment pertains, does not participate in making the decisions referred to in sec. 2 and 3.
5. The Chairperson of the Nomination and Compensation Committee or a Nomination and Compensation Committee member authorized by him/her will sign the Forms and Attachments relating to the Assessments referred to in sec. 3 item 1. The chairperson of the Supervisory Board or the Supervisory Board member authorized by him/her will sign the Forms and Attachments relating to the Assessments referred to in sec. 3 item 2.
6. The Supervisory Board will provide the Shareholder Meeting, in the form of a report, with the proposed Suitability Assessments referred to in sec. 3 item 2.

§ 18

Suitability Assessment results

1. A Suitability Assessment may be:
 - 1) positive;
 - 2) positive with a recommendation;
 - 3) negative.
2. Appointment of a Supervisory Board member candidate to the Supervisory Board by the Shareholder Meeting is understood as a positive assessment made by the Shareholder Meeting.
3. If a Suitability Assessment is positive with a recommendation, the corrective measures that should be taken and the deadline for their implementation should be specified. Appropriate corrective measures may include, in particular: taking measures to minimize conflicts of interest, organizing Training for individual members or organizing Training for the Supervisory Board or Audit Committee as a whole to ensure individual and collective suitability of the Supervisory Board or the Audit Committee.
4. If the primary initial Suitability Assessment conducted before appointment to the Supervisory Board is negative with respect to Assurance then the Supervisory Board member candidate will not be appointed to the Supervisory Board.
5. If a Suitability Assessment identifies deficiencies in the Supervisory Board members' level of knowledge, skills or experience of the that are easy to remedy, PZU will take appropriate action to remedy the deficiencies within the specified timeframe.
6. Any deficiencies identified in relation to Assurance will not be remedied.
7. If an individual Suitability Assessment of a Supervisory Board or Audit Committee member is negative then the Shareholder Meeting or the Supervisory Board, respectively, will take the necessary actions to ensure individual suitability; in particular it may issue recommendations regarding Training for the member or all members of the Supervisory Board or the Audit Committee, or it may dismiss the Supervisory Board or Audit Committee member.
8. If the collective Suitability Assessment of the Supervisory Board or the Audit Committee is negative then the

Shareholder Meeting or the Supervisory Board, respectively, will take the necessary actions to ensure suitability of those bodies; in particular it may issue recommendations regarding Training, a change in procedures, take measures to minimize the conflict of interest, appoint additional members with appropriate Competencies, or make changes in the Supervisory Board or the Audit Committee.

§ 19

Archiving of Suitability Assessment

1. BZA archives the Forms, Attachments and documents confirming the information contained in the Form and Attachments, as well as Suitability Assessment results. Archiving covers the period of at least 5 years starting from the date when a Supervisory Board member ceases to perform his/her function.
2. On every request, BZA will promptly make the documents referred to in sec. 1 available to the Supervisory Board, the Nomination and Compensation Committee or the Audit Committee.

§ 20

Notification to KNF

1. In the instances set forth in the Methodology, PZU will provide the results of the Suitability Assessment to KNF.
2. When so requested by KNF, PZU will promptly provide additional information, according to the scope of KNF's request, necessary for the assessment of individual suitability of Supervisory Board members and the assessment of collective suitability of the Supervisory Board, including in particular Forms and Attachments.

Attachments:

Attachment 1: Form of primary individual suitability assessment of a Supervisory Board member candidate

- Attachment 1.1 – Education;
- Attachment 1.2 – CV;
- Attachment 1.3 – Biographical note;
- Attachment 1.4 – Competencies;
- Attachment 1.5 – Good behavior;
- Attachment 1.6 – Assurance;
- Attachment 1.7 – Financial standing and conflict of interests;
- Attachment 1.8 – Combination of functions
- Attachment 1.9 – Time commitment;
- Attachment 1.10 – Consent to candidacy

Attachment 2: Form of individual suitability assessment of an Audit Committee member

Attachment 3: Form of secondary individual suitability assessment of a Supervisory Board member

- Attachment 3.1 – Education;
- Attachment 3.2 – Competencies;
- Attachment 3.3 – Good behavior;
- Attachment 3.4 – Assurance;
- Attachment 3.5 – Financial standing and conflict of interests;
- Attachment 3.6 – Combination of functions
- Attachment 3.7 – Time commitment;

Attachment 4: Form of collective suitability assessment of the Supervisory Board

Attachment 5: Form of collective suitability assessment of the Audit Committee

Original individual assessment form – Supervisory Board

SECTION 1 – to be completed by the candidate

1. Candidate information

1.	First name:	
2.	Last name:	
3.	Place of birth:	
4.	Date of birth:	
5.	Citizenship:	

- I have the full capacity to execute legal acts.
- I consent to take the position specified in part II of this form.
- I have reviewed the data controller's information for candidates and members of PZU SA's corporate bodies

Date and signature of the candidate:

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SECTION 2 – To be completed by the entity conducting the assessment	
6. Information on the target position	
1. Name / business name of the entity:	
2. Corporate body and position:	Supervisory Board, Supervisory Board member
3. Scope of liability:	
4. Assessment summary	
1. Competences – knowledge and experience: Attachment 1.1 Attachment 1.2 Attachment 1.3 Comments:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> not applicable <input type="checkbox"/> – education <input type="checkbox"/> – CV <input type="checkbox"/> – description of an item in the CV (... counterparts)
2. Competences – skills: Attachment 1.4 Comments:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> not applicable <input type="checkbox"/> – skills assessment
3. Competences – Polish language: Comments:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> not applicable
4. Assurance – good conduct: Attachment 1.5 Comments:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> not applicable <input type="checkbox"/> – good conduct
5. Assurance – reputation:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> not applicable

Attachment 1.6 Comments:	<input type="checkbox"/> – candidate's declarations
6. Assurance – independent view – conflict of interest and financial standing: Attachment 1.7 Comments:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> not applicable <input type="checkbox"/> – candidate's declarations
7. Assurance – independent view – behavioral attributes: Comments:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> not applicable <input type="checkbox"/> – assessment of independent view
8. Combination of positions: Attachment 1.8 Comments:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> not applicable <input type="checkbox"/> – assessment of combination of positions
9. Time commitment: Attachment 1.9 Comments:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> not applicable <input type="checkbox"/> – assessment of time commitment

10. Recommended actions	
1. Further to the assessment regarding the appointment of the candidate to the position, the following is recommended:	<input type="checkbox"/> appoint the candidate to the specified position <input type="checkbox"/> refrain from appointing the candidate until the actions specified in item 2 are taken <input type="checkbox"/> withdraw from appointing the candidate to the position
2. In respect of the identified deviations from the requirements or the candidate’s other weaknesses – the following remedial actions are recommended:	<input type="checkbox"/> in terms of the candidate’s education and skills – candidate may be directed to take additional courses / training sessions: <input type="checkbox"/> in terms of time commitment – implement solutions to make it possible for the candidate to ramp up his/her involvement <input type="checkbox"/> in terms of time commitment – implement solutions to reduce the scope of required involvement: <input type="checkbox"/> in terms of the number of positions held – candidate’s resignation from functions held concurrently: <input type="checkbox"/> in terms of a conflict of interest – eliminate the identified conflict of interest or introduce solutions to manage the conflict of interest: <input type="checkbox"/> other:
Date and signature of the entity’s authorized representative:	

Attachment 1.1 to the primary individual suitability evaluation form – Supervisory Board
EDUCATION OF THE CANDIDATE

SECTION 1 – to be completed by the candidate

I. Secondary schools completed¹				
No.	Name of school	Education profile	Year of graduation	Attachment – diploma
1				<input type="checkbox"/> (attachment no.)

II. Higher education completed				
1	Name of university/college:		Title obtained:	
	Department/organizational unit:		Mode:	<input type="checkbox"/> full-time <input type="checkbox"/> part-time (formerly: evening/extramural)
	Specialization:		Degree:	<input type="checkbox"/> 1st (bachelor/engineer) <input type="checkbox"/> 2nd (master)
	Additional information:		Year of graduation	
			Attachment – diploma	<input type="checkbox"/> (attachment no.)

III. Doctoral studies completed, academic titles and degrees				
1	Name of university/college:		Title obtained or academic degree:	
	Field/discipline:		Year of graduation or of obtaining the title/degree:	

¹ This item must be completed only for candidates without higher education.

Attachment 1.1 – Education

	Additional information:		Attachment – diploma	<input type="checkbox"/> (attachment no.)
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IV. Postgraduate studies completed, professional traineeships, certifications and other forms of supplementary education

1	Name of the institution organizing the training:		Subject:	
	Title/qualifications obtained:		Year of graduation:	
	Additional information:		Attachment – diploma:	<input type="checkbox"/> (attachment no.)

V. Specialist training completed

1	Name of the institution organizing the training:			
	Subject:		Year of graduation:	
	Additional information:		Attachment – diploma:	<input type="checkbox"/> (attachment no.)

VI. Special professional qualifications held

No.	Type of qualifications	Entry no.	Year of obtaining	Attachment – certificate
1				<input type="checkbox"/> (attachment no.)

Date and signature of the candidate:	
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SECTION 2 – To be completed by the evaluator			
VII. Educational requirements and evaluation			
No.	Requirement	Requirement status	Evaluation ²
1	Higher education ³ :	<input type="checkbox"/> required by law <input type="checkbox"/> required by the suitability policy <input type="checkbox"/> expected by the suitability policy <input type="checkbox"/> not required	<input type="checkbox"/> fulfilled <input type="checkbox"/> not fulfilled <input type="checkbox"/> waived due to:
2	Specialized education (specify) ⁴ :	<input type="checkbox"/> required by law <input type="checkbox"/> required by the suitability policy <input type="checkbox"/> expected by the suitability policy <input type="checkbox"/> not required	<input type="checkbox"/> fulfilled <input type="checkbox"/> not fulfilled <input type="checkbox"/> waived due to:
3	Other:	<input type="checkbox"/> required by law <input type="checkbox"/> required by the suitability policy <input type="checkbox"/> expected by the suitability policy <input type="checkbox"/> not required	<input type="checkbox"/> fulfilled <input type="checkbox"/> not fulfilled <input type="checkbox"/> waived due to:
Date and signature of the entity's authorized representative:			

² To be completed if in the field "requirement status" an option other than "not required" has been selected.

³ Select the option resulting from the suitability policy adopted by the entity, bearing in mind that, as a rule, members of corporate bodies in regulated entities are expected to have higher education.

⁴ Insurance sector – education should be commensurate with the tasks to be performed and the scope of responsibility.

**Attachment 1.2 to the primary individual suitability evaluation form – Supervisory Board
CANDIDATE’S CV**

SECTION 1 – to be completed by the candidate

I. CV								
No.	Period of employment ¹ :		Length of work ² :	Place of work:	Job title:	Sector:	Type of job ³ :	Attachments ⁴ :
1	From:	____-____-____ ____				<input type="checkbox"/> banking <input type="checkbox"/> insurance <input type="checkbox"/> pension <input type="checkbox"/> capital <input type="checkbox"/> other financial <input type="checkbox"/> non-financial	<input type="checkbox"/> supervisory <input type="checkbox"/> executive <input type="checkbox"/> managerial <input type="checkbox"/> academic/administrative <input type="checkbox"/> other	<input type="checkbox"/> form 1.3-____ <input type="checkbox"/> certificate of employment/hiring <input type="checkbox"/> references
	To:	____-____-____ ____						

¹ Start and end dates of employment in year-month-day format.

² Length of work expressed in full months.

³ Select:

- supervisory – for a supervisory function (e.g. supervisory board or non-executive director function in a one-tier system);
- executive – for an executive function (e.g. management board or executive director function in a one-tier system);
- managerial – in the case of a position directly subordinate to the management board, with a separate scope of powers and associated with actually managing employees;
- academic/administrative – for non-supervisory functions that offer useful experience in overseeing the activities of a financial institution;
- other – for other jobs.

⁴ A separate, sequentially numbered Attachment 1.3 should be completed and attached for each job; if possible, also attach documents confirming professional experience – a certificate of employment or references.

Date and signature of the candidate:	
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SECTION 2 – To be completed by the evaluator				
II. Requirements in terms of work experience				
No.	Requirement	Value	Minimum expected by the suitability policy	Evaluation ⁵
1	Length of work ⁶ :			<input type="checkbox"/> fulfilled <input type="checkbox"/> not fulfilled <input type="checkbox"/> waived due to:
2	Length of work in the financial sector ⁷ :			<input type="checkbox"/> fulfilled <input type="checkbox"/> not fulfilled <input type="checkbox"/> waived due to:
3	Length of work in the sector ⁸ :			<input type="checkbox"/> fulfilled <input type="checkbox"/> not fulfilled <input type="checkbox"/> waived due to:

⁵ Complete if a value other than “not applicable” has been entered in the field “minimum expected by the suitability policy”.

⁶ The length of work for all jobs listed in part I should be totaled.

⁷ The length of work in part I should be totaled for those jobs for which an answer other than “non-financial” has been selected in the “sector” field.

⁸ Indicate the sector of business of the regulated entity and then provide the total length of work for those jobs listed in part I for which the same answer has been selected in the “sector” field.

4	Experience in managerial jobs ⁹ :			<input type="checkbox"/> fulfilled <input type="checkbox"/> not fulfilled <input type="checkbox"/> waived due to:
5	Experience in managerial jobs in the financial sector ¹⁰ :			<input type="checkbox"/> fulfilled <input type="checkbox"/> not fulfilled <input type="checkbox"/> waived due to:
6	Experience in managerial jobs in the sector ¹¹ :			<input type="checkbox"/> fulfilled <input type="checkbox"/> not fulfilled <input type="checkbox"/> waived due to:
7	Experience in the area of risk management ¹² :			<input type="checkbox"/> fulfilled <input type="checkbox"/> not fulfilled <input type="checkbox"/> waived due to:
8	Experience in academic or administrative jobs or jobs related to overseeing financial institutions or other companies:			<input type="checkbox"/> fulfilled <input type="checkbox"/> not fulfilled <input type="checkbox"/> waived due to:

⁹ Provide the total length of work for all jobs listed in part I for which an answer “executive” or “managerial” has been selected in the “type of job” field (unless the regulated entity has assessed in the pertinent Attachment 1.3 that the job may not be considered managerial).

¹⁰ Provide the total length of work for all jobs listed in part I for which an answer other than “non-financial” has been selected in the “sector” field and at the same time an answer “executive” or “managerial” has been selected in the “type of job” field (unless the regulated entity has assessed in the pertinent Attachment 1.3 that the job may not be considered managerial).

¹¹ Indicate the sector of business of the regulated entity and then provide the total length of work for all jobs listed in part I for which the same answer has been selected in the “sector” field and at the same time an answer “executive” or “managerial” has been selected in the “type of job” field (unless the regulated entity has assessed in the pertinent Attachment 1.3 that the job may not be considered managerial).

¹² Indicate the sector of business of the regulated entity and then provide the total length of work for all jobs listed in part I associated with risk management.

Date and signature of the entity's authorized representative:	
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**Attachment 1.3-__¹ to the primary individual suitability evaluation form – Supervisory Board
JOB DESCRIPTION**

SECTION 1 – to be completed by the candidate

I. Information on the position			
1. Place of work: (name and registered office of the employer/client)			
2. Job title/name of function:			
3. Period of employment:	From:		
	To:		
4. Form/basis of employment:	<input type="checkbox"/> employment contract <input type="checkbox"/> civil-law contract <input type="checkbox"/> other (specify):		
5. Type of job ² :	<input type="checkbox"/> supervisory <input type="checkbox"/> executive <input type="checkbox"/> managerial <input type="checkbox"/> academic/administrative <input type="checkbox"/> other		
6. Sector:	<input type="checkbox"/> banking <input type="checkbox"/> insurance <input type="checkbox"/> pension	<input type="checkbox"/> capital <input type="checkbox"/> other financial <input type="checkbox"/> non-financial	
7. Responsibilities:			
8. Reporting to:			
9. Subordinate organizational units (list and indicate the line of business):			
10. Number of subordinate employees ³ :	Directly:		Indirectly:
11. Reason for termination:			

¹ Item number in Attachment 1.2 – CV

² Select:

- supervisory – for a supervisory function (e.g. supervisory board or non-executive director function in a one-tier system);
- executive – for an executive function (e.g. management board or executive director function in a one-tier system);
- managerial – in the case of a position directly subordinate to the management board, with a separate scope of powers and associated with actually managing employees;
- academic/administrative – for non-supervisory functions that offer useful experience in overseeing the activities of a financial institution;
- other – for other jobs.

³ Maximum number during employment in the respective position/performance of the respective function.

12. Contact details of the employer/client to confirm the above information:	
Date and signature of the candidate:	

SECTION 2 – To be completed by the evaluator**II. Information relevant to evaluation**

1. Does the job fulfill the criteria for being considered managerial ⁴ ?	<input type="checkbox"/> yes <input type="checkbox"/> no	Comments:	
2. Is the job of an academic or administrative nature or does it involve supervising or overseeing any financial or other institutions?	<input type="checkbox"/> yes <input type="checkbox"/> no	Comments:	
3. Is the substantive scope of responsibilities similar to the ones intended to be entrusted to the candidate?	<input type="checkbox"/> yes <input type="checkbox"/> no	Comments:	
4. Is the scale of the structures managed previously comparable to that intended to be entrusted to the candidate?	<input type="checkbox"/> yes <input type="checkbox"/> no	Comments:	

Date and signature of the entity's authorized representative:

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⁴ I.e. whether it is a job in the management board or directly reporting to the management board, with a separate scope of powers and associated with actually managing employees.

**Attachment 1.4 to the primary individual evaluation form – Supervisory Board
COMPETENCES OF A CANDIDATE**

I. Management competences in a regulated entity					
No.	Competence Description	Level of competence (self-assessment) ¹	Assessment conducted by the entity ²	Level required by the entity ³	Assessment of satisfying the requirements ⁴
1.	Familiarity with the market The candidate is familiar with the financial market in general, with special emphasis on the sector in which the regulated entity operates and with special emphasis on familiarity with the Polish market.	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification ⁵ :	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
2.	Familiarity with the legal requirements and regulatory framework The candidate is familiar with the regulations, the recommendations of the regulatory authority and the best practices governing business in the financial market sector in which the regulated entity operates.	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied

¹ Select one of the options and add the justification for the candidate’s self-assessment, considering in particular vocational and scientific accomplishments

² Select one of the options and add a justification, especially if the assessment differs from the self-assessment of the candidate.

³ Select one of the options.

⁴ If the value in the field “assessment conducted by the entity” is equal to or higher than the value in the field “level required by the entity”, select the option “satisfied”; otherwise select the option “not satisfied”.

⁵ Where possible, documents confirming each of the the candidate’s competences should be presented.

Attachment 1.4 – Competences

3.	<p>Strategic planning (possession of management skills) The candidate grasps the institution’s business strategy / business plan and is capable of implementing it.</p>	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
4.	<p>Familiarity with the management system, including risk management The candidate grasps risk management methodology – identifying, assessing, monitoring, controlling and mitigating the main types of risk applicable to the institution.</p>	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
5.	<p>Accounting and financial audit The candidate body possesses current knowledge on accounting, accounting standards and financial audit.</p>	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
6.	<p>Oversight, control and internal audit The candidate grasps the principles and standards of the audit and internal control system.</p>	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
7.	<p>Intpretation of financial information (possession of finance and accounting skills) The candidate is capable of interpreting financial data and accounting data, is capable of analyzing and drawing conclusions on the basis of the data presented as required for management in the entity while simultaneously taking the market situation into account.</p>	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied

Attachment 1.4 – Competences

8.	<p>Possession of insurance skills The candidate is capable of interpreting insurance information, is capable of analyzing and drawing conclusions on the basis of the data presented as required for management in the entity while simultaneously taking the market situation into account.</p>	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
9.	<p>Possession of actuarial skills The candidate grasps the significance and the role of the actuarial function in the entity; is capable of analyzing data and interpreting information while giving consideration to the entity's strategy and market situation.</p>	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
10.	<p>Polish language proficiency The candidate has proven Polish language proficiency, communicates effectively in Polish with employees (on everyday and industry-related topics), grasps the topics discussed during a meeting of the corporate body; is capable of using the Polish language in presentations and addresses during conferences, workshops and key meetings.</p>	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
11.	Other (which ones):	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied

II. Competences in managing the risks in the regulated entity’s business					
No.	Competence Description	Level of competence (self-assessment) ⁶	Assessment conducted by the entity ⁷	Level required by the entity ⁸	Assessment of satisfying the requirements ⁹
1.	Risk ¹⁰	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied

⁶ Select one of the options and add the justification for the candidate’s self-assessment, considering in particular vocational and scientific accomplishments

⁷ Select one of the options and add a justification, especially if the assessment differs from the self-assessment of the candidate.

⁸ Select one of the options.

⁹ If the value in the field “assessment conducted by the entity” is equal to or higher than the value in the field “level required by the entity”, select the option “satisfied”; otherwise select the option “not satisfied”.

¹⁰ Risks in the regulated entity’s business: risks ensuing from the insurance undertaking’s business profile, including actuarial risk, market risk, credit risk, liquidity risk, operational risk and other significant risks for the insurance undertaking.

III. Competences in managing the main areas in the regulated entity's business					
No.	Competence Description	Level of competence (self-assessment) ¹¹	Assessment conducted by the entity ¹²	Level required by the entity ¹³	Assessment of satisfying the requirements ¹⁴
1.	Line of business	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied

¹¹ Select one of the options and add the justification for the candidate's self-assessment, considering in particular vocational and scientific accomplishments

¹² Select one of the options and add a justification, especially if the assessment differs from the self-assessment of the candidate.

¹³ Select one of the options.

¹⁴ If the value in the field "assessment conducted by the entity" is equal to or higher than the value in the field "level required by the entity", select the option "satisfied"; otherwise select the option "not satisfied".

IV. Personal competences					
No.	Competence Description	Level of competence (self-assessment) ¹⁵	Assessment conducted by the entity ¹⁶	Level required by the entity ¹⁷	Assessment of satisfying the requirements ¹⁸
1.	Authenticity The words and actions of the candidate are consistent and his/her conduct is consistent with the values and convictions he/she espouses. The candidate openly states his/her intentions, ideas and opinions, encourages the community to be open and frank and correctly advises his/her boss of the factual situation, thereby recognizing existing risks and difficulties.	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied Justification:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied Justification:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
2.	Language The candidate is capable of communicating orally in an organized and conventional manner and of writing in his/her mother tongue or the language used at work in the place where the institution is located.	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
3.	Firmness The candidate makes decisions on a timely basis on the basis of the available information, acting quickly or in accordance with the specific method of action, for example expressing his/her views and not deferring the time of decision-making.	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied Justification:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied Justification:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied

¹⁵ Select one of the options and add the justification for the candidate’s self-assessment, considering in particular vocational and scientific accomplishments

¹⁶ Select one of the options and add a justification, especially if the assessment differs from the self-assessment of the candidate.

¹⁷ Select one of the options.

¹⁸ If the value in the field “assessment conducted by the entity” is equal to or higher than the value in the field “level required by the entity”, select the option “satisfied”; otherwise select the option “not satisfied”.

Attachment 1.4 – Competences

4.	<p>Communication The candidate is capable of conveying information in an understandable and socially acceptable manner and in the appropriate form. He/she focuses on conveying and obtaining clear and transparent information and encourages active feedback.</p>	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
5.	<p>Judgment The candidate is capable of making an accurate assessment of information and various methods of operation and reaches logical conclusions. He/she checks, investigates and grasps significant issues. He/she possesses the skill of making a holistic assessment of the situation transcending the perspective of the position held, especially when solving problems that may pose a threat to business continuity.</p>	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
6.	<p>Cares about clients and high standards The candidate focuses on ensuring high standards and, if possible, finding methods of augmenting them. In particular: refuses to consent to developing and marketing products and services and incurring capital expenditures in circumstances in which he/she is not able to measure risk appropriately in connection with a lack of understanding concerning the structure, principles or basic assumptions underpinning the proposed solution. Identifies and investigates clients' needs and expectations and provides for conveying information to clients that is correct, complete and understandable. Gives special consideration to the value of the product to the client and the product's adequacy and suitability.</p>	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied

Attachment 1.4 – Competences

7.	<p>Leadership skills The candidate points out the directions of activity and provides leadership, supports team work, motivates employees and ensures that they have the appropriate professional competences to perform their functions or that are necessary to achieve the intended objectives. Is open to criticism and ensures the conduct of constructive debate.</p>	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
8.	<p>Loyalty The candidate identifies with the organization and demonstrates engagement. Shows that he/she is capable of devoting enough time to work and is capable of performing his/her duties appropriately, defends the interests of the organization and acts objectively and critically. Recognizes and anticipates prospective conflicts of interest.</p>	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied Justification:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied Justification:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
9.	<p>External awareness The candidate monitors on an ongoing basis the state of the organization, its balance of power and the accepted operating methods. He/she is well aware of the economic situation in the country and around the world (including financial, economic and social development), which may exert an influence on the organization and the interests of various entities. At the same time, the candidate is capable of effectively using this information.</p>	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
10.	<p>Negotiations The candidate identifies and discloses interests in a manner that aims to achieve consensus in striving to achieve negotiating goals.</p>	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied

Attachment 1.4 – Competences

11.	<p>Persuasion The candidate is capable of influence others' opinions by using his/her gift of persuasion and natural authority and tactfulness. He/she has a strong personality and the skill of remaining firm.</p>	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
12.	<p>Team work The candidate is aware of the group's interests and contributes to achieving the common goal; is capable of functioning as part of the group.</p>	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
13.	<p>Strategic skills The candidate is capable of creating and developing realistic plans and strategies concerning future growth (by pursuing scenario analysis among other methods), which translates into the skill of setting long-term goals. Duly incorporates the risk to which the organization is exposed and takes the right steps to manage this risk.</p>	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
14.	<p>Resilience to stress The candidate is resilient to stress and is capable of acting logically even in the face of major pressure and in times of uncertainty.</p>	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
15.	<p>Feeling of responsibility The candidate grasps internal and external determinants, assesses them diligently and takes them into account. Is capable of drawing conclusions and is aware of how his/her actions influence the interests of interested parties.</p>	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied Justification:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied Justification:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied

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16.	<p>Chairing of meetings The candidate is capable of effectively and efficiently presiding over meetings, creating an atmosphere of openness and encouraging everyone to take part on equal footing; is oriented when it comes to the tasks and duties of the other persons.</p>	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
17.	Other (which ones):	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied

Date and signature of the candidate:	
Date and signature of the entity's authorized representative:	

**Attachment 1.5 to the primary individual evaluation form – Supervisory Board
GOOD CONDUCT**

SECTION 1 – to be completed by the candidate**I. Good conduct**

A certificate ¹ of no criminal record for intentional offenses or intentional fiscal offenses has been attached to the evaluation form.	<input type="checkbox"/>
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DECLARATION²:

I declare that I have/have not ³ been convicted for an intentional offense or an intentional fiscal offense confirmed by a final non-appealable court judgment.	<input type="checkbox"/>
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II. Criminal proceedings

There are no pending criminal proceedings against me and in the last 5 years there have been no such criminal proceedings before Polish or foreign judicial authorities.	<input type="checkbox"/>
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The following criminal proceedings are pending or have been conducted against me in the last 5 years:	<input type="checkbox"/>
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No.	Attachments
1.	

I am aware³ of the criminal liability for submitting a false declaration in accordance with Article 233 of the Criminal Code.

Date and signature of the candidate:	
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¹ A certificate issued by the National Criminal Register and, in respect of foreigners, also by the competent authorities of their country of residence, should be submitted no later than 3 months from the date of issue.

² If a certificate of no criminal record has been submitted, no declaration is required.

³ Delete as applicable.

SECTION 2 – To be completed by the evaluator	
III. Summary of the entity's evaluation	
The information provided by the candidate in this form has an unfavorable impact on the evaluation of his/her good conduct record in terms of suitability for appointment as a member of a corporate body of the regulated entity.	<input type="checkbox"/> yes <input type="checkbox"/> no
Date and signature of the entity's authorized representative:	

**Attachment 1.6 to the primary individual suitability evaluation form – Supervisory Board
ASSURANCE**

SECTION 1 – to be completed by the candidate	
I. Administrative sanctions against the candidate	
During the previous professional activity:	
no administrative sanction has been imposed on me.	<input type="checkbox"/>
the following administrative sanctions have been imposed on me: <i>If the answer is affirmative, please provide information about the case related to the imposed administrative sanctions, the entity and function concerned, and describe the sanctions and the result of their application.</i>	<input type="checkbox"/>
II. Administrative sanctions imposed on other entities	
In the period my previous professional activity, in respect of other entities and in connection with the scope of my duties:	
no administrative sanction has been imposed.	<input type="checkbox"/>
the following administrative sanctions have been imposed: <i>If the answer is affirmative, please provide information about the case related to the imposed administrative sanctions, the entity and function concerned, and describe the sanctions and the result of their application.</i>	<input type="checkbox"/>
III. Supervisory measures against the candidate	
In the last 5 years:	
no supervisory measures have been taken against me by the competent financial regulatory authorities and no similar actions have been taken by other authorized entities on the basis of separate acts in connection with irregularities in the activities of entities subject to the supervision of such regulatory authorities in which I have been a member of the management body.	<input type="checkbox"/>
the following supervisory measures have been taken against me by the competent financial regulatory authorities or the following similar actions have been taken by other authorized entities on the basis of separate acts in connection with irregularities in the activities of entities subject to the supervision of such regulatory authorities in which I have been a member of the management body. <i>If the answer is affirmative, please provide information about the case related to the supervisory measures taken, the entity and function concerned, and describe the measures and the result of their application:</i>	<input type="checkbox"/>
IV. Supervisory measures against other entities	
In the last 5 years, in respect of other entities and in connection with the scope of my	

duties:	
no supervisory measures have been taken by the competent financial regulatory authorities and no similar actions have been taken by other authorized entities on the basis of separate acts in respect of entities in which I hold or have held shares equal to or exceeding 10% of the total number of votes at the shareholder meeting or in the share capital, or in relation to which I am or have been the parent entity, due to irregularities in the activities of such these entities, if such entities perform or have performed activities subject to the supervision of the competent regulatory authority in the country of their registered office.	<input type="checkbox"/>
the following supervisory measures have been taken by the competent financial regulatory authorities or the following similar actions have been taken by other authorized entities on the basis of separate acts in respect of entities in which I hold or have held shares equal to or exceeding 10% of the total number of votes at the shareholder meeting or in the share capital, or in relation to which I am or have been the parent entity, due to irregularities in the activities of such these entities, if such entities perform or have performed activities subject to the supervision of the competent regulatory authority in the country of their registered office. <i>If the answer is affirmative, please provide information about the case related to the supervisory measures taken, the entity and function concerned, and describe the measures and the result of their application:</i>	<input type="checkbox"/>
V. Judicial proceedings in connection with a business case	
No judicial proceedings are pending against me in connection with a business case.	<input type="checkbox"/>
Judicial proceedings are pending against me in connection with a business case. <i>If the answer is affirmative, please provide the type(s) of case(s), entities participating in the proceedings (plaintiffs, participants, etc.) and the subject matter of the case(s) (type, nature and amount of the claim, challenged behavior):</i>	<input type="checkbox"/>
VI. Conduct of activity without the required decision	
I have not conducted any activity on the financial market without the required decision in a situation where such activity required the issuance of a decision by the competent authority.	<input type="checkbox"/>
I have conducted certain activity on the financial market without the required decision in a situation where such activity required the issuance of a decision by the competent authority. <i>If the answer is affirmative, please describe the circumstances of the case and decisions, if any, in administrative, preparatory or judicial proceedings in respect of the deed committed:</i>	<input type="checkbox"/>

VII. Use of the financial system for money laundering	
I have not committed any of the deeds referred to in Article 1(3) of Directive (EU) 2015/849 of the European Parliament and of the Council of 20 May 2015 on the prevention of the use of the financial system for the purposes of money laundering or terrorist financing (OJ L 2015.141/73).	<input type="checkbox"/>
I have committed some of the deeds referred to in Article 1(3) of Directive (EU) 2015/849 of the European Parliament and of the Council of 20 May 2015 on the prevention of the use of the financial system for the purposes of money laundering or terrorist financing (OJ L 2015.141/73). <i>If the answer is affirmative, please describe the circumstances of the case and decisions, if any, in administrative, preparatory or judicial proceedings in respect of the deed committed:</i>	<input type="checkbox"/>
VIII. Civil law claims related to the performance of managerial functions	
In the last 5 years:	
no civil law claims have been brought against me or legally recognized in connection with my performance of managerial functions in business entities.	<input type="checkbox"/>
civil law claims have been brought against me or legally recognized in connection with my performance of managerial functions in business entities. <i>If the answer is affirmative, please describe the activity of which entity was related to the claim, what the basis for and circumstances of the claim were and what behavior was challenged by the subject matter of each claim and what their amount was:</i>	<input type="checkbox"/>
IX. Judicial, disciplinary or enforcement proceedings – other than those mentioned above	
Currently and in the last 5 years:	
I am not acting and have not acted as a party in any judicial proceedings that may or may have had a negative impact on my financial standing, or in any disciplinary or enforcement proceedings.	<input type="checkbox"/>
I am acting or have acted as a party in the following judicial proceedings that may or may have had a negative impact on my financial situation, or in the disciplinary or enforcement proceedings (specify):	<input type="checkbox"/>
X. Financial liability of an employee	
In the last 5 years:	
I have not caused any damage for which I would be financially liable in accordance with the provisions of the Labor Code in my current or previous workplaces.	<input type="checkbox"/>
I have caused the following damage for which I have been financially liable in	<input type="checkbox"/>

accordance with the provisions of the Labor Code in my current or previous workplaces (specify):		
XI. Prohibitions on holding a specific position, performing a specific profession or conducting a specific business activity		
No prohibition has been ruled against me on holding a specific position, performing a specific profession or conducting a specific business activity.		<input type="checkbox"/>
In the following circumstances, a prohibition has been ruled against me on holding a specific position, performing a specific profession or conducting a specific business activity (specify):		<input type="checkbox"/>
XII. Refusal to grant consent or authorization		
In the last 5 years:		
I have not been refused any authorization or consent in connection with my activity or planned activity or my performance of a function in an entity operating on the financial market.		<input type="checkbox"/>
in the following circumstances, I have been refused an authorization or consent in connection with my activity or planned activity or my performance of a function in an entity operating on the financial market (specify):		<input type="checkbox"/>
XIII. Withdrawal of consent or authorization		
In the last 5 years:		
I have not been dispossessed of any authorization or consent in connection with my activity or my performance of a function in an entity operating on the financial market.		<input type="checkbox"/>
in the following circumstances, I have been dispossessed of an authorization or consent in connection with my activity or my performance of a function in an entity operating on the financial market (specify):		<input type="checkbox"/>
XIV. Termination of an employment relationship at the initiative of the employer		
In the last 5 years:		
my employment in an entity operating on the financial market has not been terminated at the initiative of the employer or client.		<input type="checkbox"/>
in the following circumstances, my employment(s) in entities operating on the financial market have been terminated at the initiative of employers or clients (specify):		<input type="checkbox"/>
XV. Liquidation, bankruptcy, restructuring or recovery proceedings		
In the last 5 years:		
there have not been and there are no liquidation, bankruptcy, reorganization		<input type="checkbox"/>

or restructuring proceedings against entities in which I perform or have performed management functions or in which I hold or have held a stake equal to or exceeding 10% of the total number of votes at the shareholder meeting or in the share capital or in respect of which I am or have been the parent entity.	
the following liquidation, bankruptcy, reorganization or restructuring proceedings have been or are being conducted against entities in which I perform or have performed management functions or in which I hold or have held a stake equal to or exceeding 10% of the total number of votes at the shareholder meeting or in the share capital or in respect of which I am or have been the parent entity (specify):	<input type="checkbox"/>
XVI. Declaration of bankruptcy – business activity	
In the last 5 years:	
in respect of me as a natural person engaged in business activity, no bankruptcy has been declared and no petition for bankruptcy has been legally dismissed because the debtor's assets were insufficient to cover the costs of the proceedings.	<input type="checkbox"/>
in respect of me as a natural person engaged in business activity, bankruptcy has been declared or a petition for bankruptcy has been legally dismissed because the debtor's assets were insufficient to cover the costs of the proceedings. <i>If the answer is affirmative, please describe the line of your business and explain the reasons for your insolvency:</i>	<input type="checkbox"/>
XVII. Declaration of bankruptcy – natural person	
In the last 5 years:	
in respect of me as a natural person not engaged in business activity, no bankruptcy has been declared and no petition for bankruptcy has been legally dismissed for any of the reasons specified in Article 491 ⁴ of the Act of 28 February 2003 entitled Bankruptcy Law (consolidated text: Journal of Laws of 2019, Item 498, as amended).	<input type="checkbox"/>
in respect of me as a natural person not engaged in business activity, bankruptcy has been declared or a petition for bankruptcy has been legally dismissed for any of the reasons specified in Article 491 ⁴ of the Act of 28 February 2003 entitled Bankruptcy Law (consolidated text: Journal of Laws of 2019, Item 498, as amended). <i>If the answer is affirmative, please provide the circumstances regarding the reasons for your insolvency:</i>	<input type="checkbox"/>
XVIII. Register of debtors	
As a natural person, I am not entered in the register of debtors.	<input type="checkbox"/>

As a natural person, I am entered in the register of debtors. <i>If the answer is affirmative, please provide the basis for the entry:</i>		<input type="checkbox"/>
XIX. Discharges to a member of a corporate body on the performance of his/her duties		
In the last 5 years:		
in connection with my functions in the management or supervisory bodies of commercial companies, I have always obtained a discharge on the performance of my duties		<input type="checkbox"/>
in connection with my functions in the management or supervisory bodies of commercial companies, I have not obtained a discharge on the performance of my duties. <i>Please provide the name of the company(-ies), the address of its registered office, its line of business and the type of function performed, and describe the reasons why the discharge was not granted:</i>		<input type="checkbox"/>
I confirm the declarations made in this form and I am aware of the criminal liability criminal liability for submitting a false declaration in accordance with Article 233 of the Criminal Code.		
Date and signature of the candidate:		

SECTION 2 – To be completed by the evaluator**XX. Irregularities related to the candidate's scope of duties detected as a result of the inspection¹**

1.	Designation of the inspecting entity:	
	Period covered by the inspection:	
	Date of inspection:	
	Scope of inspection:	
	Scope of the candidate's responsibilities as at the date of the inspection:	
	Identified irregularities in the scope of the candidate's responsibilities:	
	Candidate's actions aimed at removing the irregularities:	

XXI. Irregularities related to the candidate's scope of duties detected as a result of supervisory activities carried out by the regulatory authority

1.	Type of supervisory activity:	
	Date of supervisory activity:	
	Period covered by supervisory activity:	
	Scope of supervisory activity:	
	Scope of the candidate's responsibilities as at the date of the supervisory activity:	
	Identified irregularities in the scope of the	

¹ This pertains to inspection activities related to the performance by the candidate of a function in the regulated entity conducting the evaluation; includes internal audits and inspections, audits of external entities, inspections by administrative authorities (excluding the Polish Financial Supervision Authority); analysis should cover the period of the last 5 years, with any previous events taken into account if, in the opinion of the regulated entity, they are relevant to the evaluation of the assurance criterion.

candidate's responsibilities:	
Candidate's actions aimed at removing the irregularities:	
XXII. Summary of the regulated entity's evaluation	
The information provided in this form has an unfavorable impact on the evaluation of the person's assurance in terms of suitability for appointment as a member of a corporate body of the regulated entity.	<input type="checkbox"/> yes <input type="checkbox"/> no
Date and signature of the entity's authorized representative:	

**Attachment 1.7 to the primary individual suitability evaluation form – Supervisory Board
CONFLICT OF INTEREST**

SECTION 1 – to be completed by the candidate

I. Candidate's declarations		
Currently and in the last 5 years:	Currently	Last 5 years
I hold, directly or indirectly, stocks or shares in a commercial law company or the right to appoint at least one member of the management board in such company, which runs a business competitive to that of the entity in which I perform/will perform the function.	<input type="checkbox"/>	
I hold, directly or indirectly, shares in another business entity (e.g. mutual insurance company, cooperative bank, cooperative savings and credit union) or the right to appoint at least one member of the management board of such entity, which runs a business competitive to that of the entity in which I perform/will perform the function.	<input type="checkbox"/>	
I am connected with the entity in which I perform/will perform the function by economic interests in the scope of my business activity, intellectual property rights or other reasons. <i>Please list the subject matter of your cooperation with the entity in which you perform/will perform the function:</i>	<input type="checkbox"/>	
a relative ¹ of mine is the holder of significant blocks of shares/stocks in the entity in which I perform/will perform the function.	<input type="checkbox"/>	
I am/have been an employee/associate ² of an entity that is the holder of significant blocks of shares/stocks in the entity in which I perform/will perform the function.	<input type="checkbox"/>	<input type="checkbox"/>
a relative of mine is an employee of the entity in which I perform/will perform the function or an entity included in the scope of prudential consolidation.	<input type="checkbox"/>	
I am/have been an employment/cooperation relationship with a person who is an employee of the entity in which I perform/will perform the function or an entity included in the scope of prudential consolidation.	<input type="checkbox"/>	<input type="checkbox"/>
I am/have been employed by another entity, which may lead to an actual or potential conflict of interest. <i>Please list the entities concerned:</i>	<input type="checkbox"/>	<input type="checkbox"/>

¹ Within the meaning of this form, a relative is a spouse, a domestic partner, a relative by blood, a relative by marriage up to the second degree or a person remaining with the candidate in the relationship of adoption, custody or guardianship.

² Within the meaning of this form, an associate is a person engaged in cooperation on a basis other than an employment contract, e.g. a mandate contract, a contract for specific work or any other civil-law contract.

<p>I am a shareholder/member of a corporate body of an entity that is a significant counterparty³ of the entity in which I perform/will perform the function. <i>Please list the entities concerned:</i></p>	<input type="checkbox"/>	
<p>a relative of mine is a significant counterparty or a member of a corporate body of a significant counterparty of the entity in which I perform/will perform the function. <i>Please list the entities concerned:</i></p>	<input type="checkbox"/>	
<p>I am in an employment/cooperation relationship with an entity that is a significant counterparty or with a person who is a member of a corporate body of a significant counterparty of the entity in which I perform/will perform the function. <i>Please list the entities concerned:</i></p>	<input type="checkbox"/>	
<p>I am a member of a corporate body of an entity that runs a business competitive to that of the entity in which I perform/will perform the function. <i>Please list the competitive entities concerned:</i></p>	<input type="checkbox"/>	
<p>my public activity raises a conflict of interest with the business of the entity in which I perform/will perform the function.</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Date and signature of the candidate:</p>		

³ Within the meaning of this form, a significant counterparty is, e.g., a significant service provider or a consulting company.

SECTION 2 – To be completed by the evaluator			
II. Solutions adopted for managing any identified conflicts of interest			
No.	Identified irregularity:	Management solutions adopted:	Is the solution effective?
1.			<input type="checkbox"/> yes <input type="checkbox"/> no
III. Summary of the entity's evaluation			
The information provided by the candidate in this form has an unfavorable impact on the evaluation of his/her independence of judgment in terms of the risk of a conflict of interest, in terms of suitability for appointment as a member of a corporate body of the regulated entity.			<input type="checkbox"/> yes <input type="checkbox"/> no
Date and signature of the entity's authorized representative:			

**Attachment 1.8 to the primary individual suitability evaluation form – Supervisory Board
COMBINATION OF FUNCTIONS (PRIMARY EVALUATION)**

SECTION 1 – to be completed by the candidate

I. Information on functions performed in supervisory boards/non-executive directors							
No.	Name of the entity	Function performed/job title	Group/system of institutional protection	The evaluator holds a significant block of shares ¹	State Treasury representative	Performs currently/will I perform	Area of operation
1.				<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> performs <input type="checkbox"/> will perform	<input type="checkbox"/> banking <input type="checkbox"/> pension <input type="checkbox"/> capital <input type="checkbox"/> insurance <input type="checkbox"/> other financial <input type="checkbox"/> non-financial
Total positions in supervisory boards							
Total positions in supervisory boards, including positions counted as single ones²							

¹ This means the holding of a direct or indirect holding in an enterprise, representing 10% or more of the capital or voting rights or exercising a significant influence over the management of the enterprise.

² A single position is considered to be a position held in supervisory boards of members of the same group or in entities covered by the same institutional protection system, or in entities in which the bank holds a significant block of shares.

II. Information on functions performed in management boards/executive directors							
No.	Name of the entity	Function performed/job title	Group/system of institutional protection	The evaluator holds a significant block of shares ³	Performs currently/will perform	Area of operation	
1.				<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> performs <input type="checkbox"/> will perform	<input type="checkbox"/> banking <input type="checkbox"/> pension <input type="checkbox"/> capital	<input type="checkbox"/> insurance <input type="checkbox"/> other financial <input type="checkbox"/> non-financial
Total positions in management boards							
Total positions in management boards, including positions counted as single ones⁴							
Date and signature of the candidate							

³ This means the holding of a direct or indirect holding in an enterprise, representing 10% or more of the capital or voting rights or exercising a significant influence over the management of the enterprise.

⁴ A single position is considered to be a position held in management boards of members of the same group or in entities covered by the same institutional protection system, or in entities in which the bank holds a significant block of shares.

SECTION 2 – To be completed by the evaluator	
III. Summary of the entity's evaluation	
The information provided by the candidate in this form has an unfavorable impact on the evaluation of his/her independence of judgment in terms of suitability for appointment as a member of a corporate body of the regulated entity.	<input type="checkbox"/> yes <input type="checkbox"/> no
Date and signature of the entity's authorized representative	

**Attachment 1.9 to the primary individual suitability evaluation form – Supervisory Board
TIME COMMITMENT**

SECTION 1 – to be completed by the candidate

I. Candidate's declaration

I have been informed about the expected minimum amount of time necessary for the proper performance of my duties and I declare my readiness to spend the following amount of time:	<input type="checkbox"/>
I am ready to spend more time during periods of particularly intense activity, e.g. in the event of restructuring or other emergency situations.	<input type="checkbox"/>
My current place of residence is:	<input type="checkbox"/> in the place of my employment <input type="checkbox"/> outside the place of employment, in Poland <input type="checkbox"/> outside Poland, within the European Union <input type="checkbox"/> outside the European Union
Approximate travel time from my place of residence to the place of work/performance of the function:	

II. Time spent on other jobs/functions ¹								
No.	Job/function			Time currently spent		Planned time to be spent following the appointment for the position under consideration		
				Meetings per year	Days per year	Meetings per year	Days per year	Travel time ²
a) Other jobs/functions in the same entity								
1.	Job title:							
b) Jobs/functions in other members of the same group								
1.	Job title:			Size of the entity ³				
	Name of the entity:							
	Line of business:							
	Registered office/place of performance of duties:		Country:					
				<input type="checkbox"/> Micro				
				<input type="checkbox"/> Small				
				<input type="checkbox"/> Medium				
				<input type="checkbox"/> Large				
c) Jobs/functions in other commercial entities (including own business activity)								
1.	Job title:			Size of the entity				
	Name of the entity:							
	Line of business:							
	Registered office/place of performance of duties:		Country:					
				<input type="checkbox"/> Micro				
				<input type="checkbox"/> Small				
				<input type="checkbox"/> Medium				
				<input type="checkbox"/> Large				
d) Other non-commercial activity (e.g. social/teaching)								
1.	Job title:			Size of the				

¹ In this section, include the time spent on duties performed as part of a long-term (lasting more than 3 months) substitution.

² Time spent on travel related to the performance of the function – total number of hours per year.

³ According to the classification defined in Article 7 of the Act entitled Law of Commercial Undertakings.

	Name of the entity:			entity					
	Line of business:			<input type="checkbox"/> Micro					
	Registered office/place of performance of duties:	Country:	Town/City:	<input type="checkbox"/> Small					
			<input type="checkbox"/> Medium						
			<input type="checkbox"/> Large						
				Total (a) + (b) + (c) + (d)					

e) Synergies in connection with the functions performed within the same group ⁴				
No.	Description of duties	Indication of which positions are affected by the synergy	Time currently saved owing to synergies (days per year)	Planned time savings owing to synergies (days per year)
1.				
		Total time in consideration of synergies [sum of (a) through (d) minus (e)]		
		Total time spent in consideration of synergies [sum of (a) through (d) minus (e)]		

III. Additional duties not included in section II	

Date and signature of the candidate:	
--------------------------------------	--

⁴ Convergent duties performed by the candidate at the same time due to performing several functions within the same group, with particular emphasis on acting on behalf of the entity or as a substitute member of a corporate body of the regulated entity.

SECTION 2 – To be completed by the evaluator		
IV. Preparation for the performance of duties related to the position to be entrusted to the candidate		
Need for training	yes <input type="checkbox"/> no <input type="checkbox"/>	
Scope of the training	Duration of training	Expected date of training
V. Requirements for the amount of time the candidate should spend on the performance of his/her duties		
number of scheduled meetings of the corporate body		
estimated number of off-schedule meetings		
VI. Remote work		
The entity applies solutions enabling remote work	yes <input type="checkbox"/> no <input type="checkbox"/>	
VII. Long-term absenteeism		
The entity has developed a substitution strategy in the event of absenteeism, which, in compliance with the law, permits employees to spend enough time to perform their current duties, as well as those resulting from the need for substitution, and ensures continuity and absence of disruptions in operations.		<input type="checkbox"/>

VIII. Summary of the entity's evaluation		
The regulated entity has assumed that the minimum time necessary to perform the duties associated with the function to be entrusted to the candidate is:		... hours per month
		... days per year
The information provided by the candidate in this form has an unfavorable impact on the evaluation of his/her ability to spend sufficient time in terms of suitability for appointment as a member of a corporate body of the regulated entity.	<input type="checkbox"/> yes <input type="checkbox"/> no	
Date and signature of the entity's authorized representative:		

Attachment 1.10: Consent to candidacy

Declaration

I, the undersigned, *[First and last name]*, hereby declare that I give consent to be a candidate for a member of the Supervisory Board of Powszechny Zakład Ubezpieczeń Spółka Akcyjna with its registered office in Warsaw.

At the same time, I declare that I give consent to inform the participants of the Shareholder Meeting of Powszechny Zakład Ubezpieczeń Spółka Akcyjna about the data contained in this Form and attachments thereto and the contents of the submitted documents, and the information obtained in the Suitability Assessment process.

Attachment: Personal Data Controller's Information for candidates and members of PZU SA's governing bodies**

.....
(Full name)

.....
(Signature)

.....
(Place and date)

* delete as applicable

** in accordance with form prepared by PZU

Personal Data Controller's Information for candidates and members of PZU SA's corporate bodies

[Data controller and contact details of the controller and Data Protection Officer]

The data controller is PZU SA with its registered office in Warsaw at Al. Jana Pawła II 24, 00-133 Warsaw.

You may contact the controller by sending an e-mail to kontakt@pzu.pl or in writing to the address of the controller's registered office as specified above. You may contact the Data Protection Officer designated by the controller with regard to all matters in the area of personal data protection. The Data Protection Officer may be contacted by e-mail at: IODpzu@pzu.pl or in writing, with a letter addressed to: PZU SA, IOD, al. Jana Pawła II 24, 00-133 Warsaw.

[Data processing]

The controller may process your data for the purpose of:

- entering into and performing a mandate agreement with you – the legal basis for the processing is that the data processing is necessary to sign and perform the agreement,
- preparing and updating a list of persons discharging managerial responsibilities in PZU SA and persons closely related to them and a list of persons having access to confidential information – the legal basis for the processing is that the processing is necessary for compliance with a legal obligation to which the controller is subject,
- carrying out the initial, secondary and collective suitability assessment – the legal basis for the processing is that the processing is necessary for compliance with a legal obligation to which the controller is subject or necessity to pursue the controller's legitimate interests; the controller's legitimate interests consist in carrying out a suitability assessment according to the *Methodology for assessing suitability of the members of the corporate bodies of regulated entities*, published by the Polish Financial Supervision Authority;
- granting you entitlements to PZU SA's information systems – the legal basis for the processing is that the data processing is necessary to perform the agreement,
- issuing an access card to the building and the premises; where applicable, PZU SA will process your image – the legal basis for the processing is that the data processing is necessary to pursue the controller's legitimate interests; the controller's legitimate interests consist in ensuring access control and ensuring security in the building,
- monitoring compliance with the standards of conduct specified in the compliance policy and the Best Practices of PZU – the legal basis for the processing is that the data processing is necessary to pursue the controller's legitimate interests; the controller's legitimate interests consist in ensuring the possibility to verify the standards of conduct, in particular those pertaining to conflict of interest and giving of gifts,
- taking advantage of discounts for insurance products by you – the legal basis for the processing is that the processing is necessary to pursue the controller's legitimate interests; the controller's legitimate interests consist in ensuring the benefits,
- your participation in incentive, loyalty, training and image-related programs and competitions organized by PZU SA – the legal basis for the processing is that the processing is necessary to pursue the controller's legitimate interests; the controller's legitimate interests consist in improving the competencies and motivation,
- keeping accounting and tax documentation – the legal basis for the processing is that the processing is necessary for compliance with a legal obligation to which the controller is subject,
- when necessary, in order to pursue claims or defend against claims related to the agreement signed with you – the legal basis for the processing is that the data processing is necessary to pursue the controller's legitimate interests; the controller's legitimate interests consist in its ability to pursue its claims and to defend against claims arising in connection with the executed agreement.

Personal data must be provided in order to enter into and perform the agreement. Without providing the data entering into and performing the agreement is not possible.

[Data retention period]

Your personal data associated with entering into the agreement will be stored until the expiration of the obligation to store data as required by the law, in particular under accounting regulations and the tax law.

[Data transfers]

Your personal data may be shared with other persons, entities and authorities authorized by law to process such data.

Your data may be made available to organizers of training courses and incentive programs financed by PZU SA.

Your personal data may be shared with data processors that process personal data under engagement from the controller, however such entities will process data based on an agreement with the controller and solely in accordance with the controller's instructions.

[Your rights]

You have the right to access your personal data and to demand to rectify such data, erase them or restrict their processing.

You have the right to data portability, i.e. to receive your personal data from the controller in a structured, commonly used, machine-readable format. You may send such data to another controller.

To the extent that the processing of your personal data is based on the controller's legitimate interests, you have the right to object to the processing of your personal data for reasons associated with your special situation.

In order to exercise the said rights, you should contact the controller or the Data Protection Officer using the above contact details.

You have the right to file a complaint with the regulatory authority. In Poland, the regulatory authority is the President of the Personal Data Protection Office.

Individual Assessment Form of a Candidate to Become an Audit Committee Member / Audit Committee Member

SECTION 1 – to be filled out by the person subject to assessment

1. Personal information		
1.	First name:	
2.	Last name:	
3.	Place of birth:	
4.	Date of birth:	
5. Declarations regarding the satisfaction of independence criteria		
1.	I am, or in the last 5 years ¹ I have been a member of a senior management team, also I am or was a member of the management board or some other managing body of the entity conducting the assessment or a related party?	<input type="checkbox"/> yes <input type="checkbox"/> no
2.	I am, or in the last 3 years ² since the date of appointment I have been an employee of the entity conducting the assessment or a related party (<i>this does not pertain to a situation in which the audit committee member is an employee who does not belong to senior management and who was elected to the supervisory board or some other supervising or control body of the entity conducting the assessment as a representative of the employees</i>).	<input type="checkbox"/> yes <input type="checkbox"/> no
3.	I exercise control within the meaning of Article 3(1)(37)(a)-(e) of the Accounting Act of 29 September 1994 or I represent persons or entities exercising control over the entity conducting the assessment?	<input type="checkbox"/> yes <input type="checkbox"/> no
4.	I receive or have received additional remuneration ³ , in a significant amount, from the entity conducting the assessment or a related party, except for the remuneration I received as a member of the supervisory board or some other supervising or controlling body, including the audit committee.	<input type="checkbox"/> yes <input type="checkbox"/> no
5.	I maintain or in the last year since the date of appointment I have maintained significant economic relations with the entity conducting the assessment or a related party, directly or as an owner, partner, shareholder or member of the supervisory board or other supervising or controlling body, or a person holding a position in	<input type="checkbox"/> yes <input type="checkbox"/> no

¹ If the entity conducting the assessment satisfies the criteria specified in art. 128 section 4 of the Act on Statutory Auditors and Regulated Entities, then this period is 1 year.

² If the entity conducting the assessment satisfies the criteria specified in art. 128 section 4 of the Act on Statutory Auditors and Regulated Entities, then this period is 1 year.

³ Additional remuneration:

1. includes participation in a system of allocating share options or some other performance-based remuneration system;
2. does not include the receipt of fixed amounts of remuneration under a retirement plan, including deferred compensation, for any prior service in a given public interest entity, where such remuneration is not contingent on the person’s continued employment in a given public interest entity.

senior management, including a member of the management board or some other managing body of an entity maintaining such relationships.		
6. I am or in the last 2 years since the date of appointment I have been:		
1.	an owner, partner (including a general partner) or shareholder of the current or previous audit firm auditing the financial statements of the entity conducting the assessment or a related party;	<input type="checkbox"/> yes <input type="checkbox"/> no
2.	a member of the supervisory board or some other supervising or controlling body of the current or previous audit firm auditing the financial statements of the entity conducting the assessment;	<input type="checkbox"/> yes <input type="checkbox"/> no
3.	an employee or a member of senior management, including a member of the management board or some other managing body of the current or previous audit firm auditing the financial statements of the entity conducting the assessment or a related party;	<input type="checkbox"/> yes <input type="checkbox"/> no
4.	some other natural person whose services have been used or supervised by the current or previous audit firm or any statutory auditor acting on its behalf.	<input type="checkbox"/> yes <input type="checkbox"/> no
5.	I am a member of the management board or some other managing body of an entity in which a member of the supervisory board or some other supervising or controlling body is a member of the management board or some other managing body of the entity conducting the assessment.	<input type="checkbox"/> yes <input type="checkbox"/> no
6.	I have been a member of the supervisory board or some other supervising or controlling body of the entity conducting the assessment for longer than 12 years.	<input type="checkbox"/> yes <input type="checkbox"/> no
7.	I am the spouse, cohabitant, relative by blood or marriage in a straight line or in a collateral line up to the fourth degree of a member of the management board or some other managing body of the entity conducting the assessment or a person referred to in items 1–8.	<input type="checkbox"/> yes <input type="checkbox"/> no
8.	I am in an adoption, custody or guardianship relationship with a member of the management board or some other managing body of the entity conducting the assessment or a person referred to in items 1–8.	<input type="checkbox"/> yes <input type="checkbox"/> no
<input type="checkbox"/> I have the full capacity to execute legal acts. <input type="checkbox"/> I consent to take the position specified in part II of this form (pertains to a candidate to be a member of the Audit Committee). <input type="checkbox"/> I have reviewed the data controller’s information for candidates and members of PZU SA’s corporate bodies.		
Date and signature:		

SECTION 2 – To be completed by the entity conducting the assessment	
9. Information on the position	
1. Name / business name of the entity:	
2. Corporate body and function / position:	Audit Committee <input type="checkbox"/> Audit Committee Chairperson <input type="checkbox"/> Audit Committee Member
3. Assessment summary	
1. Competences – accounting knowledge	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> – documented under the assessment of the supervisory board member (please indicate the pertinent attachment) <input type="checkbox"/> – document enclosed:
Documentation	
Comments:	
2. Competences – accounting skills	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> – documented under the assessment of the supervisory board member (please indicate the pertinent attachment) <input type="checkbox"/> – document enclosed:
Documentation	
Comments:	
3. Competences – knowledge on the audit of financial statements	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> – documented under the assessment of the supervisory board member (please indicate the pertinent attachment) <input type="checkbox"/> – document enclosed:
Documentation	
Comments:	
4. Competences – skills in the audit of financial statements	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> – documented under the assessment of the supervisory board member (please indicate the pertinent attachment) <input type="checkbox"/> – document enclosed:
Documentation	
Comments:	

<p>5. Competences – knowledge in the industry in which the public interest entity operates</p> <p>Documentation</p> <p>Comments:</p>	<p><input type="checkbox"/>satisfied <input type="checkbox"/>not satisfied</p> <p><input type="checkbox"/> – documented under the assessment of the supervisory board member (please indicate the pertinent attachment)</p> <p><input type="checkbox"/> – document enclosed:</p>
<p>6. Competences – skills in the industry in which the public interest entity operates</p> <p>Documentation</p> <p>Comments:</p>	<p><input type="checkbox"/>satisfied <input type="checkbox"/>not satisfied</p> <p><input type="checkbox"/> – documented under the assessment of the supervisory board member (please indicate the pertinent attachment)</p> <p><input type="checkbox"/> – document enclosed:</p>
<p>7. Independence</p> <p>Comments:</p>	<p><input type="checkbox"/>satisfied <input type="checkbox"/>not satisfied</p>
<p>8. Recommended actions</p>	
<p>1. Further to the assessment regarding the appointment of the candidate to the position, the following is recommended (pertains to a candidate to be a member of the Audit Committee):</p>	<p><input type="checkbox"/> appoint the candidate to the specified position</p> <p><input type="checkbox"/> withdraw from appointing the candidate to the position</p>
<p>2. In respect of the identified deviations from the requirements or other weaknesses –</p>	<p><input type="checkbox"/> in terms of knowledge and skills – direct to take additional courses / training sessions:</p> <p><input type="checkbox"/> other:</p>

the following remedial actions are recommended ⁴ :	
Date and signature of the entity's authorized representative:	

⁴ This should be filled out if deviations are identified from the regulatory requirements making it necessary to refrain from appointing a candidate to the position; this field may also be filled out if the candidate is appointed to the position.

Secondary Individual Assessment Form – Supervisory Board

SECTION 1 – to be filled out by the person undergoing assessment

1. Identification of the person undergoing assessment	
1. First name:	
2. Last name:	
3. Maiden name:	
4. Gender ¹ :	
5. Citizenship:	
6. Contact details (address/telephone/e-mail):	

7. Attachments to the secondary assessment form

Attachments should be attached to the form in which the information / declarations contained in the pertinent attachments to the previous suitability assessment form have changed, been updated or become outdated², and obligatorily, if they have not been produced under an assessment conducted in the last 12 months: the attachment pertaining to good conduct, assurance and time commitment.

Attachment 3.1 – education	<input type="checkbox"/>
Attachment 3.2 – competences	<input type="checkbox"/>
Attachment 3.3 – good conduct	<input type="checkbox"/>
Attachment 3.4 – assurance	<input type="checkbox"/>
Attachment 3.5 – financial standing and conflict of interest	<input type="checkbox"/>
Attachment 3.6 – combination of functions	<input type="checkbox"/>
Attachment 3.7 – time commitment	<input type="checkbox"/>

- I have the full capacity to execute legal acts.
- I declare that the data contained in the other attachments not attached to this form have not changed since the time of the prior suitability assessment dated: ..., and the declarations contained therein are still current.
- I have reviewed the data controller’s information for candidates and members of PZU SA’s corporate bodies.

Date and signature of the person undergoing the assessment:	
---	--

SECTION 2 – To be completed by the entity conducting the assessment

¹ Obligatory field solely in the event the information is necessary to pursue the diversity policy adopted by the entity.
² For instance, this may pertain to the performance of recommendations given after the last suitability assessment, new training sessions and studies, undertaking new obligations, the results of a new inspection, etc.

8. Information on the current position	
1. Name / business name of the entity:	
2. Corporate body and position:	Supervisory Board <input type="checkbox"/> Supervisory Board Chairperson <input type="checkbox"/> Supervisory Board Member ³
3. Scope of responsibility	
4. Reason for conducting the secondary suitability assessment	
1. Reasons for conducting the assessment ⁴ :	<input type="checkbox"/> periodic assessment conducted at least once a year
	<input type="checkbox"/> significant change to the rules of corporate governance in PZU affecting the content or the assessment of the satisfaction of the criteria of the Suitability Assessment
	<input type="checkbox"/> assessment prior to appointment to another term of office
	<input type="checkbox"/> a change in statutory requirements or related to the articles of association pertaining to the position
	<input type="checkbox"/> emergence of circumstances that may affect the Suitability Assessment, especially in the event of identified cases of: potential conflict of interest, criminal charges or charges in proceedings for fiscal offenses or causing significant financial losses or substantial breach of the responsibilities by Supervisory Board members, in particular in respect to Reputation,
	<input type="checkbox"/> entrusting additional powers or assumption of additional functions and positions outside the Company (assessment pertaining to time commitment and conflict of interest)
	<input type="checkbox"/> regular or flagrant instances of negative secondary assessment, whether individual or collective, of management board members (assessment made with respect to the assurance given by Supervisory Board members in terms of appointing or retaining such persons in the management board)
<input type="checkbox"/> other:	
2. Last suitability assessment	
1. Date of conducting the prior suitability assessment:	

³ Also pertains to the Supervisory Board Deputy Chairperson etc.

⁴ Several reasons can be marked simultaneously.

2.	Type of the prior suitability assessment:	<input type="checkbox"/> primary		
		<input type="checkbox"/> secondary		
3.	Reason for conducting the prior secondary suitability assessment ⁵ :			
4.	A copy of the previous suitability assessment form with attachments has been attached to the form.			<input type="checkbox"/>
5. Assessment summary				
1.	Competences – knowledge and experience:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> not applicable		
		<input type="checkbox"/> education		
	Comments:			
2.	Competences – skills:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> not applicable		
		<input type="checkbox"/> – skills		
	Comments:			
3.	Competences – Polish language	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> not applicable		
	Comments:			
4.	Assurance – good conduct:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied		
		<input type="checkbox"/> good conduct		
	Comments:			
5.	Assurance – reputation:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> not applicable		
		<input type="checkbox"/> assurance		
	Comments:			
6.	Assurance – independent view –	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> not applicable		

⁵ If applicable.

conflict of interest and financial standing: Comments:	<input type="checkbox"/> independent view
7. Assurance – independent view – behavioral attributes: Comments:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> not applicable <input type="checkbox"/> – behavioral attributes
8. Combination of functions: Comments:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> not applicable <input type="checkbox"/> time commitment
9. Time commitment: Remark:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> not applicable <input type="checkbox"/> combination of functions
10. Recommended actions	
1. Further to the assessment regarding the current position of the person undergoing assessment, the following is recommended:	<input type="checkbox"/> promptly dismiss the person undergoing assessment from the position; <input type="checkbox"/> suspend the person undergoing assessment until the requisite remedial means are applied; <input type="checkbox"/> retain the person undergoing assessment at the position; <input type="checkbox"/> appoint the person undergoing assessment for another term of office.
2. In respect of the identified aspects requiring improvement – the following remedial actions are recommended:	<input type="checkbox"/> in terms of the candidate’s education, experience and skills – the person undergoing assessment to be directed to take additional courses / training sessions: <input type="checkbox"/> in terms of time commitment – implement solutions to make it possible for the person undergoing assessment to ramp up his/her involvement:

	<input type="checkbox"/> in terms of time commitment – implement solutions to reduce the scope of required involvement of the person undergoing assessment: <input type="checkbox"/> in terms of the number of positions held – person undergoing assessment’s resignation from functions held concurrently: <input type="checkbox"/> in terms of a conflict of interest – eliminate the identified conflict of interest or introduce solutions to manage the conflict of interest: <input type="checkbox"/> other:
<input type="checkbox"/> According to the best knowledge of the entity conducting the assessment the data contained in the other attachments not attached to this form have not changed since the time of the prior suitability assessment dated: <input style="width: 50px;" type="text"/> / <input style="width: 50px;" type="text"/> / <input style="width: 50px;" type="text"/> , and the declarations contained therein are still current.	
Date and signature of the entity’s authorized representative:	

**Attachment 3.1 to the secondary individual evaluation form – Supervisory Board
EDUCATION**

SECTION 1 – to be completed by a member of a corporate body of the regulated entity

I. Higher education – completed in the period following the date of the declaration submitted under the previous evaluation

1	Name of university/college:		Title obtained:			
	Department/organizational unit:		Mode:	<input type="checkbox"/> full-time <input type="checkbox"/> part-time (formerly: evening/extramural)		
	Specialization:		Degree:	<input type="checkbox"/> 1st (bachelor/engineer) <input type="checkbox"/> 2nd (master)		
	Additional information:				Year of graduation	
					Attachment – diploma	<input type="checkbox"/> (attachment no.)
Completed to fill in deficiencies	<input type="checkbox"/> yes Date of the evaluation under which deficiencies were indicated:			<input type="checkbox"/> no		

II. Doctoral studies, academic titles and degrees – completed in the period following the date of the declaration submitted under the previous evaluation

1	Name of university/college:		Title obtained or academic degree:		
	Field/discipline:		Year of graduation or of obtaining the title/degree		
	Additional information:				Attachment – diploma
Completed to fill in deficiencies	<input type="checkbox"/> yes Date of the evaluation under which deficiencies were indicated:			<input type="checkbox"/> no	

III. Postgraduate studies completed, professional traineeships, certifications and other forms of supplementary education – completed in the period following the date of the declaration submitted under the previous evaluation				
1	Name of the institution organizing the training:		Subject:	
	Title/qualifications obtained:			Year of graduation:
	Additional information:			Attachment – diploma: <input type="checkbox"/> (attachment no.)
Completed to fill in deficiencies	<input type="checkbox"/> yes Date of the evaluation under which deficiencies were indicated:		<input type="checkbox"/> no	
IV. Specialist training – completed in the period following the date of the declaration submitted under the previous evaluation				
1	Name of the institution organizing the training:			
	Subject:		Year of graduation:	
	Additional information:			Attachment – diploma: <input type="checkbox"/> (attachment no.)
Completed to fill in deficiencies	<input type="checkbox"/> yes Date of the evaluation under which deficiencies were indicated:		<input type="checkbox"/> no	
V. Special professional qualifications held – acquired in the period following the date of the declaration submitted under the previous evaluation				
No.	Type of qualifications	Entry no.	Year of obtaining	Attachment – certificate

Attachment 3.1 – Education

1			<input type="checkbox"/> (attachment no.)
	Acquired to fill in deficiencies	Date of the evaluation under which deficiencies were indicated: <input type="checkbox"/> yes	<input type="checkbox"/> no
Date and signature of a member of a corporate body of the regulated entity:			

SECTION 2 – To be completed by the evaluator					
VI. Educational requirements and evaluation					
No.	Requirement ¹	Source of the requirement ²	Date of the requirement ³	Time limit for ensuring compliance ⁴	Execution
1					<input type="checkbox"/> fulfilled <input type="checkbox"/> not fulfilled <input type="checkbox"/> in progress
Date and signature of the entity's authorized representative:					

¹ The method of filling in the gaps in education, as indicated in the previous suitability evaluation performed by the regulated entity or by the regulatory authority as part of its supervisory activities, e.g. through additional training, courses, postgraduate studies or other.

² For instance, the previous suitability evaluation performed by the regulated entity, which indicated the obligation to fulfill the requirement.

³ The date when the obligation to fulfill the requirement was imposed.

⁴ The date by which the member of a corporate body is required to fulfill the requirement, i.e. to complete a specific training or course or obtain a pertinent certificate.

**Attachment 3.2 to the secondary individual assessment form – Supervisory Board
COMPETENCES (secondary assessment)**

1. Management competences in a regulated entity					
No.	Competence Description	Has your level of competence changed since the date of your appointment / last assessment (self-assessment) ¹	Has the level of competence of the member of the corporate body changed since the date of appointment / last assessment in the opinion of the regulated entity (assessment conducted by the entity) ²	Has the level required by the entity changed since the date of appointment / last assessment (level required by the entity) ³	Assessment of satisfying the requirements ⁴
1.	Familiarity with the market The member of the corporate body is familiar with the financial market	<input type="checkbox"/> NO <input type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> YES	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied

¹ Select one of the options and add the justification for the candidate’s self-assessment, considering in particular vocational and scientific accomplishments

² Select one of the options and add a justification, especially if the assessment differs from the self-assessment of the member of the corporate body.

³ Select one of the options.

⁴ If the value in the field “assessment conducted by the entity” is equal to or higher than the value in the field “level required by the entity”, select the option “satisfied”; otherwise select the option “not satisfied”.

	<p>in general, with special emphasis on the sector in which the regulated entity operates and with special emphasis on familiarity with the Polish market.</p>	<p><i>If the response “YES” is marked, please state the current level of competence (self-assessment)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><i>If the response “YES” is marked, please state the current level of competence (assessment conducted by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><i>If the response “YES” is marked, please state the current level of competence (level required by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	
2.	<p>Familiarity with the legal requirements and regulatory framework</p> <p>The member of the corporate body is familiar with the regulations, the recommendations of the regulatory authority and the best practices governing business in the financial market sector in which the regulated entity operates.</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p> <p><i>If the response “YES” is marked, please state the current level of competence (self-assessment)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p> <p><i>If the response “YES” is marked, please state the current level of competence (assessment conducted by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p> <p><i>If the response “YES” is marked, please state the currently required level of competence (level required by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied</p>
3.		<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p>	

	<p>Strategic planning (possession of management skills) The member of the corporate body grasps the institution’s business strategy / business plan and is capable of implementing it.</p>	<p><i>If the response “YES” is marked, please state the current level of competence (self-assessment)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><i>If the response “YES” is marked, please state the current level of competence (assessment conducted by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><i>If the response “YES” is marked, please state the current level of competence (level required by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied</p>
4.	<p>Familiarity with the management system, including risk management The member of the corporate body grasps risk management methodology – identifying, assessing, monitoring, controlling and mitigating the main types of risk applicable to the institution.</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p> <p><i>If the response “YES” is marked, please state the current level of competence (self-assessment)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p> <p><i>If the response “YES” is marked, please state the current level of competence (assessment conducted by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p> <p><i>If the response “YES” is marked, please state the current level of competence (level required by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied</p>
5.	<p>Accounting and financial audit</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p>	

	<p>The member of the corporate body possesses current knowledge on accounting, accounting standards and financial audit.</p>	<p><i>If the response “YES” is marked, please state the current level of competence (self-assessment)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><i>If the response “YES” is marked, please state the current level of competence (assessment conducted by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><i>If the response “YES” is marked, please state the current level of competence (level required by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied</p>
<p>6.</p>	<p>Oversight, control and internal audit The member of the corporate body grasps the principles and standards of the audit and internal control system.</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p> <p><i>If the response “YES” is marked, please state the current level of competence (self-assessment)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p> <p><i>If the response “YES” is marked, please state the current level of competence (assessment conducted by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p> <p><i>If the response “YES” is marked, please state the current level of competence (level required by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied</p>
<p>7.</p>		<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p>	

	<p>Intpretation of financial information (possession of finance and accounting skills) The member of the corporate body is capable of interpreting financial data and accounting data, is capable of analyzing and drawing conclusions on the basis of the data presented as required for management in the entity while simultaneously taking the market situation into account.</p>	<p><i>If the response “YES” is marked, please state the current level of competence (self-assessment)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><i>If the response “YES” is marked, please state the current level of competence (assessment conducted by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><i>If the response “YES” is marked, please state the current level of competence (level required by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied</p>
8.	<p>Possession of insurance skills The member of the corporate body is capable of interpreting insurance information, is capable of analyzing and drawing conclusions on the basis of the data presented as required for management in the entity while simultaneously taking the market situation into account.</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p> <p><i>If the response “YES” is marked, please state the current level of competence (self-assessment)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p> <p><i>If the response “YES” is marked, please state the current level of competence (assessment conducted by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p> <p><i>If the response “YES” is marked, please state the current level of competence (level required by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied</p>
9.	<p>Possession of actuarial skills</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p>	

	<p>The member of the corporate body grasps the significance and the role of the actuarial function in the entity; is capable of analyzing data and interpreting information while giving consideration to the entity’s strategy and market situation.</p>	<p><i>If the response “YES” is marked, please state the current level of competence (self-assessment)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><i>If the response “YES” is marked, please state the current level of competence (assessment conducted by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><i>If the response “YES” is marked, please state the current level of competence (level required by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied</p>
<p>10.</p>	<p>Polish language proficiency The member of the corporate body has proven Polish language proficiency, communicates effectively in Polish with employees (on everyday and industry-related topics), grasps the topics discussed during a meeting of the corporate body; is capable of using the Polish language in presentations and addresses during conferences, workshops and key meetings.</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p> <p><i>If the response “YES” is marked, please state the current level of competence (self-assessment)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p> <p><i>If the response “YES” is marked, please state the current level of competence (assessment conducted by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p> <p><i>If the response “YES” is marked, please state the currently required level of competence (level required by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied</p>

<p>11.</p>	<p>Other (which ones):</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (self-assessment)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (assessment conducted by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (level required by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied</p>
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12. Competences in managing the risks in the regulated entity's business					
No.	Competence Description	Has your level of competence changed since the date of your appointment / last assessment (self-assessment) ⁵	Has the level of competence of the member of the corporate body changed since the date of appointment / last assessment in the opinion of the regulated entity (assessment conducted by the entity) ⁶	Has the level required by the entity changed since the date of appointment / last assessment (level required by the entity) ⁷	Assessment of satisfying the requirements ⁸
1.	Risk ⁹	<input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (self-assessment)</i> <input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (assessment conducted by the entity)</i> <input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (level required by the entity)</i> <input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied

⁵ Select one of the options and add the justification for the candidate's self-assessment, considering in particular vocational and scientific accomplishments

⁶ Select one of the options and add a justification, especially if the assessment differs from the self-assessment of the candidate.

⁷ Select one of the options.

⁸ If the value in the field "assessment conducted by the entity" is equal to or higher than the value in the field "level required by the entity", select the option "satisfied"; otherwise select the option "not satisfied".

⁹ Risks in the regulated entity's business: risks ensuing from the insurance undertaking's business profile, including actuarial risk, market risk, credit risk, liquidity risk, operational risk and other significant risks for the insurance undertaking.

2. Competences in managing the main areas in the regulated entity's business					
No.	Competence Description	Has your level of competence changed since the date of your appointment / last assessment (self-assessment) ¹⁰	Has the level of competence of the member of the corporate body changed since the date of appointment / last assessment in the opinion of the regulated entity (assessment conducted by the entity) ¹¹	Has the level required by the entity changed since the date of appointment / last assessment (level required by the entity) ¹²	Assessment of satisfying the requirements ¹³
1.	Line of business	<input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (self-assessment)</i> <input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (assessment conducted by the entity)</i> <input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (level required by the entity)</i> <input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied

¹⁰ Select one of the options and add the justification for the candidate's self-assessment, considering in particular vocational and scientific accomplishments

¹¹ Select one of the options and add a justification, especially if the assessment differs from the self-assessment of the candidate.

¹² Select one of the options.

¹³ If the value in the field "assessment conducted by the entity" is equal to or higher than the value in the field "level required by the entity", select the option "satisfied"; otherwise select the option "not satisfied".

2. Personal competences					
No.	Competence Description	Has your level of competence changed since the date of your appointment / last assessment (self-assessment) ¹⁴	Has the level of competence of the member of the corporate body changed since the date of appointment / last assessment in the opinion of the regulated entity (assessment conducted by the entity) ¹⁵	Has the level required by the entity changed since the date of appointment / last assessment (level required by the entity) ¹⁶	Assessment of satisfying the requirements ¹⁷
1.	<p>Authenticity</p> <p>The words and actions of the member of the corporate body are consistent and his/her conduct is consistent with the values and convictions he/she espouses. The candidate openly states his/her intentions, ideas and opinions, encourages the community to be open and frank and correctly advises his/her boss of the factual situation, thereby recognizing existing risks and difficulties.</p>	Not applicable	<input type="checkbox"/> NO <input type="checkbox"/> YES Justification:	Not applicable	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied

¹⁴ Select one of the options and add the justification for the member of the corporate body’s self-assessment, considering in particular vocational and scientific accomplishments

¹⁵ Select one of the options and add a justification, especially if the assessment differs from the self-assessment of the candidate.

¹⁶ Select one of the options.

¹⁷ If the value in the field “assessment conducted by the entity” is equal to or higher than the value in the field “level required by the entity”, select the option “satisfied”; otherwise select the option “not satisfied”.

2.	<p>Language The member of the corporate body is capable of communicating orally in an organized and conventional manner and of writing in his/her mother tongue or the language used at work in the place where the institution is located.</p>	<input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (self-assessment)</i> <input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (assessment conducted by the entity)</i> <input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
3.	<p>Firmness The member of the corporate body makes decisions on a timely basis on the basis of the available information, acting quickly or in accordance with the specific method of action, for example expressing his/her views and not deferring the time of decision-making.</p>	Not applicable	<input type="checkbox"/> NO <input type="checkbox"/> YES Justification:	Not applicable	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
4.	<p>Communication The member of the corporate body is capable of conveying information in an understandable and socially acceptable manner and in the appropriate form. He/she focuses on conveying and obtaining clear and transparent information and encourages active feedback.</p>	<input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (self-assessment)</i> <input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (assessment conducted by the entity)</i> <input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied

5.	<p>View The member of the corporate body is capable of making an accurate assessment of information and various methods of operation and reaches logical conclusions. He/she checks, investigates and grasps significant issues. He/she possesses the skill of making a holistic assessment of the situation transcending the perspective of the position held, especially when solving problems that may pose a threat to business continuity.</p>	<p><input type="checkbox"/>NO <input type="checkbox"/>YES <i>If the response “YES” is marked, please state the current level of competence (self-assessment)</i></p> <p><input type="checkbox"/>Lack <input type="checkbox"/>Basic <input type="checkbox"/>Average <input type="checkbox"/>High <input type="checkbox"/>Very high</p> <p>Justification:</p>	<p><input type="checkbox"/>NO <input type="checkbox"/>YES <i>If the response “YES” is marked, please state the current level of competence (assessment conducted by the entity)</i></p> <p><input type="checkbox"/>Lack <input type="checkbox"/>Basic <input type="checkbox"/>Average <input type="checkbox"/>High <input type="checkbox"/>Very high</p> <p>Justification:</p>	<p><input type="checkbox"/>Lack <input type="checkbox"/>Basic <input type="checkbox"/>Average <input type="checkbox"/>High <input type="checkbox"/>Very high</p>	<p><input type="checkbox"/>satisfied <input type="checkbox"/>not satisfied</p>
6.	<p>Cares about clients and high standards The member of the corporate body focuses on ensuring high standards and, if possible, finding methods of augmenting them. In particular: refuses to consent to developing and marketing products and services and incurring capital expenditures in circumstances in which he/she is not able to measure risk appropriately in connection with a lack of understanding concerning the structure, principles or basic assumptions underpinning the proposed solution. Identifies and investigates clients’ needs and expectations and provides for conveying information to clients that is correct, complete and understandable. Gives special consideration to the value of the product to the client and the product’s adequacy and suitability.</p>	<p><input type="checkbox"/>NO <input type="checkbox"/>YES <i>If the response “YES” is marked, please state the current level of competence (self-assessment)</i></p> <p><input type="checkbox"/>Lack <input type="checkbox"/>Basic <input type="checkbox"/>Average <input type="checkbox"/>High <input type="checkbox"/>Very high</p> <p>Justification:</p>	<p><input type="checkbox"/>NO <input type="checkbox"/>YES <i>If the response “YES” is marked, please state the current level of competence (assessment conducted by the entity)</i></p> <p><input type="checkbox"/>Lack <input type="checkbox"/>Basic <input type="checkbox"/>Average <input type="checkbox"/>High <input type="checkbox"/>Very high</p> <p>Justification:</p>	<p><input type="checkbox"/>Lack <input type="checkbox"/>Basic <input type="checkbox"/>Average <input type="checkbox"/>High <input type="checkbox"/>Very high</p>	<p><input type="checkbox"/>satisfied <input type="checkbox"/>not satisfied</p>

7.	<p>Leadership skills The member of the corporate body points out the directions of activity and provides leadership, supports team work, motivates employees and ensures that they have the appropriate professional competences to perform their functions or that are necessary to achieve the intended objectives. Is open to criticism and ensures the conduct of constructive debate.</p>	<p><input type="checkbox"/>NO <input type="checkbox"/>YES <i>If the response “YES” is marked, please state the current level of competence (self-assessment)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/>NO <input type="checkbox"/>YES <i>If the response “YES” is marked, please state the current level of competence (assessment conducted by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p>	<p><input type="checkbox"/>satisfied <input type="checkbox"/>not satisfied</p>
8.	<p>Loyalty The member of the corporate body identifies with the organization and demonstrates engagement. Shows that he/she is capable of devoting enough time to work and is capable of performing his/her duties appropriately, defends the interests of the organization and acts objectively and critically. Recognizes and anticipates prospective conflicts of interest.</p>	<p>Not applicable</p>	<p><input type="checkbox"/>NO <input type="checkbox"/>YES</p> <p>Justification:</p>	<p>Not applicable</p>	<p><input type="checkbox"/>satisfied <input type="checkbox"/>not satisfied</p>

<p>9.</p>	<p>External awareness The member of the corporate body monitors on an ongoing basis the state of the organization, its balance of power and the accepted operating methods. He/she is well aware of the economic situation in the country and around the world (including financial, economic and social development), which may exert an influence on the organization and the interests of various entities. At the same time, the candidate is capable of effectively using this information.</p>	<p><input type="checkbox"/>NO <input type="checkbox"/>YES <i>If the response "YES" is marked, please state the current level of competence (self-assessment)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/>NO <input type="checkbox"/>YES <i>If the response "YES" is marked, please state the current level of competence (assessment conducted by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p>	<p><input type="checkbox"/>satisfied <input type="checkbox"/>not satisfied</p>
<p>10.</p>	<p>Negotiations The member of the corporate body identifies and discloses interests in a manner that aims to achieve consensus in striving to achieve negotiating goals.</p>	<p><input type="checkbox"/>NO <input type="checkbox"/>YES <i>If the response "YES" is marked, please state the current level of competence (self-assessment)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/>NO <input type="checkbox"/>YES <i>If the response "YES" is marked, please state the current level of competence (assessment conducted by the entity)</i></p> <p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p> <p>Justification:</p>	<p><input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high</p>	<p><input type="checkbox"/>satisfied <input type="checkbox"/>not satisfied</p>

<p>11.</p>	<p>Persuasion The member of the corporate body is capable of influence others’ opinions by using his/her gift of persuasion and natural authority and tactfulness. He/she has a strong personality and the skill of remaining firm.</p>	<p><input type="checkbox"/>NO <input type="checkbox"/>YES <i>If the response “YES” is marked, please state the current level of competence (self-assessment)</i></p> <p><input type="checkbox"/>Lack <input type="checkbox"/>Basic <input type="checkbox"/>Average <input type="checkbox"/>High <input type="checkbox"/>Very high</p> <p>Justification:</p>	<p><input type="checkbox"/>NO <input type="checkbox"/>YES <i>If the response “YES” is marked, please state the current level of competence (assessment conducted by the entity)</i></p> <p><input type="checkbox"/>Lack <input type="checkbox"/>Basic <input type="checkbox"/>Average <input type="checkbox"/>High <input type="checkbox"/>Very high</p> <p>Justification:</p>	<p><input type="checkbox"/>Lack <input type="checkbox"/>Basic <input type="checkbox"/>Average <input type="checkbox"/>High <input type="checkbox"/>Very high</p>	<p><input type="checkbox"/>satisfied <input type="checkbox"/>not satisfied</p>
<p>12.</p>	<p>Team work The member of the corporate body is aware of the group’s interests and contributes to achieving the common goal; is capable of functioning as part of the group.</p>	<p><input type="checkbox"/>NO <input type="checkbox"/>YES <i>If the response “YES” is marked, please state the current level of competence (self-assessment)</i></p> <p><input type="checkbox"/>Lack <input type="checkbox"/>Basic <input type="checkbox"/>Average <input type="checkbox"/>High <input type="checkbox"/>Very high</p> <p>Justification:</p>	<p><input type="checkbox"/>NO <input type="checkbox"/>YES <i>If the response “YES” is marked, please state the current level of competence (assessment conducted by the entity)</i></p> <p><input type="checkbox"/>Lack <input type="checkbox"/>Basic <input type="checkbox"/>Average <input type="checkbox"/>High <input type="checkbox"/>Very high</p> <p>Justification:</p>	<p><input type="checkbox"/>Lack <input type="checkbox"/>Basic <input type="checkbox"/>Average <input type="checkbox"/>High <input type="checkbox"/>Very high</p>	<p><input type="checkbox"/>satisfied <input type="checkbox"/>not satisfied</p>

13.	<p>Strategic skills The member of the corporate body is capable of creating and developing realistic plans and strategies concerning future growth (by pursuing scenario analysis among other methods), which translates into the skill of setting long-term goals. Duly incorporates the risk to which the organization is exposed and takes the right steps to manage this risk.</p>	<input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (self-assessment)</i> <input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (assessment conducted by the entity)</i> <input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
14.	<p>Resilience to stress The member of the corporate body is resilient to stress and is capable of acting logically even in the face of major pressure and in times of uncertainty.</p>	<input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (self-assessment)</i> <input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (assessment conducted by the entity)</i> <input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
15.	<p>Feeling of responsibility The member of the corporate body grasps internal and external determinants, assesses them diligently and takes them into account. Is capable of drawing conclusions and is aware of how his/her actions influence the interests of interested parties.</p>	<p style="text-align: center;">Not applicable</p>	<input type="checkbox"/> NO <input type="checkbox"/> YES Justification:	<p style="text-align: center;">Not applicable</p>	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied

16.	<p>Presiding over meetings The member of the corporate body is capable of effectively and efficiently presiding over meetings, creating an atmosphere of openness and encouraging everyone to take part on equal footing; is oriented when it comes to the tasks and duties of the other persons.</p>	<input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (self-assessment)</i> <input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (assessment conducted by the entity)</i> <input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied
17.	<p>Other (which ones):</p>	<input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (self-assessment)</i> <input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> NO <input type="checkbox"/> YES <i>If the response "YES" is marked, please state the current level of competence (assessment conducted by the entity)</i> <input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high Justification:	<input type="checkbox"/> Lack <input type="checkbox"/> Basic <input type="checkbox"/> Average <input type="checkbox"/> High <input type="checkbox"/> Very high	<input type="checkbox"/> satisfied <input type="checkbox"/> not satisfied

Date and signature of the candidate:	
Date and signature of the entity's authorized representative:	

**Attachment 3.3 to the secondary individual evaluation form – Supervisory Board
GOOD CONDUCT**

SECTION 1 – to be completed by a member of a corporate body of the insurance undertaking

I. Good conduct

A certificate ¹ of no criminal record for intentional offenses or intentional fiscal offenses has been attached to the evaluation form.	<input type="checkbox"/>
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DECLARATION²: I declare that I have/have not ³ been convicted for an intentional offense or an intentional fiscal offense confirmed by a final non-appealable court judgment.	<input type="checkbox"/>
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II. Criminal proceedings

There are no pending criminal proceedings against me and since the date of the declaration submitted under the previous evaluation there have been no such criminal proceedings before Polish or foreign judicial authorities.	<input type="checkbox"/>
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There are pending criminal proceedings against me or since the date of the declaration submitted under the previous evaluation the following criminal proceedings have been pending against me:	<input type="checkbox"/>

No.	Attachments
1.	

I am aware³ of the criminal liability for submitting a false declaration in accordance with Article 233 of the Criminal Code.

Date and signature of a member of a corporate body of the insurance undertaking:	
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¹ A certificate issued by the National Criminal Register and, in respect of foreigners, also by the competent authorities of their country of residence, should be submitted no later than 3 months from the date of issue.

² If a certificate of no criminal record has been submitted, no declaration is required.

³ Delete as applicable.

SECTION 2 – To be completed by the evaluator

III. Summary of the entity’s evaluation	
The information provided by the member of a corporate body of the insurance undertaking in this form has an unfavorable impact on the evaluation of his/her good conduct record in terms of suitability for performing the function of member of a corporate body of the regulated entity.	<input type="checkbox"/> yes <input type="checkbox"/> no
Date and signature of the entity’s authorized representative:	

**Attachment 3.4 to the secondary individual evaluation form – Supervisory Board
ASSURANCE**

SECTION 1 – to be completed by a member of a corporate body of the insurance undertaking

I. Administrative sanctions against a member of a corporate body of the insurance undertaking

In the period following the date of the declaration submitted under the previous evaluation:

no administrative sanction has been imposed on me.

the following administrative sanctions have been imposed on me:

If the answer is affirmative, please provide information about the case related to the imposed administrative sanctions, the entity and function concerned, and describe the sanctions and the result of their application.

II. Administrative sanctions imposed on other entities

In the period following the date of the declaration submitted under the previous evaluation, in respect of other entities and in connection with the scope of my duties:

no administrative sanction has been imposed.

the following administrative sanctions have been imposed:

If the answer is affirmative, please provide information about the case related to the imposed administrative sanctions, the entity and function concerned, and describe the sanctions and the result of their application.

III. Supervisory measures against a member of a corporate body of the insurance undertaking

In the period following the date of the declaration submitted under the previous evaluation:

no supervisory measures have been taken against me by the competent financial regulatory authorities and no similar actions have been taken by other authorized entities on the basis of separate acts in connection with irregularities in the activities of entities subject to the supervision of such regulatory authorities in which I am or have been a member of the management body.

the following supervisory measures have been taken against me by the competent financial regulatory authorities or the following similar actions have been taken by other authorized entities on the basis of separate acts in connection with irregularities in the activities of entities subject to the supervision of such regulatory authorities in which I am or have been a member of the management body:

If the answer is affirmative, please provide information about the case related to the supervisory measures taken, the entity and function concerned, and

<i>describe the measures and the result of their application.</i>	
IV. Supervisory measures against other entities	
In the period following the date of the declaration submitted under the previous evaluation, in respect of other entities and in connection with the scope of my duties:	
no supervisory measures have been taken by the competent financial regulatory authorities and no similar actions have been taken by other authorized entities on the basis of separate acts in respect of entities in which I hold or have held shares equal to or exceeding 10% of the total number of votes at the shareholder meeting or in the share capital, or in relation to which I am or have been the parent entity, due to irregularities in the activities of such these entities, if such entities perform or have performed activities subject to the supervision of the competent regulatory authority in the country of their registered office.	<input type="checkbox"/>
the following supervisory measures have been taken by the competent financial regulatory authorities or the following similar actions have been taken by other authorized entities on the basis of separate acts in respect of entities in which I hold or have held shares equal to or exceeding 10% of the total number of votes at the shareholder meeting or in the share capital, or in relation to which I am or have been the parent entity, due to irregularities in the activities of such these entities, if such entities perform or have performed activities subject to the supervision of the competent regulatory authority in the country of their registered office: <i>If the answer is affirmative, please provide information about the case related to the supervisory measures taken, the entity and function concerned, and describe the measures and the result of their application.</i>	<input type="checkbox"/>
V. Judicial proceedings in connection with a business case	
In the period following the date of the declaration submitted under the previous evaluation:	
no judicial proceedings are or have been pending against me in connection with a business case.	<input type="checkbox"/>
judicial proceedings are or have been pending against me in connection with a business case. <i>If the answer is affirmative, please provide the type(s) of case(s), entities participating in the proceedings (plaintiffs, participants, etc.) and the subject matter of the case(s) (type, nature and amount of the claim, challenged behavior):</i>	<input type="checkbox"/>
VI. Conduct of activity without the required decision	
In the period following the date of the declaration submitted under the previous evaluation:	
I have not conducted any activity on the financial market without the required	<input type="checkbox"/>

decision in a situation where such activity required the issuance of a decision by the competent authority.	
I have conducted certain activity on the financial market without the required decision in a situation where such activity required the issuance of a decision by the competent authority: <i>If the answer is affirmative, please describe the circumstances of the case and decisions, if any, in administrative, preparatory or judicial proceedings in respect of the deed committed.</i>	<input type="checkbox"/>
VII. Use of the financial system for money laundering	
In the period following the date of the declaration submitted under the previous evaluation:	
I have not committed any of the deeds referred to in Article 1(3) of Directive (EU) 2015/849 of the European Parliament and of the Council of 20 May 2015 on the prevention of the use of the financial system for the purposes of money laundering or terrorist financing (OJ L 2015.141/73).	<input type="checkbox"/>
I have committed some of the deeds referred to in Article 1(3) of Directive (EU) 2015/849 of the European Parliament and of the Council of 20 May 2015 on the prevention of the use of the financial system for the purposes of money laundering or terrorist financing (OJ L 2015.141/73). <i>If the answer is affirmative, please describe the circumstances of the case and decisions, if any, in administrative, preparatory or judicial proceedings in respect of the deed committed.</i>	<input type="checkbox"/>
VIII. Civil law claims related to the performance of managerial functions	
In the period following the date of the declaration submitted under the previous evaluation:	
no civil law claims have been brought against me or legally recognized in connection with my performance of managerial functions in business entities.	<input type="checkbox"/>
civil law claims have been brought against me or legally recognized in connection with my performance of managerial functions in business entities. <i>If the answer is affirmative, please describe the activity of which entity was related to the claim, what the basis for and circumstances of the claim were and what behavior was challenged by the subject matter of each claim and what their amount was.</i>	<input type="checkbox"/>
IX. Judicial, disciplinary or enforcement proceedings – other than those mentioned above	
In the period following the date of the declaration submitted under the previous evaluation:	
I have not acted and I am not acting as a party in any judicial proceedings that may or may have had a negative impact on my financial standing, or in any disciplinary or enforcement proceedings.	<input type="checkbox"/>

I have acted or I am acting as a party in the following judicial proceedings that may or may have had a negative impact on my financial situation, or in the disciplinary or enforcement proceedings (specify):	<input type="checkbox"/>
X. Financial liability of an employee	
In the period following the date of the declaration submitted under the previous evaluation:	
I have not caused any damage for which I would be financially liable in accordance with the provisions of the Labor Code in my current workplace(s).	<input type="checkbox"/>
I have caused the following damage for which I have been financially liable in accordance with the provisions of the Labor Code in my current workplace(s) (specify):	<input type="checkbox"/>
XI. Prohibitions on holding a specific position, performing a specific profession or conducting a specific business activity	
In the period following the date of the declaration submitted under the previous evaluation:	
no prohibition has been ruled against me on holding a specific position, performing a specific profession or conducting a specific business activity.	<input type="checkbox"/>
in the following circumstances, a prohibition has been ruled against me on holding a specific position, performing a specific profession or conducting a specific business activity (specify):	<input type="checkbox"/>
XII. Refusal to grant consent or authorization	
In the period following the date of the declaration submitted under the previous evaluation:	
I have not been refused any authorization or consent in connection with my activity or planned activity or my performance of a function in an entity operating on the financial market.	<input type="checkbox"/>
in the following circumstances, I have been refused an authorization or consent in connection with my activity or planned activity or my performance of a function in an entity operating on the financial market (specify):	<input type="checkbox"/>
XIII. Withdrawal of consent or authorization	
In the period following the date of the declaration submitted under the previous evaluation:	
I have not been dispossessed of any authorization or consent in connection with my activity or my performance of a function in an entity operating on the financial market.	<input type="checkbox"/>
in the following circumstances, I have been dispossessed of an authorization or consent in connection with my activity or my performance of a function in an entity operating on the financial market (specify):	<input type="checkbox"/>

XIV. Termination of an employment relationship at the initiative of the employer	
In the period following the date of the declaration submitted under the previous evaluation:	
my employment in an entity operating on the financial market has not been terminated at the initiative of the employer or client.	<input type="checkbox"/>
in the following circumstances, my employment(s) in entities operating on the financial market have been terminated at the initiative of employers or clients (specify):	<input type="checkbox"/>
XV. Liquidation, bankruptcy, restructuring or recovery proceedings	
In the period following the date of the declaration submitted under the previous evaluation:	
there have not been and there are no liquidation, bankruptcy, reorganization or restructuring proceedings against entities in which I perform or have performed management functions or in which I hold or have held a stake equal to or exceeding 10% of the total number of votes at the shareholder meeting or in the share capital or in respect of which I am or have been the parent entity.	<input type="checkbox"/>
the following liquidation, bankruptcy, reorganization or restructuring proceedings have been or are being conducted against entities in which I perform or have performed management functions or in which I hold or have held a stake equal to or exceeding 10% of the total number of votes at the shareholder meeting or in the share capital or in respect of which I am or have been the parent entity (specify):	<input type="checkbox"/>
XVI. Declaration of bankruptcy – business activity	
In the period following the date of the declaration submitted under the previous evaluation:	
in respect of me as a natural person engaged in business activity, no bankruptcy has been declared and no petition for bankruptcy has been legally dismissed because the debtor’s assets were insufficient to cover the costs of the proceedings.	<input type="checkbox"/>
in respect of me as a natural person engaged in business activity, bankruptcy has been declared or a petition for bankruptcy has been legally dismissed because the debtor’s assets were insufficient to cover the costs of the proceedings. <i>If the answer is affirmative, please describe the line of your business and explain the reasons for your insolvency:</i>	<input type="checkbox"/>

XVII. Declaration of bankruptcy – natural person	
In the period following the date of the declaration submitted under the previous evaluation:	
in respect of me as a natural person not engaged in business activity, no bankruptcy has been declared and no petition for bankruptcy has been legally dismissed for any of the reasons specified in Article 491 ⁴ of the Act of 28 February 2003 entitled Bankruptcy Law (consolidated text: Journal of Laws of 2019, Item 498, as amended).	<input type="checkbox"/>
in respect of me as a natural person not engaged in business activity, bankruptcy has been declared or a petition for bankruptcy has been legally dismissed for any of the reasons specified in Article 491 ⁴ of the Act of 28 February 2003 entitled Bankruptcy Law (consolidated text: Journal of Laws of 2019, Item 498, as amended). <i>If the answer is affirmative, please provide the circumstances regarding the reasons for your insolvency:</i>	<input type="checkbox"/>
XVIII. Register of debtors	
In the period following the date of the declaration submitted under the previous evaluation:	
as a natural person, I have not been entered in the register of debtors.	<input type="checkbox"/>
as a natural person, I have been entered in the register of debtors. <i>If the answer is affirmative, please provide the basis for the entry:</i>	<input type="checkbox"/>
XIX. Discharges to a member of a corporate body on the performance of his/her duties	
In the period following the date of the declaration submitted under the previous evaluation:	
in connection with my functions in the management or supervisory bodies of commercial companies, I have always obtained a discharge on the performance of my duties.	<input type="checkbox"/>
in connection with my functions in the management or supervisory bodies of commercial companies, I have not obtained a discharge on the performance of my duties. <i>Please provide the name of the company(-ies), the address of its registered office, its line of business and the type of function performed, and describe the reasons why the discharge was not granted:</i>	<input type="checkbox"/>
I confirm the declarations made in this form and I am aware of the criminal liability criminal liability for submitting a false declaration in accordance with Article 233 of the	

Criminal Code.	
Date and signature of a member of a corporate body of the insurance undertaking:	

SECTION 2 – To be completed by the evaluator		
XX. Compliance by a member of the supervisory body with the entrusted responsibilities		
As a member of the supervisory body, the person subject to evaluation complies/fails to comply ² with the obligations arising from the provisions of the Commercial Company Code and the Act on Insurance and Reinsurance Activity and/or the guidelines and recommendations of the Polish Financial Supervision Authority, in particular by properly exercising supervision over the activity of the insurance undertaking. Description and comments on the evaluation ³ :		
XXI. Membership in committees		
1.	The person subject to evaluation is a member of a committee operating within the entity:	
	Responsibilities within the committee:	
The person subject to evaluation complies/fails to comply ² with the responsibilities entrusted to him/her in the committee. Description and comments on the evaluation:		
XXII. Irregularities related to the scope of duties/responsibilities of a member of a corporate body of the insurance undertaking detected as a result of the inspection¹		
2.	Designation of the inspecting entity:	
	Period covered by the inspection:	
	Date of inspection:	
	Scope of inspection:	
	Scope of the responsibilities of the member of a corporate body of the insurance undertaking as at the	

¹ This pertains to inspection activities related to the performance by the member of the corporate body of a function in the regulated entity conducting the evaluation; includes internal audits and inspections, audits of external entities, inspections by administrative authorities (excluding the Polish Financial Supervision Authority); analysis should cover the period since the last evaluation.

	date of the inspection:	
	Identified irregularities in the scope of duties/responsibilities of the member of a corporate body of the insurance undertaking:	
	Actions by the member of a corporate body of the insurance undertaking aimed at removing the irregularities	
XXIII. Irregularities related to the scope of duties/responsibilities of a member of a corporate body of the insurance undertaking detected as a result of supervisory activities conducted by the regulatory authority		
1.	Type of supervisory activity:	
	Date of supervisory activity:	
	Period covered by supervisory activity:	
	Scope of supervisory activity:	
	Scope of the responsibilities of the member of a corporate body of the insurance undertaking as at the date of the supervisory activity:	
	Identified irregularities in the scope of duties/responsibilities of the member of a corporate body of the insurance undertaking:	
	Actions by the member of a corporate body of the insurance undertaking aimed at removing the irregularities:	

XXIV. Summary of the regulated entity's evaluation	
The information provided in this form has an unfavorable impact on the evaluation of the person's assurance in terms of suitability for the performance of a function of a member of a corporate body of the regulated entity.	<input type="checkbox"/> yes <input type="checkbox"/> no
Date and signature of the entity's authorized representative:	

**Attachment 3.5 to the secondary individual evaluation form – Supervisory Board
CONFLICT OF INTEREST**

SECTION 1 – to be completed by the candidate

I. Candidate’s declarations	
In the period following the date of the declaration submitted under the previous evaluation:	
I have acquired, directly or indirectly, directly or indirectly, stocks or shares in a commercial law company or the right to appoint at least one member of the management board in such company, which runs a business competitive to that of the entity in which I perform the function.	<input type="checkbox"/>
I have acquired, directly or indirectly, shares in another business entity (e.g. mutual insurance company, cooperative bank, cooperative savings and credit union) or the right to appoint at least one member of the management board of such entity, which runs a business competitive to that of the entity in which I perform the function.	<input type="checkbox"/>
I am/have been connected with the entity in which I perform the function by economic interests in the scope of my business activity, intellectual property rights or other reasons.	<input type="checkbox"/>
<i>Please list the subject matter of your cooperation with the entity in which you perform the function:</i>	
a relative ¹ of mine has acquired significant blocks of shares/stocks in the entity in which I perform the function.	<input type="checkbox"/>
I am/have been an employee/associate ² of an entity that is the holder of significant blocks of shares/stocks in the entity in which I perform the function.	<input type="checkbox"/>
a relative of mine is an employee of the entity in which I perform the function or an entity included in the scope of prudential consolidation.	<input type="checkbox"/>
I am/have been an employment/cooperation relationship with a person who is an employee of the entity in which I perform the function or an entity included in the scope of prudential consolidation.	<input type="checkbox"/>
I am/have been employed by another entity, which may lead to an actual or potential conflict of interest.	<input type="checkbox"/>
<i>Please list the entities concerned:</i>	

¹ Within the meaning of this form, a relative is a spouse, a domestic partner, a relative by blood, a relative by marriage up to the second degree or a person remaining with the candidate in the relationship of adoption, custody or guardianship.

² Within the meaning of this form, an associate is a person engaged in cooperation on a basis other than an employment contract, e.g. a mandate contract, a contract for specific work or any other civil-law contract.

I am a shareholder/member of a corporate body of an entity that is a significant counterparty ³ of the entity in which I perform the function.	<input type="checkbox"/>
<i>Please list the entities concerned:</i>	
a relative of mine is a significant counterparty or a member of a corporate body of a significant counterparty of the entity in which I perform the function.	<input type="checkbox"/>
<i>Please list the entities concerned:</i>	
I am in an employment/cooperation relationship with an entity that is a significant counterparty or with a person who is a member of a corporate body of a significant counterparty of the entity in which I perform the function.	<input type="checkbox"/>
<i>Please list the entities concerned:</i>	
I am a member of a corporate body of an entity that runs a business competitive to that of the entity in which I perform the function.	<input type="checkbox"/>
<i>Please list the competitive entities concerned:</i>	
my public activity raises a conflict of interest with the business of the entity in which I perform the function.	<input type="checkbox"/>
Date and signature of the candidate:	

³ Within the meaning of this form, a significant counterparty is, e.g., a significant service provider or a consulting company.

SECTION 2 – To be completed by the evaluator			
II. Solutions adopted for managing any identified conflicts of interest			
No.	Identified irregularity:	Management solutions adopted:	Is the solution effective?
1.			<input type="checkbox"/> yes <input type="checkbox"/> no
III. Summary of the entity's evaluation			
The information provided by the candidate in this form has an unfavorable impact on the evaluation of his/her independence of judgment in terms of the risk of a conflict of interest, in terms of suitability for the performance of the function of a member of a corporate body of the regulated entity.			<input type="checkbox"/> yes <input type="checkbox"/> no
Date and signature of the entity's authorized representative:			

**Attachment 3.6 to the secondary individual evaluation form – Supervisory Board
COMBINATION OF FUNCTIONS (SECONDARY EVALUATION)**

SECTION 1 – to be completed by a member of a corporate body in order to update and enable reevaluation of the member of the regulated entity’s corporate body in the event of changes in the period following the date of the declaration submitted under the previous evaluation

I. Information on functions performed in supervisory boards/non-executive directors							
No.	Name of the entity	Function performed/job title	Group/system of institutional protection	The evaluator holds a significant block of shares ¹	State Treasury representative	Performs currently/will perform	Area of operation
1.				<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> performs <input type="checkbox"/> will perform	<input type="checkbox"/> banking <input type="checkbox"/> pension <input type="checkbox"/> capital <input type="checkbox"/> insurance <input type="checkbox"/> other financial <input type="checkbox"/> non-financial
Total positions in supervisory boards							
Total positions in supervisory boards, including positions counted as single ones²							

¹ This means the holding of a direct or indirect holding in an enterprise, representing 10% or more of the capital or voting rights or exercising a significant influence over the management of the enterprise.

² A single position is considered to be a position held in supervisory boards of members of the same group or in entities covered by the same institutional protection system, or in entities in which the bank holds a significant block of shares.

II. Information on functions performed in management boards/executive directors							
No.	Name of the entity	Function performed/job title	Group/system of institutional protection	The evaluator holds a significant block of shares ³	Performs currently/will perform	Area of operation	
1.				<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> performs <input type="checkbox"/> will perform	<input type="checkbox"/> banking <input type="checkbox"/> pension <input type="checkbox"/> capital	<input type="checkbox"/> insurance <input type="checkbox"/> other financial <input type="checkbox"/> non-financial
Total positions in management boards							
Total positions in management boards, including positions counted as single ones⁴							
Date and signature:							

³ This means the holding of a direct or indirect holding in an enterprise, representing 10% or more of the capital or voting rights or exercising a significant influence over the management of the enterprise.

⁴ A single position is considered to be a position held in management boards of members of the same group or in entities covered by the same institutional protection system, or in entities in which the bank holds a significant block of shares.

SECTION 2 – To be completed by the evaluator	
III. Summary of the entity's evaluation	
The information provided by the member of a corporate body in this form has an unfavorable impact on the evaluation of his/her independence of judgment in terms of suitability for appointment as a member of a corporate body of the regulated entity.	<input type="checkbox"/> yes <input type="checkbox"/> no
Date and signature of the entity's authorized representative:	

**Attachment 3.7 to the secondary individual evaluation form – Supervisory Board
TIME COMMITMENT**

SECTION 1 – to be completed by a member of a corporate body of the regulated entity

This section of the declaration to be completed to update and enable reevaluation the member’s ability to spend enough time in the event of changes in the period following the date of the declaration submitted under the previous evaluation

I. Declaration by the member of a corporate body of the regulated entity

I have been informed about the expected minimum amount of time necessary for the proper performance of my duties and I declare my readiness to spend the following amount of time:	<input type="checkbox"/>
I am ready to spend more time during periods of particularly intense activity, e.g. in the event of restructuring or other emergency situations.	<input type="checkbox"/>
My current place of residence is:	<input type="checkbox"/> in the place of my employment <input type="checkbox"/> outside the place of employment, in Poland <input type="checkbox"/> outside Poland, within the European Union <input type="checkbox"/> outside the European Union
Approximate travel time from my place of residence to the place of work/performance of the function:	

II. Time spent on other jobs/functions								
No.	Job/function			Time currently spent		Planned time to be spent following the appointment for the position under consideration		
				Meetings per year	Days per year	Meetings per year	Days per year	Travel time
a) Other jobs/functions in the same entity								
1.	Job title:							
b) Jobs/functions in other members of the same group								
1.	Job title:			Size of the entity ¹ <input type="checkbox"/> Micro <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large				
	Name of the entity:							
	Line of business:							
	Registered office/place of performance of duties:	Country:	Town/City:					
c) Jobs/functions in other commercial entities (including own business activity)								
1.	Job title:			Size of the entity <input type="checkbox"/> Micro <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large				
	Name of the entity:							
	Line of business:							
	Registered office/place of performance of duties:	Country:	Town/City:					
d) Other non-commercial activity (e.g. social/teaching)								
1.	Job title:			Size of the entity				
	Name of the entity:							

¹ According to the classification defined in Article 7 of the Act entitled Law of Commercial Undertakings.

	Line of business:			<input type="checkbox"/> Micro <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large						
	Registered office/place of performance of duties:	Country:	Town/City:							
Total (a) + (b) + (c) + (d)										

e) Synergies in connection with the functions performed within the same group ²							
No.	Description of duties	Indication of which positions are affected by the synergy	Time currently saved owing to synergies (days per year)		Planned time savings owing to synergies (days per year)		
1.							
		Cumulative (sum of items in (e))					
Total time spent in consideration of synergies [(a+b+c+d)-e]							

IV. Additional duties not included in section II

Date and signature of a member of a corporate body of the regulated entity:	
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² Convergent duties performed by the member at the same time due to performing several functions within the same group, with particular emphasis on acting on behalf of the entity or as a substitute member of a corporate body of the regulated entity.

SECTION 2 – To be completed by the evaluator		
VI. Evaluation of the fulfillment of the assumptions and expectations of the corporate body		
1) Participation in meetings		
total	present	absent
2) Long-term absenteeism		
cause	number of days	
3) Substitutions due to the absence of another member of a corporate body of the regulated entity		
function/position	number of days	
4) Evaluation of preparation for and involvement in the meetings of the corporate body		
VIII. Summary of the entity's evaluation		
The information provided in this form has an unfavorable impact on the evaluation of the person's ability to spend sufficient time in terms of suitability for the performance of a function/position in a corporate body of the regulated entity.		<input type="checkbox"/> yes <input type="checkbox"/> no
Date and signature of the entity's authorized representative:		

Instructions on how to fill out the form

This form is designated for the purpose of making a collective suitability assessment of the members of the corporate bodies of regulated entities according to the assessment methodology accepted by the Polish Financial Supervision Authority. This form facilitates an efficient check of a corporate body satisfying the assessment criteria in terms of the competence level and the distinct quantitative criteria for some corporate bodies. Filling out the form should begin with entering the information in tab "I - Basic data" regarding the entity conducting the assessment, the reasons for the assessment (specified in section 4.1.3. of the methodology accepted by the Polish Financial Supervision Authority), the date of the assessment and the date of the information. Information should be given in tabs "II - Management", "III - Risk" and "IV - Lines of business" regarding the level of the various skills held by the various members of the corporate body (it is advisable to use the data designated in attachment D to the individual assessment form to specify the competences of the person being assessed). The rows pertaining to the competences with respect to which the regulated entity is not conducting an assessment (e.g. rows applicable solely to other market sectors) may be deleted. It is also possible to append additional rows regarding the competences undergoing assessment by the entity that are not applicable. Information should also be entered in tabs "II - Management" and "III - Risk" regarding the requirements accepted by the entity in terms of collective suitability for the various criteria. The form contemplates 4

- Leader's minimum level – this aims to ensure that a given competence is represented in the corporate body;
- Vice leader's minimum level – designated to be applicable in parallel with the criterion of the leader's minimum level; this aims to ensure the substitutability / continuity of a corporate body performing tasks in the event the person with the highest level of competence in a given area is temporarily unable to discharge his or her duties;
- Average level in the corporate body – refers to the competences which the corporate body in its entirety should possess at a specific level;
- Minimum level in the corporate body – this is applicable to competences which all of the members of a corporate body should have at a specific level;

After filling out all of the fields, the information on satisfying the requirements in the final column in tabs II-V should be interpreted. If the term "Satisfied" appears in all of the rows, the score of the collective assessment is positive. If the term "Not satisfied" appears in at least one field, the score of the assessment is negative in this respect, and the entity should undertake the efforts specified in section 5.1.3. of the

Collective suitability assessment

Part I - Basic data

Entity:	(name of the entity)
Corporate body:	(name of the corporate body)
Date of the assessment:	(date of the assessment)

Reasons for conducting the assessment:	(state the reasons)
Date of the previous assessment:	(date of the previous assessment)

Composition of the corporate body: (first and last names)	(person 1)
	(person 2)
	(person 3)
	(person 4)
	(person 5)
	(person 6)
	(person 7)
	(person 8)
	(person 9)
	(person 10)

Comments:	
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Collective suitability assessment
Part III - risk management competences

Entity: (name of the entity)
 Corporate body: (name of the corporate body)
 Date of the assessment: (date of the assessment)

	(person 1)	(person 2)	(person 3)	(person 4)	(person 5)	(person 6)	(person 7)	(person 8)	(person 9)	(person 10)
Significant risks in the insurance sector										
Actuarial risk										
Market risk										
Credit risk										
Liquidity risk										
Operational risk										

Leader's minimum level	achievement:	Vice leader's minimum level	achievement:	Average level in the corporate body	achievement:	Minimum level in the corporate body	achievement:	Summary
0 - None		0 - None		0 - None		0 - None		Spethia
0 - None		0 - None		0 - None		0 - None		Spethia
0 - None		0 - None		0 - None		0 - None		Spethia
0 - None		0 - None		0 - None		0 - None		Spethia
0 - None		0 - None		0 - None		0 - None		Spethia

Collective suitability assessment

Part IV - competences regarding the entity's main areas of business / lines of business

	(person 1)	(person 2)	(person 3)	(person 4)	(person 5)	(person 6)	(person 7)	(person 8)	(person 9)	(person 10)
Line of business 1 (state which one)										

Entity:

Corporate body:

Date of the assessment:

Leader's minimum level	achievement:	Vice leader's minimum level	achievement:	Average level in the corporate body	achievement:	Minimum level in the corporate body	achievement:	Summary
0 - None		0 - None		0 - None		0 - None		Spelnia

Collective suitability assessment
Part V – quantitative criteria

	(person 1)	(person 2)	(person 3)	(person 4)	(person 5)	(person 6)	(person 7)	(person 8)	(person 9)	(person 10)
Criteria accepted by the entity (e.g. ensuing from the suitability policy)										
Which ones (state them here):										

Entity:
 Corporate body:
 Date of the assessment:

Summary	
Which ones (state them here)	Has it been satisfied? (state it here)

Collective suitability assessment - Supervisory Board

Part VI - time commitment

Entity:	(name of the entity)
Corporate body:	(name of the corporate body)
Date of the assessment:	(date of the assessment)

Number of meetings in the past 24 months:

Average level of attendance at meetings (%):

Assessment:

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5-level Text	Value	2-level		Yes/No
0 - None	0	0 - Not satisfied	0	0 - No
1 - Basic	1	1 - Satisfied	1	1 - Yes
2 - Medium	2			
3 - High	3			
4 - Very high	4			

Instructions on how to fill out the form

This form is designated for the purpose of making a collective suitability assessment of the members of the audit committee according to the assessment methodology accepted by the Polish Financial Supervision. Filling out the form should begin with entering the information in tab "I - Basic data" regarding the entity conducting the assessment, the date of the assessment and the date of the previous assessment, as well as the results of the individual assessment. The rows corresponding to the various criteria should be filled out in tab "II - Criteria" in accordance with the results of the individual assessment.

After filling out all of the fields, the information on satisfying the requirements in the final column in tab II should be interpreted. If the term "Satisfied" appears in all of the rows, the score of the collective assessment is positive. If the term "Not satisfied" appears in at least one field, the score of the assessment is

Collective suitability assessment of the audit committee

Part I - Basic data

Entity:	(name of the entity)
assessment:	(date of the assessment)

Date of the previous assessment:	(date of the previous assessment)
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Composition of the audit committee:	(first and last names)
Chairperson:	(person 1)
	(person 2)
	(person 3)
	(person 4)
	(person 5)
	(person 6)
	(person 7)
	(person 8)
	(person 9)
	(person 10)

Comments:	
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Collective suitability assessment

Entity:
Date of the
assessment:

(name of the entity)
(date of the assessment)

Part V – quantitative criteria

	(person 1) (Przewodniczący)	(person 2)	(person 3)	(person 4)	(person 5)	(person 6)	(person 7)	(person 8)	(person 9)	(person 10)
Independence:										
Accounting knowledge:										
Accounting skills:										
Accounting knowledge and skills in total:	0-Nie	0-Nie	0-Nie	0-Nie	0-Nie	0-Nie	0-Nie	0-Nie	0-Nie	0-Nie
Knowledge on the audit of financial statements:										
Skills in the audit of financial statements:										
Knowledge and skills in the audit of financial statements in total:	0-Nie	0-Nie	0-Nie	0-Nie	0-Nie	0-Nie	0-Nie	0-Nie	0-Nie	0-Nie
Knowledge of the industry in which the public interest entity operates:										
Skills in the industry in which the public interest entity operates:										
Knowledge and skills in the industry in total in which the public interest entity operates:	0-Nie	0-Nie	0-Nie	0-Nie	0-Nie	0-Nie	0-Nie	0-Nie	0-Nie	0-Nie

Summary	
The majority of the members, including the chairperson should be independent	Not satisfied

At least one member should have knowledge and skills in at least one of the areas	Not satisfied
	Not satisfied

At least one member should have knowledge and skills	Not satisfied
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Summary	Not satisfied
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5-level Text	Value	2-level		Yes/No
0 - None	0	0 - Not satisfied	0	0 - No
1 - Basic	1	1 - Satisfied	1	1 - Yes
2 - Medium	2			
3 - High	3			
4 - Very high	4			