**Statement of Consent**

I hereby confirm my consent to be elected to the Board of Directors of Qazaqstan Investment Corporation Joint Stock Company as an Independent Director. I confirm that I am not an affiliate of the specified joint-stock company and have not been one for the last three years, I am not affiliated with the affiliated persons of the specified joint-stock company and is not subordinated to their officials - affiliates of Qazaqstan Investment Corporation Joint Stock Company; I am not a public servant; I am not an auditor of this joint-stock company and have not been for the last three years, have not participated in the audit of Qazaqstan Investment Corporation Joint Stock Company as an auditor working as part of an audit organization, and have not participated in such an audit over the past three years.

Name Surname

Date

Sign

**Information about the candidate for the position of Independent Director**

1. **General information:**

|  |  |
| --- | --- |
| Full Name |   |
| *(in full accordance with the identity card (passport), in case of a change in the last name, first name, patronymic, indicate when and for what reason they were changed)* |
| Date and place of birth |  |
| Permanent residence, phone numbers, email addresses |  |
| *(indicate the detailed address, business, home, contact phone numbers, including the code of the settlement)* |
| Citizenship |   |
| Name and full details of the identity document |   |

 **2. Information about affiliation:**

**Information about close relatives (parents, spouse, brother, sister, children), as well as relatives (brother, sister, parents, children of the spouse):**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **№** | **Full Name** | **Date of Birth** | **Family relations** | **Place of work and position** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |

Information on direct or indirect participation in the authorized capital of legal entities

1. **Professional details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **№** | **Name and location** | **Statutory activities of a legal entity** | **Amount and share of your participation** |   |
| 1 |   |   |  |   |
| 2 |   |   |   |   |
| Education, including vocational education, relevant to the job profile |   |
|  |
| Additional education, including advanced training courses in the field in which he works / in the field in which he intends to work, academic degrees |  |
|  |
| Experience in the provision and (or) regulation of financial services, including in the field in which he intends to work |  |
| Experience in managerial positions / in positions as required in the field in which you intend to work |  |
| Experience in board of directors |  |
| Language proficiency and proficiency |  |
| Knowledge of a business similar to that of the Company |   |
| Opportunity to devote time to the work of an Independent Director |  |
| Opportunity to chair a committee of the board of directors |  |
| Achievements   |  |
| Membership in professional organizations  |  |
| Other information relevant to this issue |  |
|  |  |  |  |  |  |

1. **Information about labor activity**

|  |  |  |
| --- | --- | --- |
| **№** | **Working period (month, year)** | **Name of the organization, positions held and job responsibilities, coordinates of the organization** |
| 1 |  |  |

1. **Other information**

|  |  |
| --- | --- |
| Presence of an outstanding or not withdrawn conviction in accordance with the procedure established by the law of the Republic of Kazakhstan for crimes committed in the field of economic activity, for corruption and other crimes against the interests of the public service and public administration |  |
| Availability of data on suspension from performance of official duties for violation of the legislation of the Republic of Kazakhstan |  |
| Previously, if you were an executive employee of an organization that was declared bankrupt or in respect of which a decision was made on forced liquidation, conservation, forced buyout of shares |  |
| Other information relevant to this issue |  |

**I** *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,* **confirm that this information has been carefully checked by me and is true and complete, and I acknowledge that the presence of false information provided by me is the basis for the revision (withdrawal) of consent to my appointment (election).**

*(signature, date)*