



# Form 4 - Application for Party Status

For hearings before the  
Financial Services Tribunal

A person who is interested in actively participating as a party in a proceeding before the Tribunal must complete and file this form with the Registrar, Financial Services Tribunal, 5160 Yonge Street, Box 85, 14th Floor, Toronto, Ontario M2N 6L9 or fax it to (416) 226-7750. The Tribunal will then decide whether party status will be granted, either unconditionally or subject to some limitations on participation in the proceeding. The factors that the Tribunal may consider in deciding whether to grant party status are set out in Rule 38.04 of the Rules of Practice and Procedure for Proceedings Before the Financial Services Tribunal.

Personal information requested is collected under the authority of the Financial Services Commission of Ontario Act, 1997. This information will be used for the purposes of the proceeding and will be available to all parties to the proceeding and will become part of the public record. All questions about this collection may be directed to the Registrar, Financial Services Tribunal.

You may represent yourself before the Financial Services Tribunal or you may be represented by someone who is licensed under the *Law Society Act* to practice law or to provide legal services in Ontario (i.e. a lawyer or paralegal) or by someone who is not required to be licensed under that Act (e.g. a trade union representative or a friend helping out on a voluntary basis). If you are not sure whether or not a person can act as your representative (e.g. he or she is not a lawyer or a licensed paralegal), you should contact the Law Society of Upper Canada: (416) 947-3315, or 1-800-668-7380, or [lawsociety@lsuc.on.ca](mailto:lawsociety@lsuc.on.ca). The Financial Services Tribunal cannot assist you in obtaining representation and cannot provide you with information about the authority or licence status of a representative.

**NOTE: You are required to fill out ALL sections of this form as completely as possible. Incomplete forms may be returned and may not be processed until they have been properly completed.**

Tribunal File No.

## NAME OF TRIBUNAL FILE

## Applicant's Name and Address

<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	Last name	First name
Company name OR Organization		
Street address		Apt./Unit
City	Province	Postal Code/Zip
Phone number (     )	Ext. (     )	Fax number (     )
		Email address

## Applicant's Representative (if any)

<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	Last name	First name
Firm		
Street address		Apt./Unit
City	Province	Postal Code/Zip

**Applicant's Representative (if any) –(continued)**

Phone number (       )	Ext.	Fax number (       )	Email address
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The Representative is:

Lawyer

Paralegal licensed to provide legal services

Not required to be licensed under the *Law Society Act* and its By-Laws

**What is your interest in the Proceeding and why should the Tribunal grant you party status?**

Describe how the decision will affect your interests (i.e. the nature of your legal interest in the proceeding). Identify clearly what position you intend to take if you are given party status, and whether you will be supporting or opposing the position of anyone who is already a party to the proceeding. Explain the reasons why you think you should be granted party status to participate in the proceeding.

### Nature of Party Status Sought

Indicate whether you wish to have full party status or are seeking only to play a more limited role. If you are seeking only a limited role, what type of participation are you seeking? (e.g. to call evidence? to cross-examine witnesses? to make submissions/arguments?)

### What do you want the Tribunal to decide or order?

Explain as precisely as possible what decision you want the Tribunal to make if you are given party status. Use point form if desired.

### Signature

Applicant Name (please print)	Applicant Signature	Date (yyyy/mm/dd)
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Representative Name (please print)	Representative Signature	Date (yyyy/mm/dd)
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