

# NATIONAL INVESTMENT TRUST LIMITED

## Risk Profiling Questionnaire

Title of Account: \_\_\_\_\_

DATE (DD / MM / YYYY): 

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CNIC No.: \_\_\_\_\_

Registration ID: \_\_\_\_\_  
(For existing customer)

Please fill this form for us to better understand your investment goals according to your needs. On the basis of the information you provide, we can suggest you a customized solution. Please tick the boxes as per your choice.

1.	Age (in Yrs.)	Points	2.	Marital Status	Points	3.	No. of Dependents	Points
<input type="checkbox"/>	Below 40	6 Points	<input type="checkbox"/>	Single	6 Points	<input type="checkbox"/>	Zero	6 Points
<input type="checkbox"/>	41-50	3 Points	<input type="checkbox"/>	Married	2 Points	<input type="checkbox"/>	Below Four	3 Points
<input type="checkbox"/>	51-60	1 Points	<input type="checkbox"/>	Divorced/Widow	0 Points	<input type="checkbox"/>	Four to Seven	1 Points
<input type="checkbox"/>	Above 60	0 Points				<input type="checkbox"/>	Above Seven	0 Points
4.	Occupation	Points	5.	Qualification	Points	6.	Your Risk Appetite	Points
<input type="checkbox"/>	Retired/Unemployed	0 Points	<input type="checkbox"/>	Matriculation or Below	0 Points	<input type="checkbox"/>	Very High	12 Points
<input type="checkbox"/>	Student/House Wife	1 Points	<input type="checkbox"/>	Intermediate	1 Points	<input type="checkbox"/>	High	10 Points
<input type="checkbox"/>	Salaried	3 Points	<input type="checkbox"/>	Graduate	2 Points	<input type="checkbox"/>	Moderate	6 Points
<input type="checkbox"/>	Business/Self Employed	6 Points	<input type="checkbox"/>	Post Graduate	3 Points	<input type="checkbox"/>	Low	4 Points
			<input type="checkbox"/>	Doctorate	4 Points	<input type="checkbox"/>	Very Low	0 Points
7.	Your Investment Objective	Points	8.	Your Investment Horizon	Points			
<input type="checkbox"/>	Capital Preservation	4 Points	<input type="checkbox"/>	Short-term (Less than 1 Year)	4 Points			
<input type="checkbox"/>	Capital Preservation & Income	8 Points	<input type="checkbox"/>	Medium-term (1 to 5 Years)	6 Points			
<input type="checkbox"/>	Income and long-term Growth	12 Points	<input type="checkbox"/>	Medium to Long-term (5 to 10 Years)	10 Points			
<input type="checkbox"/>	Capital Growth	14 Points	<input type="checkbox"/>	Long-term (More than 10 Years)	12 Points			
9.	Your current level of Investment Knowledge	Points	10.	Your current financial position: In a year or so, how secure do you feel your finances will be?	Points			
<input type="checkbox"/>	Little or no knowledge	0 Points	<input type="checkbox"/>	Very Secure	0 Points			
<input type="checkbox"/>	Some Knowledge	2 Points	<input type="checkbox"/>	Somewhat Secure	-2 Points			
<input type="checkbox"/>	Both Knowledgeable and Experienced in investing	4 Points	<input type="checkbox"/>	Not Sure	-4 Points			
			<input type="checkbox"/>	Likely Worse	-8 Points			

### 11. Scoring Of Risk Profiling Results

Question #	1	2	3	4	5	6	7	8	9	10	Total
Your Score											
<b>Your Portfolio</b>	<b>Score</b>		<b>Type of Investor</b>		<b>Risk Profile/ Risk of Principal Erosion</b>		<b>Suitable Investment in Scheme</b>				
	Score 0-25		Safety-Oriented		Low / Principal at low risk		Money Market Schemes				
	Score 26-43		Balanced		Medium/ Principal at medium risk		Income Schemes				
	Score 44+		Growth-oriented		High/ Principal at high risk		Equity & Asset Allocation Schemes				

I/We declare that I/We understand that this risk profiling questionnaire will help me/us assess my/our risk appetite based on the information provided by me/us. I am/we are aware that my/our financial needs may change over time depending on my/our personal and situation objectives. I/We also understand that this questionnaire does not constitute, in any manner, advice given by the Company. I/We shall be solely/jointly responsible for all my/our current and future investment, conversion and transfer transactions if these transactions are not in accordance with my/our above-mentioned risk profiling results. I/We will not hold the Company liable or responsible for these transactions in any manner. Further, I/We hereby confirm that all information provided in this form is true to the best of my/our knowledge.

نوٹ: میں اس بات کو سمجھتا ہوں اور متفق ہوں کہ آئین آئی ٹی نے مندرجہ بالا فنڈ کی پیروی میں میری ریسک پر وفاق کے مطابق تجویز کی ہے۔ لیکن میں اپنی مرضی کے مطابق کسی بھی دوسری فنڈ کی پیروی میں انویسٹمنٹ کر سکتا/ کر سکتی ہوں۔

Fund decided by Investor: \_\_\_\_\_

Principal Unit Holder

1 - Joint Unit Holder

2 - Joint Unit Holder

3 - Joint Unit Holder

Name of Sales Person	Name of Branch Manager
Signature	Signature