ALGORITHMIC ADVISOR AND AUDITOR REGISTRATION APPLICATION

Please complete the following registration form to apply as an Algorithmic Advisor and Auditor. This form is designed for individuals or entities seeking registration as an Algorithmic Advisor and Auditor and takes into account the dependency on FINRA CTA or Broker-Dealer registration, as well as the completion of the broker-dealer blockchain courseware.

1. Applicant Information: - Full Name: - Company/Organization Name (if applicable): - Legal Entity Type (if applicable): - Incorporation Date (if applicable): - Registered Address: - City: - State/Province: - Postal/ZIP Code: - Country: - Phone Number: - Email Address: - Company Website (if applicable):
2. Registration Type:- Please select the appropriate registration type:- [] Algorithmic Advisor- [] Algorithmic Auditor
 3. Regulatory Compliance: - Have you obtained the necessary registrations from the U.S. Financial Industry Regulatory Authority (FINRA) as a CTA (Commodity Trading Advisor) or Broker-Dealer? [] Yes[] NoIf Yes, please provide the registration details:
 4. Blockchain Courseware Completion: - Have you completed the broker-dealer blockchain courseware? - [] Yes - [] No - If Yes, please provide details of the courseware completion:

- 5. Experience and Qualifications:
 - Briefly describe your experience and qualifications in the field of algorithmic advisory and auditing:
- 6. Services Offered:
 - Describe the algorithmic advisory and auditing services you provide:
- 7. Compliance Procedures:
- Provide an overview of your compliance procedures and how you ensure compliance with applicable regulations and standards:

8. Security Measures:

- Describe the security measures implemented to safeguard client data and ensure the integrity of your algorithmic advisory and auditing processes:

9. Financial Information:

- Provide information regarding your financial stability and resources available to support your algorithmic advisory and auditing operations:

10. Additional Information:

- Provide any additional information that you believe is relevant to your algorithmic advisor and auditor registration application:

11. Declaration:

By submitting this registration application, I declare that the information provided is accurate and complete to the best of my knowledge. I understand that any false statements or omissions may result in the rejection of my application.

Signature:	 	
Date:	 	

Thank you for applying to register as an Algorithmic Advisor and Auditor. We will review your application and contact you regarding the next steps in the registration process, including any additional documentation or requirements.