Form of the Proposed of Qualified Candidate for Director Position

Date	
I,a shareholde	er of JCK Hospitality Public Company Limited,
share registration nofor a to	otal ofshare would like to
propose names to be appointed as directors	s of the Company at the 2025 Annual General
Meeting of Shareholders as follows :	
1. Name	Surname
Reason of the proposal	
I would like to nominate for the Nomination C	ommittee's consideration as a qualified
candidate to be appointed as the director.	
1. Name	
2. Birth Age Ye	ears Nationality
3. Address	
4. Professional	
Office	
5. Education (Enclose Educational Cer	tificate)
6. Experience last five-years' history	
7. Current Board Position in Other List	• •
Please tick his/her directorship	
() Director	() Executive Director
() Member of Audit Committee	() Others
Company	
Please tick his/her directorship	
() Director	() Executive Director
() Member of Audit Committee	() Others

	company				•		
	Please tick his/her direc	torsnip	() Evo	cutivo Director			
•) Director) Member of Audit Cor	nmittoo		cutive Director			
_) Member of Audit Con			ers			
	xtra-curricular activities	at inalins	titute or	Directors associa	ation (10D)		
L	□ Yes □ No						
				······································			
	larital Status						
S	pouse Name		Numbers	of Share Holdir	ng share(s)		
C	Children 1						
	2		Numbers	of Share Holdir	g share(s)		
	3		Numbers	of Share Holdin	g share(s)		
10. JCK Hospitality Company Limited's shareholder							
	\square Yes \square No Numbers of Share Holdingshare(s)						
	Spouses and depender	it child (age	below 20), holding share	totalshare(s)		
11. Share holding of nominated person including spouses and dependent child (age							
	below 20) in the registered ordinary partnership, limited partnership, company						
	limited, public company limited or juristic persons of Section 246 and 247 of the						
	Securities and Exchang	je Act who h	as autho	rized as the juris	stic persons.		
	Related with (Named)	Named of E	<u>Business</u>	<u>Position</u>	Share holding (%)		
12.	Additional information						

Acknowledgement

I hereby certify that the information I have given in this application is complete and authentic
Signature(
Signature(
Consent Form
I (Mr./Mrs./Miss/), who has been nominated fo appointment as the director certify that the information provided above is true and the supporting documents submitted herewith are authentic.
SignatureCandidate's signature)