Nebraska Racing and Gaming Commission Occupational Licenses Level 2 Application

AND GAMING COMMISS

BRASK

Occupational License Level 2 LICENSE APPLICATION INSTRUCTIONS

I. COMPLETING THIS APPLICATION

- A. You are to complete this application if you are:
 - 1. Required to obtain and maintain an occupational License Level 2 pursuant to Nebraska Administrative Code Title 296 rule 3.004; or
 - 2. Directed to do so by the Commission.
- B. Read each question carefully prior to answering. Answer every question completely. Do not leave blank spaces. If a question does not apply to you, indicate "Does not apply" in response to that question. If there is nothing to disclose in response to a particular question, write "None" in response to that question. **Note: The Commission will not review your application unless you provide a response to everyquestion.**
- C. All entries on this application must be legible. Note: The Commission will not review your application if it is illegible or if you have modified any of the questions or pre-printed information in this application.
- D. If the space available is insufficient to respond to a question, supply the required information on a separate page titled "Further Response Page" wherein you clearly identify the question(s) you are answering. The Further Response Page, if needed, should be attached to the back of the application, and be placed in front of all requested exhibits that apply to the applicant.
- E. Label all requested exhibits that apply to the applicant with the specified exhibit number and attach them, in the order that they are requested, to the back of the application. Note: Only those exhibits that apply to the applicant should be attached to this application.

II. BEFORE YOU SUBMIT THIS APPLICATION TO THE COMMISSION, BE SURE THAT:

- A. All attachments required in this application are labeled with the correct title or exhibit number and are included in the application filed with the Commission.
- B. You have signed and notarized the Statement of Truth and Release Authorization forms included with this application.
- C. You have answered every question completely.
- D. You initial and date each page of this application, **except the cover page**, in the spacesprovided.
- E. You retain a completed copy of this application for your own records.

III. FILING THIS APPLICATION WITH THE COMMISSION

- A. A complete application for an occupational License Level 2 consists of this application, all attachments, and the application fee. Once your application is accepted, it becomes the property of the Commission and may not be withdrawn without the permission of the Commission.
- B. The fees relating to an occupational License Level are as follows:
 - 1. An applicant for an initial or new occupational License Level 2 must pay a nonrefundable application fee of \$150;
 - 2. An applicant for a renewal occupational License Level 2 must pay a nonrefundable renewal application fee of \$75;

3. In the event that the costs incurred by the Commission in the course of investigating an applicant's background exceed the applicable application fee, the Commission may, upon written notice, charge an additional fee to cover the actual costs of investigation;

IV. BACKGROUND INVESTIGATIONS

- A. Along with a completed application, you will be required to be fingerprinted so that the Commission can initiate a criminal record background check as part of the investigation of your suitability for a Casino Gaming Employee License.
- B. If you are seeking an initial, new, or renewal occupational License Level 2 License and you have received an offer of employment from or are currently employed by a casino in Nebraska:
 - 1. You will be notified of a time and date to report to the casino that offered you employment so that fingerprints can be obtained.
 - 2. To establish your identity, you must present the original document(s) listed below:
 - i. A government-issued birth certificate with an official seal;
 - ii. A government-issued driver's license that has a photograph and/or identifyinginformation;
 - iii. A military-issued identification card that has a photograph and/or identifyinginformation;
 - iv. A foreign passport with a proper USCIS authorization;
 - v. Any other government-issued identification card that has a photograph and/or identifying information; or
 - vi. Any other form of identification deemed appropriate by the Commission.
- **NOTE:** If the name on any of the provided identification is different than the name on your application, you must also provide a court-ordered name change, marriage certificate, or divorce decree to establish the reason for the different name.

V. DUTY TO UPDATE INFORMATION

- A. Any person who applies for **or** holds an occupational License Level 2 License has a continuing duty to update changes to any of the information that they are required to provide or have provided to the Commission, including information contained in this application as well as information required by Nebraska Adm. Code Title 296 Rule 3.007.07.
- B. To fulfill this continuing duty to update, the person must:
 - 1. Submit information about the change to the Commission **in writing** and no later than **ten days** after the change occurs; and
 - 2. Include their name and license number (if applicable).

VI. IMPORTANT NOTICES

- A. Should you be unable to fully understand this application in English, it is your responsibility to obtain adequate means of interpretation or translation, as applicable.
- B. All notices regarding your application will be sent to the address that you provide on this application. You must notify the Commission of any change of address in accordance with Nebraska Adm. Code Title 296 Rule 3.008.04.

- C. The Commission will not issue a Casino Gaming Employee License to a person who:
 - 1. Has a conviction prohibited by Nebraska Adm. Code Title 296;
 - 2. Has submitted an application that contains knowingly false information;
 - 3. Owns an ownership interest that is unlawful under Nebraska Adm. Code Title 296, unless waived by the Commission;
 - 4. Violates specific rules adopted by the Commission related to denial of licensure;
 - 5. Is a member of or employed by a gaming regulatory body of a governmental unit in Nebraska, another state, or the federal government, or is an employee of a governmental unit of Nebraska and in that capacity has significant influence or control, as determined by the Commission, over the ability of a casino operator, management company, holding company, institutional investor, or gaming-related vendor to conduct business in Nebraska;
 - 6. Is otherwise ineligible for licensure as determined by the Commission.
- D. Certain information submitted, collected, or gathered as part of the application and licensing process for a Casino Gaming Employee License is confidential and not subject to disclosure as a record under Nebraska Public Record Act Neb Rev. Stat §§ 84-712 through 84-712.09.
- E. A Casino Gaming Employee License expires **three years** after the date of licensure. Renewal of a Casino Gaming Employee License may be requested by submitting a completed Casino Gaming Employee License Application no less than **one hundred twenty days** before expiration of the License and paying the application fee, in the manner outlined under the Casino Gaming Employee License Application Instructions.
- F. Any Casino Gaming Employee License issued by the Commission is a revocable privilege and is not transferable. No licensee has a vested right in or under a Casino Gaming Employee License issued by the Commission.

[Remainder of page intentionally left blank.]

CASINO GAMING EMPLOYEE LICENSE APPLICATION

PRINT OR TYPE THE ANSWERS TO THE FOLLOWING QUESTIONS IN THE SPACES PROVIDED

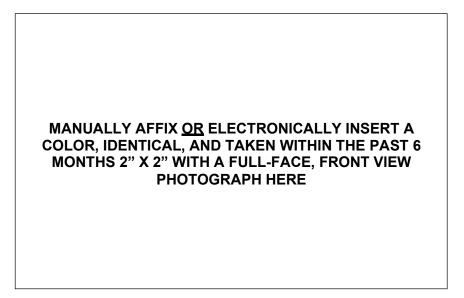
NAME: LAST (INCLUDE: SR., JR., E	TC., IF APPLICABL	E)	FI	RST	MID	DLE
MAILING ADDRESS: (NUMBER AN	ID STREET)	(APT#)	(CITY)	(COUNTY)	(STATE)	(ZIP CODE)
HOME ADDRESS: (IF DIFFERENT	THAN MAILING AI	DDRESS) (APT#)	(CITY)	(COUNTY)	(STATE)	(ZIP CODE)
HOME TELEPHONE NUMBER		CELLULAR OR A	ALTERNATIVE	TELEPHONE NUMBER	2	EMAIL
DATE OF BIRTH: (MO)(DAY) (YEA	R)	HEIGHT: (FT-IN)	W	EIGHT: (LBS)	SOCIAL SEC	URITY NUMBER*
HAIR COLOR	EYE COLOR		SE	X		
DRIVER LICENSE NUMBER	ISSUING	JURISDICTION	IS	SUE DATE	EXPIRATION	DATE

*Under the Federal Privacy Act, Disclosure of your Social Security Number is voluntary. See Part VI, Paragraph D of the Instructions for more information.

Have you ever been known by any other name or names? YES NO I If YES, list the additional names below **and** specify dates of use for each. (Include: maiden name, aliases, nicknames, or any other name associated with you.)

IMPORTANT

FAILURE TO ANSWER ANY QUESTION ON THIS APPLICATION COMPLETELY AND TRUTHFULLY MAY RESULT IN THE DENIAL OF YOUR LICENSE APPLICATION



1. I am applying for a(n):

Initial or New License (check this box if you have never applied for or do not currently have an active Nebraska Casino Gaming Employee License)

Provisional License* (check this box if you checked the Initial or New License box **and** you have a provisional request letter from the casino)

Renewal License (check this box if you have an active Nebraska Casino Gaming Employee License and wish to renew it)

*Any person seeking a Provisional Casino Gaming Employee License <u>must</u> attach the casino's provisional request letter to this application, **labeled as Exhibit 1**.

- 2. Are you a citizen of the United States? YES NO
- 3. If you are a naturalized citizen of the United States, attach to this application, **labeled as Exhibit 2**, a copy of your Certificate of Naturalization or valid U.S. passport.
- 4. If you are not a citizen of the United States, indicate:
 - A. The country of which you are a citizen:
 - B. Place of birth:
 - C. Port of entry to the United States:
- 5. If you are not a United States citizen, but you are a legally authorized permanent resident alien or you are authorized to be employed in the United States, provide a copy of your USCIS identification card and/or any other USCIS document that permits, conditions, or restricts your employment, **labeled as Exhibit 3**.
- 6. Have you ever served in a military organization of any country or have you been a member of a reserve force of any country? YES NO

If YES, provide the following information:

Country of Service:		Branch of Servic	e:
Service ID # (or equivalent):		Highest Rank He	eld:
Period(s) of Service:	From:		То:
	From:		То:
Country of Service:		Branch of Servic	e:
Service ID # (or equivalent):		Highest Rank He	eld:
Period(s) of Service:	From:		То:

[Question 6 continued on the next page.]

DATE OF EACH DISCHARGE/SEPARATION	TYPE OF EACH DISCHARGE/SEPARATION

Attach a copy of your DD-214, NGB-22, or other official documentation evidencing each discharge or separation of service listed above.* If unavailable, attach a copy of a letter to the appropriate branch of the military requesting a copy of this documentation.

*If your military service was in a country other than the United States, you <u>must</u> provide a copy of whatever official documentation was provided to you at the time of your discharge or separation of service. If no official documentation is available, provide a detailed explanation of the nature of and reason for your discharge or separation of service as well as an explanation as to why no official documentation can be provided.

7. Have you ever been arrested or charged by a military organization or been tried by military court martial or another official military tribunal? YES NO

If YES, provide a detailed explanation on a separate sheet, wherein you describe the (1) nature of the charge or arrest, (2) date and location of the charge or arrest, (3) name of the military organization filing the charges, (4) disposition (convicted, acquitted, dismissed, pleading, etc.), and (5) sentence (if applicable), and attach it to this application, **labeled as Exhibit 4.**

Question 8 below asks about any arrests, charges, or offenses you may have committed. Prior to answering this question, carefully review the definitions and instructions that follow:

- DEFINITIONS: For purposes of this question:
 - A. **"Arrest"** includes any detaining, holding, or taking into custody by any police or other law enforcement authorities to answer for the alleged performance of any "offense."
 - B. **"Charge"** includes any indictment, complaint, information, summons, or other notice of the alleged commission of any "offense."
 - C. **"Convict"** includes the finding of guilty of any "offense" upon a trial, a plea of guilty, or a plea of no contest.
 - D. **"Offense"** includes all felonies, crimes, misdemeanors, disorderly persons offenses, petty disorderly offenses, driving while intoxicated/impaired motor vehicle offenses, driving under suspension offenses, violation of probation or any other court order, as well as offenses that may have required a person to appear before a law enforcement agency, state or federal grand jury, county court, municipal court, city court, military court, or any other court not included in this list.
 - 1. Juvenile offenses that occurred within the most recent ten-year period are also included within the definition of "offense."
 - 2. "Offense" does **not** include trafficoffenses that are classified as a minor misdemeanor.

[Instructions and Question 8 continued on the next page.]

- INSTRUCTIONS: A. Answer "YES" and provide all information to the best of your ability EVENIF:
 - 1. You did not commit the offense charged;
 - 2. The charges were dismissed or subsequently downgraded to a lesser charge;
 - 3. You completed a diversionary program or the equivalent thereof;
 - 4. You were not convicted;
 - 5. You did not serve any time in prison or jail; or
 - 6. The charges or offenses happened a long time ago.
 - B. Answer "NO" IF:
 - 1. You have never been arrested or charged with any crime or offense; or
 - 2. All records relating to each charge, arrest, or conviction have been expunged or otherwise officially sealed by a court, government agency, or other regulatory authority.
- 8. Have you ever been arrested for, charged with, or convicted of any offense in any jurisdiction (including Nebraska)? YES NO

If YES, complete the following chart:

DESCRIPTION OF OFFENSE AND LOCATION WHERE OFFENSE OCCURRED	DATE OFFENSE OCCURRED	NAME AND ADDRESS OF ANY INVESTIGATING AGENCY, ARRESTING AGENCY, CHARGING AGENCY, AND PROSECUTING AGENCY	DISPOSITION (CONVICTED, ACQUITTED, DISMISSED, PENDING, PARDONED, ETC.)	SENTENCE

9. Have you ever been issued, **in any jurisdiction (including Nebraska)**, a gaming, professional or other occupational license, permit, registration, certification, or other authorization? YES NO

If YES, complete the following chart:

NAME AND ADDRESS OF LICENSING AGENCY	TYPE OF LICENSE, PERMIT, REGISTRATION, CERTIFICATION, OR OTHER AUTHORIZATION	LICENSE, PERMIT, REGISTRATION, CERTIFICATION, OR OTHER AUTHORIZATION NUMBER	NAME OF LICENSEE AT TIME OF ISSUANCE*	AGE OF LICENSEE AT TIME OF ISSUANCE
		dor which the license was		

*Provide all names, including former names, under which the license was issued

10. Have you ever had any gaming-related (or other professional or occupational) application, license, permit, registration, certification, or other authorization restricted, suspended, rejected, revoked, or denied by any governmental agency or gaming regulatory authority? YES □ NO □

If YES, complete the following chart:

NAME AND ADDRESS OF GOVERNMENTAL AGENCY OR GAMING REGULATORY AUTHORITY	TYPE OF APPLICATION, LICENSE, PERMIT, REGISTRATION, CERTIFICATION, OR OTHER AUTHORIZATION	TYPE OF ACTION (RESTRICTION, SUSPENSION, REJECTION, REVOCATION, OR DENIAL)	DATE AND DURATION OF RESTRICTION, REJECTION, SUSPENSION, REVOCATION, OR DENIAL	CAUSE(S) OF RESTRICTION, SUSPENSION, REJECTION, REVOCATION, OR DENIAL

11. Have you ever been fined by, penalized by, or entered into any settlement with any governmental agency or gaming regulatory authority regarding a gaming-related matter? YES NO

If YES, complete the following chart:

NAME AND ADDRESS OF GOVERNMENTAL AGENCY OR GAMING REGULATORY AUTHORITY	DATE OF FINE, PENALTY, OR SETTLEMENT	TERMS OF THE FINE, PENALTY, OR SETTLEMENT	CAUSE(S) OF FINE, PENALTY, OR SETTLEMENT

12. Beginning with your current residence(s) and working backwards, provide the following information with respect to each place where you have lived during the past five years. Ensure that there are no gaps in the five-year history.

DATES	(MO/YR)	ADDRESS (NUMBER, STREET, APARTMENT, CITY, STATE, COUNTRY, ZIP CODE)	TELEPHONE NUMBER
FROM	ТО		

13. Check you	r current marital status:	Legally Separated	Divorced	Widow/Widower
A.	Provide the name of your	present spouse:		
В.	List all former spouses: _			

14. In the chart below, provide the information regarding your employment for the past five years. Begin with your present job and work backwards. Include all part-time and full-time employment and any military service. Give dates of any unemployment between jobs or while a student in proper sequence. Note by means of an asterisk (*) any gaming-related employment (e.g., casino gaming, horse racing, dog racing, pari-mutuel operation, lottery, sports betting, etc.). Ensure that there are no gaps in the five-year history.

DATES ((MO/YR) TO	NAME AND MAILING ADDRESS OF EMPLOYER(S)	TELEPHONE NUMBER	TITLE(S)/POSITION(S) HELD	REASON FOR LEAVING
TROM					

15. Have you ever been suspended, discharged, or asked to resign from any gaming-related employment position? YES NO

If YES, provide a detailed explanation on a separate sheet and attach it to this application, **labeled as Exhibit 5.**

Initials/Date: _____

- 16. A. Are you a party to **any currently pending** lawsuit? (Include matrimonial matters, negligence matters, auto accident matters, contract matters, collection matters, debt matters, foreclosure matters, and any other civil or administrative matter). YES NO
 - B. Have you had any financial liens or judgments filed against you **in the last ten years**? (Include federal tax liens, state tax liens, unemployment judgments, defaulted student loans, delinquent child support obligations, and any other financial judgment). YES NO

DOCKET OTHER PARTIES NATURE OF THE DATE FILED JURISDICTION DISPOSITION DATE OF NUMBER TO THE LAWSUIT LAWSUIT DISPOSITION

If YES to either Question 16A or 16B, complete the following chart:

*In addition to those listed in the chart, financial liens or judgments older than ten years may be asked about if they are found to be unresolved or outstanding.

17. Have you filed a petition for any type of bankruptcy or insolvency or been adjudicated bankrupt or insolvent under any bankruptcy or insolvency law **in the last ten years**? YES NO

If YES, provide the following with respect to the last ten years:

- A. Number of times you have filed for bankruptcy or insolvency (including all dismissals and discharges)?
- B. Number of times you have been adjudicated bankrupt or insolvent?

Initials/Date: _____

18. Have your wages, earnings, or other income been subject to garnishment, attachment, charging order, voluntary wage execution, or the like **in the last ten years**? YES NO

If YES, complete the following chart:

DATE FILED	DOCKET NUMBER	NAME AND ADDRESS OF COURT	NATURE OF OBLIGATION	AMOUNT OF OBLIGATION	NAME AND ADDRESS OF OBLIGATION HOLDER

19. Do you have any ownership interest, financial interest, or financial investment (**other than though passive investing***) in any business entity applying to, or presently licensed by,the Commission? YES NO

*Passive investing means any investment that you have by means of a mutual fund in which you lack control of the investment or investment decisions.

If YES, complete the following chart:

NAME AND ADDRESS OF BUSINESS ENTITY	NATURE AND AMOUNT OF YOUR INTEREST	% OF OWNERSHIP IN THE BUSINESS ENTITY

AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES

Instructions for required verification of United States citizenship <u>OR</u> <i>qualified alien status in the United States: All persons applying for a license with the Nebraska Racing and Gaming Commission are required, by Nebraska Revised Statutes 4-108 through 4-114 must attest to the following and provide the Commission with verification of lawful presence in the United States by executing one of the statements below.

Ι,	, of lawful age,
(PRINT Applicant's Full Legal Name)	
being first duly sworn, upon oath states, under penalty of perjury, as follows:	
I am a citizen of the United States OR	
I am a qualified alien under the Federal Immigration and Nationality Act, i immigration status and alien number as follows:	my
and I hereby ag	gree to
provide a copy of my USCIS documentation upon request.	-
I hereby attest that my response and the information provided on this for any related application for public benefits are true, complete, and accurate	

any related application for public benefits are true, complete, and accurate and I understand that this information may be used to verify my lawful presence in the United States

Applicant's Signature	N	IOTARY PUBLIC
STATE OF) OF) SS: CO	JNTY	
Signed or attested before me this	day of	_, 20
(NOTARY SEAL) My	Commission expires:	

RELEASE AUTHORIZATION

To All Courts, Probation Departments, Selective Service Boards, Employers, Educational Institutions, Banks, Financial and Other Such Institutions, and All Governmental Agencies - federal, state and local, without exception, both foreign and domestic,

(Printed Name of Applicant)

_____, have authorized

the Nebraska Racing and Gaming Commission to conduct a full investigation into my background and activities.

Therefore, you are hereby authorized to release any and all information pertaining to me, documentary or otherwise, as requested by any employee or agent of the Commission, provided that he or she certifies to you that I have an application pending before the Commission or that I am presently a licensee or provisional licensee.

This authorization shall supersede and countermand any prior request or authorization to the contrary.

A photocopy of this authorization will be considered as effective and valid as the original.

(Signature of Applicant)

(Date)

Notarization Required:
STATE OF:
COUNTY:
SWORN TO ME AND SUBSCRIBED IN MY PRESENCE, THIS
DAY OF, 20
NOTARY PUBLIC:
MY COMMISSION EXPIRES:

Initials/Date: _____

AUTHORIZATION TO RELEASE CRIMINAL RECORD

The undersigned applicant hereby agrees to the release of criminal record information to the Nebraska Racing and Gaming Commission in order for the Executive Director of the Commission to conduct all necessary and required background checks.

The Executive Director may request the assistants of any state, local, or federal agency to supply the criminal records of the individual. The individual is required to be fingerprinted. **Failure to comply will result in a license not being issued to the Applicant.**

The applicant further agrees that the Executive Director may make investigations in order to satisfy the conditions for licensure. These investigations may include, without limitation, credit reviews, inspections of applicant's premises, and inspection of law enforcement and other official records. The applicant acknowledges reading and understanding the conditions set forth in this authorization and agrees to observe and be bound by them. The applicant acknowledges that the Commission is not obligated to issue a license and can suspend or revoke the license in accordance with Rules adopted thereunder. Each holder of a license agrees to be bound by and observe the terms and conditions on the application and in Nebraska Racing and Gaming Commission Rules and Regulations.

THIS FORM MUST BE COMPLETED AND NOTARIZED

Printed Name of Applicant	Date	Date of Birth	Social Security Number*	
Signature of Applicant				
		Notarization	Required:	
		STATE OF: _		
		COUNTY:		
		SWORN TO I	ME AND SUBSCRIBED IN MY PRESENCE, THIS	S
		D	AY OF, 20	
		NOTARY PUI	BLIC:	
		MY COMMIS	SION EXPIRES:	

STATEMENT OF TRUTH

STATE OF	:
	SS:
COUNTY OF	:
I,	, swear (or affirm) that:

(Printed Name of Applicant)

- 1. I personally supplied and reviewed the information contained in this application, including all attachments, exhibits, and other information requested by or provided to the Commission.
- 2. I understand and read the English language, or I have had an interpreter or translator (as applicable) read, explain, or record the answer to each question on this application, including all attachments, exhibits, and other information requested by or provided to the Commission.
- 3. Any document accompanying this application that is not an original document is a true copy of the original document.
- 4. I am aware that if any of the information contained in this application, including all attachments, exhibits, and other information requested by or provided to the Commission, or in the foregoing statements made by me, is false, my Casino Gaming Employee License Application may be denied.
- 5. The information contained in this application, including all attachments, exhibits, and other information requested by or provided to the Commission, as well as in the foregoing statements made by me, is true.

Signature of Applicant	Date	9
	Notarization Required	<u>d:</u>
	STATE OF:	
	COUNTY:	
	SWORN TO ME AND	SUBSCRIBED IN MY PRESENCE, THIS
	DAY OF	, 20
	NOTARY PUBLIC:	
	MY COMMISSION EX	PIRES:
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