

OCCUPATION GAMING LICENSE APPLICATION

2023 CASINO

Make payable to: Oklahoma Horse Racing Commission
 One Remington Place – BUILDING B, Oklahoma City, OK 73111
 (405) 419-4441 or (405) 943-6472 www.ohrc.ok.gov

<i>Office Use Only</i>		
New or Renewal Yr _____	Effective _____	
FP Date _____	Expires: 12-31-23	
Track _____	Clerk _____	Rec# _____
Ruling: YES	NO	Stew/Agt _____

Application must be typewritten or CLEARLY PRINTED in ink. All questions must be answered in full. If a question is not applicable, state such. Applications which are not complete and legible will not be considered. If space provided is not sufficient for complete answers or you wish to furnish additional information, please attach sheets of the same size as this application and number answers to correspond with the question(s).

SECTION 1: LICENSE CATEGORY

To all fees below, add the \$41 fingerprint processing fee, when applicable. Please refer to the 'Gaming Employee Application Guidelines' for details.

- Manufacturer Employee (\$125)
 Distributor Employee (\$125)
 Manufacturer/Distributor Employee (\$125)
 Vendor Employee (\$125)
 Gaming Employee - Employed by Track (\$125) _____
(Must Specify Department/Position) BSA

SECTION 2: COMPANY NAME

Print company name:

SECTION 3: EMPLOYER / AUTHORIZED REPRESENTATIVE SIGNATURE

▶ Employer/Auth Rep Signature:

SECTION 4: RACETRACK(S) YOU WILL BE WORKING AT

- Remington Park (Oklahoma City, OK)
 Will Rogers Downs (Claremore, OK)

SECTION 5: PERSONAL DATA

Full Legal Name (Last) _____ (First) _____ (Middle) _____ (Maiden, if applicable) _____				Nickname, alias, or other name used _____	
Address (Street Address) _____ (City) _____ (State) _____ (Zip) _____				Social Security Number _____	
Daytime area code & phone number () _____		Cell area code & phone number () _____		Fax area code & phone number () _____	
Sex	Race	Height	Weight	Eyes	Hair
Email _____				Date of Birth (mm-dd-yyyy) _____ Age _____	
Place of Birth (City, State, Country): _____				If you are not a US Citizen, provide a CLEAR copy of your Passport / Visa / Alien Registration document and write the number and expiration date below:	
SINGLE MARRIED DIVORCED WIDOWED			Is your spouse licensed with the OHRC? YES NO		

SECTION 6: PREVIOUS RESIDENCE(S)

List your previous residences for the past 10 years **starting with your most recent and working backwards**. Use an additional sheet if necessary.

From	To	Street Address	City	State

SECTION 7: EMPLOYMENT HISTORY

List your employment for the past 10 years **starting with your most recent and working backwards**. Use an additional sheet if necessary.

From	To	Company	Address, City, State, Zip	Position	Salary	Reason for Leaving

SECTION 7: EMPLOYMENT HISTORY *continued*

YES NO	Have you ever been dismissed or asked to resign from any employment or position that you have held? If yes, provide employers name and explain:
YES NO	Have you ever served in the U.S. military? If yes, attach a copy of the DD-214 (<i>if separation was within the past 5 years</i>).
YES NO	Have you ever been refused, denied, or had revoked or suspended any Gaming, Gambling or Horse Racing license or Finding of Suitability in any jurisdiction or been a participant in a group which has been refused, denied, or had revoked or suspended, any Gaming, Gambling or Horse Racing license or Finding of Suitability? If Yes, state reason:
YES NO	Have you ever held a financial interest in a gambling venture, in any state, including but not limited to: a racetrack (dog or horse), lottery, casino, off-track betting parlor, bookmaking operation, card room, bingo parlor or pull tabs? If yes, complete for all businesses in which you were involved: <u>Business Name:</u> <u>Location:</u> <u>Partner(s):</u> <u>Partners Address(es):</u> <u>Date of Operation:</u>
YES NO	Do you have any relatives associated with or employed in the gaming industry (this includes State Lottery and Racing)? If yes, provide: <u>Name:</u> <u>Relation:</u> <u>Address:</u> <u>Association/Employment:</u> <u>Date of Association/Employment:</u>

SECTION 8: COURT RECORD

APPLICANT NOTE: Your fingerprints will be submitted to the Federal Bureau of Investigation and to the Oklahoma State Bureau of Investigation for a background search. See compliance statement on last page for further information.

Failure to disclose, or intentional omission of, the information requested herein shall be considered grounds to deny, suspend, revoke or cancel your license. (See OHRC Rules for Racetrack Gaming: OAC 325:80-5-6 and OAC 325:80-13-6).

YES NO	Have you ever been convicted of, or pled guilty or no contest (nolo contendere) to, any felony crime?
YES NO	Have you ever been convicted of, or pled guilty or no contest (nolo contendere) to, any crime, felony or misdemeanor, involving drugs, gaming/gambling or horse racing?
YES NO	Do you currently have any pending criminal charges in any court?

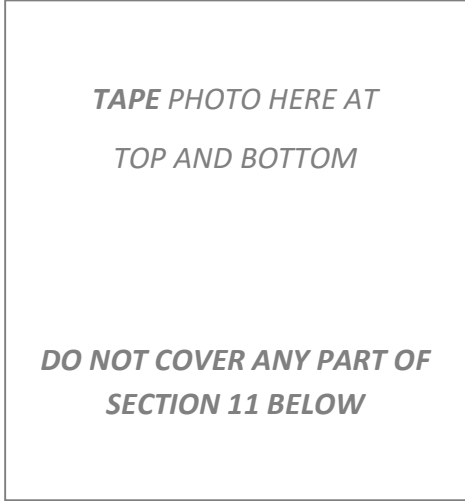
If you answered YES to any of the above Court Record questions, provide the information below AND a copy of the court record:

DATE OF CONVICTION / CHARGE	JURISDICTION (PLACE)	CRIME	DISPOSITION, SENTENCE, OR PENDING	FELONY or MISDEMEANOR

YES NO	Are you currently on any type of parole, probation, supervised release, suspended sentence or deferred sentence? If yes, provide details and attach a copy of the court record:
YES NO	Have you ever been a plaintiff or defendant in a civil court action? If yes, provide details for all court actions in which you were involved:

SECTION 9: PHOTOGRAPH

Affix a color photo below. **DO NOT USE STAPLES.** The photo should be a minimum of 3" x 2" and must have been taken within the past three months. Please print your name on the back of the photo.




SECTION 10: (All applicants must sign) COMPLIANCE STATEMENT

By acceptance of a license issued pursuant to this application, I agree to comply with the rules of the Oklahoma Horse Racing Commission (OHRC); the laws of the United States of America, the State of Oklahoma, Municipalities and other subdivisions thereof, and agree to permit personnel of the OHRC to search my vehicle(s), any premise which I may occupy or control or have the right to occupy or control and my personal property and effects including a personal search while within the enclosure of the racetrack and/or gaming facility, and the seizure of any article, the having of which within such enclosure may be forbidden by law or Commission Rules. I further agree to permit personnel of the OHRC to remove from the above listed areas any item(s) they deem relevant to their investigation. It is understood that I will receive a receipt from OHRC for any and all items thus removed. I further understand that any items so removed by the OHRC may be used in a court of law or Board of Stewards Hearing during a criminal prosecution or an administrative proceeding. I am giving this written permission to the OHRC freely and voluntarily.

I hereby request and authorize the OHRC to conduct an official investigation of my personal history and background. I understand that any investigation, the application and any information submitted with relation to my application, are subject to the Open Records Act of Oklahoma and shall be treated in accordance as such. I understand that, except where specific State or Federal statute creates a confidential privilege, persons who submit information to public bodies have no right to keep this information from public access, nor reasonable expectation that this information will be kept from public access. I understand that my fingerprints will be taken and submitted to the Federal Bureau of Investigation (FBI) and the Oklahoma State Bureau of Investigation (OSBI) for a Criminal Records Report. I understand that I have the right to challenge inaccurate information on said Report and have it corrected. I understand that if I believe the Criminal Records Report contains inaccurate information I should contact the agency or entity that provided the information, or I can challenge the information with the FBI. I understand that I can obtain information on how to challenge inaccuracies at www.fbi.gov. I understand the FBI will retain my fingerprints and associated information/biometrics and, while retained, my fingerprints will continue to be compared against other fingerprints submitted to or retained by the FBI.

I hereby certify that the information and statements I have provided herein are true and correct. I further certify that I understand all of the statements above and further authorize all consumer reporting agencies to release to the OHRC any information requested by them in connection with the background investigation and processing of this application. I understand that failure to disclose all information completely and accurately may result in refusal to issue, denial, suspension, revocation or cancellation of this license and/or other disciplinary action by the Board of Stewards and/or the Commission. I have read and understand the foregoing statements and conditions and knowingly and voluntarily attach my signature hereunto.

 _____  **ALL APPLICANTS MUST READ AND SIGN**
Applicant Signature

SECTION 11: (All applicants must complete and sign) AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES

Instructions for required verification of United States citizenship OR qualified alien status in the United States: All natural persons fourteen (14) years of age or older and present in the United States, applying for a license with the Oklahoma Horse Racing Commission are required, by the provisions of 56 O.S. Supp. 2007 § 71, to provide the Commission with verification of lawful presence in the United States by executing one of the statements below.

I, _____, of lawful age, being first duly sworn, upon oath states, under penalty of perjury, as follows:
(PRINT Applicant Name)

- I am a United States Citizen.
- I am a **qualified alien** under the Federal Immigration and Naturalization Act, and I am lawfully present in the United States. Provide a clear copy of the documentation such as a Resident Alien Card (*front and back*), Visa, etc.
- I am not a United States Citizen **AND** I will not be physically present in the United States during the time of my licensure.

 _____  **ALL APPLICANTS MUST COMPLETE & SIGN**
Applicant Signature

Signed or attested before me this _____ day of _____, 20____. _____
NOTARY PUBLIC

(NOTARY SEAL)