

Virginia Lottery

600 East Main Street, Richmond VA 23219

Gaming Employee Service Permit

VIRGINIA LOTTERY GAMING EMPLOYEE SERVICE PERMIT

I. INDIVIDUALS REQUIRED TO OBTAIN A GAMING EMPLOYEE SERVICE PERMIT:

This application must be completed by an individual who is or is seeking to be employed by an applicant for or holder of an operation license, and whose duties relate or will relate to the operation of a facility, and who performs or supervises or will perform or supervise the performance of:

- 1. Operating, servicing, or maintaining a casino gaming machine, table game or associated equipment.
- 2. Accounting, maintaining, or auditing a facility's financial records.
- 3. Counting or processing casino gaming machine or table game revenue.
- 4. Conducting security or surveillance in or around a facility; or
- 5. Operating or maintaining a facility's information systems.
- 6. Is employed by a permit holder and, whose duties directly relate to the repair, service or d distribution of a casino gaming machine, table game or associated equipment, or is otherwise required to be present on the gaming floor or in a restricted area of the facility.
- 7. Is employed by a permit holder as a junket representative.
- 8. Is otherwise required by the Lottery to be licensed as a gaming employee.

II. COMPLETING THIS FORM:

Sponsoring Licensee's Responsibilities

- **a.** This form is to be used <u>only</u> when a holder of an Operator's License, Supplier Permit, or a Service Permit (sponsored licensee) makes application for an employee applicant who has been offered a position within the sponsored licensee business.
- **b.** The form is to be filled out by the applicant employee, **not** the sponsored licensee.
- **c.** The sponsored licensee is responsible for ensuring that the following documents are uploaded into the Applicant's online application prior to submitting it to the Lottery:
 - 1. Authorization For Release of Information form (Notarized)
 - 2. Affidavit of individual Applicant form (Notarized)
 - 3. Due Diligence Background Investigation
 - 4. If the applicant is not a citizen of the United States or a Naturalized United States citizen, provide a color copy of the applicant's naturalization or authorization to be employed documents, front and back, and any other documentation of authorization to be employed in the United States.
 - 5. Copy of birth certificate.
 - 6. Copy of passport (If Applicable).
 - 7. Copy of driver's license or State ID card, front and back.
 - 8. Official copy of driving record(s) from every State in which the applicant was licensed.
 - 9. Copy of Social Security or Social Insurance Card.
 - 10. If applicant attended college, have the applicant request transcripts that should be emailed directly to the applicant representative. If the applicant has not attended college, email an official high school transcript, copy of your high school diploma, or a copy of a G.E.D. certificate directly to the applicant representative. Only provide transcripts for the highest education achieved.
 - 11. Request for Military Records, Form 180, completed & signed (If Applicable).
 - 12. Copy of any gaming licenses held (past or present) and documents relative to any past sanctions, fines, revocations, and/or suspensions.
 - 13. One or two paragraph summaries of all litigation during the past fifteen years, which should include, docket number, court information regarding the cause of action, named litigants, copy of complaint, disposition or status if pending.
 - 14. Personal Reference Form-Entire form MUST be completed.

Once these aforementioned documents have been uploaded into the applicant's Checklist within the online application portal, the Sponsored Licensee will then submit the online application.

d. The form must be submitted to the Lottery by the Sponsored Licensee, not the applicant employee.

Applicant Employee's Responsibilities

- **a.** You are to complete this form and submit it electronically to the sponsored licensee for submission to the Lottery.
- b. You must make accurate statements and include all material facts. Any misrepresentation, or the failure to provide requested information, may result in the denial of your application.
- **c.** Read each question carefully prior to answering. Answer every question completely. If a question does not apply to you or you have nothing to disclose, chose N/A. Failure to provide a response to every question could result in the denial of your application.
- **d.** Once your application is submitted, it becomes the property of the Virginia Lottery and will not be returned.
- **e.** The applicant is responsible for submitting those items listed in the Required Documents Notice to the sponsored licensee that is handling your application process so that a copy can be uploaded with your online application.
- f. Once your application has been submitted to the Lottery, you must fully cooperate with the Investigators completing your background investigation. If your action or inaction hinders the Licensing Investigator from completing your background investigation, your application may be denied. A denial of your application means that you <u>immediately</u> lose your ability to work where a Virginia gaming license or permit is required.

III. BE SURE:

- **a.** You sign the Authorization for Release of Information and the Affidavit of Individual Applicant at the end of this form in the presence of a notary.
- **b.** You should retain a copy of your completed application for your records.

IV. PHOTOGRAPH AND FINGERPRINTS

You are required to provide a passport style photograph and submit your fingerprints for the completion of a criminal background check.

a. Applicants must upload a passport style jpeg photograph, to the Applicant Information section of your online application.

Applicants are strongly encouraged to have their fingerprints electronically taken at one of the designated Fieldprint locations. If the applicant is not able to be fingerprinted at a Fieldprint location, applicants must provide two completed FBI fingerprint cards, to the Virginia Lottery's Gaming Licensing and Investigations Division. The completed fingerprint cards cannot be older than 45 days or the cards will be rejected.

V. NOTICES

The burden of proof shall be on the applicant to show by clear and convincing evidence that:

- a. The applicant complies with the laws of the Commonwealth of Virginia and the regulations regarding eligibility and qualifications for the permit and,
- **b.** The applicant is not otherwise disqualified from holding a service permit.

Any false statements made in your application, or omission of required information, will reflect negatively on your character and may result in the denial of your application. If you receive a Gaming Employee service permit based on a false statements or misinformation, the Lottery may revoke or suspend your service permit.

Your ability to obtain or maintain a gaming license in another jurisdiction may be negatively impacted if:

- (1) the Lottery denies your license application; or
- (2) if approved for a Gaming Employee Service permit in Virginia, you receive punitive action from the Lottery because of being determined to have violated Virginia's casino gaming laws or regulations.

APPLICATION AND LICENSURE FEES

1.	Application fee	\$ 500.00
3.	Fingerprint processing fee	\$ 35.72

Total fee required at application \$535.72

NOTE: Application & fingerprint processing fees are due at the time the application is submitted. These fees are non-refundable. Payment should be remitted as follows:

Wire Payment To:

Virginia Lottery Account Number: 435029087446

Name of the Account: Gaming License Fees

Transit Routing Number: 026009593

Or ACH Instructions:

Virginia Lottery Account Number: 435029087446

Name of the Account: Gaming License Fees

Transit Routing Number: 051000017

Investigations will not begin until the required fees are remitted.

_	SERVICE PERMIT TERMS
	1. Gaming Employee Service Permit

ACKNOWLEGEMENT AND DISCLOSURE

I understand and acknowledge the following:

I am applying for a Virginia Gaming Employee Service Permit. I cannot be employed in a job that requires a service permit unless the Virginia Lottery finds that I meet the legal requirements for licensure. The Lottery, through its employees, agents, and vendors, is required by law to conduct a background investigation of each applicant for a gaming license or permit.

During the investigation, the Lottery is required to collect and evaluate various kinds of information or reports to determine if applicants are suitable for licensure. I understand that the Lottery and/or its employees, agents or vendors will conduct an investigation of my personal information (the "Background Investigation"). The Background Investigation may include, but will not be limited to, information or reports about my: character; general reputation; personal characteristics, including my honesty and integrity; credit stability; criminal history (from state, federal and other agencies) or record of involvement with other litigation.

I understand that all applicants are required to be fingerprinted. These fingerprints will be submitted to the Virginia State Police and the Federal Bureau of Investigation (FBI) where criminal background checks will be conducted. The use of criminal history information will be used to assist in the determination of suitability for the issuance of a Virginia Gaming Service Permit.

I understand that I have the right to request a complete and accurate disclosure of the nature and scope of the investigation and a copy of a summary of my rights under federal credit reporting law.

I understand that I have the right to complete or challenge the accuracy of the information contained in either the Virginia State Police or the FBI identification record. Further, I have the right to be advised of the procedures for obtaining a change, correction, or update to a Virginia State Police or FBI identification record.

I am requesting that the Lottery, through its employees, agents, or vendors, obtain this information about me to evaluate my eligibility for a Gaming Employee Service Permit. I acknowledge that this disclosure and authorization remain in effect during the time my application is pending and during the time of any Employee Gaming Permit that I may be granted.

Name of Employer Gam (You <u>must</u> have an offer Licensee)	to work from a				
Type of Service Permit					ManufacturerContractor or MajorVendor Minor
Position Applicant is A					
	N.	AME ANI	ADDRES	SS	
I. Last Name	FirstName		Mi	ddle N	Name Suffix (Jr., Sr., etc.)
2. Maiden Name					13. Date of Birth
4. Address Line I			Address Line 2		
P. O. Box	City		County		State/Province e
Zip Code Country	5. E	Email Address		6. 1	Home Phone 7. Cell Phone
N	MAILING A	DDRESS	(If differen	t fr	rom above)
8. Address Line I			Address Line 2		
P. 0. Box	City		County		State/Province
Zip Code Country	Er	mail Address		Hon	me Phone Cell
	DESC	RIPTIVE	INFORM	ATI	ION
9. Height 10.	. Weight	11. Social Security	Number		12 . Driver's License
FTIN	lbs.			_	State Issued:
13. Do you have any tattoos, scars, or describe in detail:	r distinguishing marks	s? If yes,	14 MARITAL SINGLE		TUS:
15. PLACE OF BIRTH:			☐ SEPARA	TED	D DIVORCED
13. TLACE OF BIRTH.			│ │ □ widow	ED	☐ DOMESTIC PARTNER
Citvffown State/Proving 16. Name of Spouse	de Cour 17. Spouse's Maide AKA	-	18. Spouse DOB		Spouse's Social Security Number
20. HAIR COLOR	21. EYE COLOR		22. SEX	l	RACE*
D (BK)Black [(BR) Brown	0 (BK) Black O (,		l	e you of Hispanic/Latino origin? D Yes D No O Caucasian D Black/African American
O (BD) Blonde O (RD) Red	0 (HZ) Hazel O		(M) Male	D	Native Hawaiian/Pacific Islander D Asian
0 (GY) Gray 0 (WH)White	0 (GY) Gray O	(GR) Green	(F) Female	1	American Indian/Alaska Native D Other:
O (BA) Bald					fultiracial respondents may select all applicable racial egories.

		-	IER NAME OR NAMES DE ALIASES, NICKNAI			
	dditional name		name or names? YES [iden name, aliases, ni	icknames, or
Last Name	First Nar	ne	Middle Name	Suffix	From Date	To Date
25. Are you a Unit	ted States citizen	?	YES NO	If NO, com	plete the following:	
a. Country of C	itizenship					
Name and Address upon your arrival:						
b. If a naturalized citizen complete	 Date Cour City 	Granted: t: State of				
c. If you are a le	egally authorize	d Perman	nent Resident Alien, provid	e the "A" number from	your Permanent Resid	dent Card:
Card Number:			(Attach a c	color copy front and ba	ck)	
			sident Card but are authorivide the Visa number:	ized to work in the Un	ited States, please desc	cribe the U. S.
	Description of	Authoriza	ntion:			
	VISA#:					
			hat establish both identity color copy uploaded into			e accepted. All

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Document	Document Number	Issuance Date	Expiration Date
Permanent Resident Card, Form 1-551			
Permanent Resident Stamp, 1-551			
Employment Authorization Document, Form1-766			
Arrival Departure Record, Form 1-94			
Arrival Departure Record, Form 1-94A			
Admission Stamp			
1-94 in Unexpired Foreign Passport			
Form 1-797A, Notice of Action with 1-94			
Global Entry 1-94			
Form 1-571, Refugee Travel Document			
Form I-327, Re-entry Permit			
DS-2019			
Form I-20, Certificate of Eligibility			
Machine Readable Immigrant Visa			
Certificate of Naturalization			

If you have received any of the above documents provide the number assigned to the document, the issuance date and expiration date. You must upload into online application portal a color copy of the document, front and back, and any other documentation of authorization to be employed in the United States.

In the event you are not in possession of any of the above documentation, provide one document from column # 1 and one document from column # 2 below.

Column# 1	Column# 2				
Documents that Establish Identity	Documents that Establish Employment Authorization				
Driver's license or ID card issued by a state or outlying possession of the United States, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address	A Social Security Account Number card unless the card includes one of the following restrictions: (I) NOT VAUD FOR EMPLOYMENT (2) VAUD FOR WORK ONLY WITH INS AUTHORIZATION (3) VAUD FOR WORK ONLY WITH DHS AUTHORIZATION NOTE: A copy (such as a metal or plastic reproduction) is not acceptable				
ID card issued by federal, state, or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address	Certification of Birth Abroad issued by the U.S. Department of State (Form FS-545)				
School ID card with a photograph	Certification of Report of Birth issued by the U.S. Department of State (Form DS-1350)				
Voter's registration card	Original or certified copy of a birth certificate issued by a state, county, municipal authority, or outlying possession of the United States bearing an official seal				
U.S. military card or draft record	Native American tribal document				
Military dependent's ID card	Identification Card for Use of Resident Citizen in the United States (Form I-179)				
U.S. Coast Guard Merchant Mariner Card	Employment authorization document issued by DHS				
Native American tribal document					
Driver's license issued by a Canadian government authority					

If you are submitting any of the above documents from List# 1 or# 2 you must upload into online application portal a legible color copy of the document, front and back, including document number, issuance, and expiration dates.

26. Have you ever been issued a passport? $0 \ \mathrm{YES} \ 0 \ \mathrm{NO} \ \mathrm{If},$ yes please complete the following:

Passport Number	Country of Issue	Place Issued	Date Issued	Expiration Date

D	F	D	F	N	LJ.	Δ	N	T	C
\mathbf{L}	-	F	-	TA	\mathbf{L}		ULN.		

27. In the chart below, list the names of all your children, stepchildren and adopted children and the amount of support, if dependent. Also, list all other persons who you are supporting or contributing to the support of, and provide the amount of support.

Name of Children / Dependent	Date of Birth	Amount of Support	Present Address of Children / Dependents

RESIDENCE

28. Beginning with your current residence(s) and working backwards complete the following information for each place where you have lived (including residence s while attending college or while in the military service) during the past three (3) years or since the age of 18, whichever is less.

	ates	Address (Number, Street, Apt.#, City/town,	Own Or	Name, Address & Telephone Number of Landlord or Mortgage Company, if any.
From: (MoYr)	To: (MoYr)	State/Province, Zip Code	Rent	

		ED	UCATION			
		your highest level of education and wor school, college, graduate, or postgradu		nformation listed	l below	
From: (Mo/Yr)	To: (Mo/Yr)	Name and Address of School, Training Program, etc.	Description of Educational Program	List Any Deg Certification		Graduated Yes/ No
		EMD	LOYMENT			
from age full-time vour licer	18, whiche employmer ase number	rour present job and working backward ver is less. Give dates of any unemplo at and any military service. For any cunder "Title." The Military? D Yes \Backsquare No	ds, list below <u>all</u> periods of empyment between jobs in proper	sequence. Includ related employ	e all part	-time and
Da From: (Mo/Yr)	To: (Mo/Yr	Name, Address and Telephone Number of Employer(s)	Title/Position Held and Description of Duties (License Number)	Supervisors Name	L Comp	eason for eaving/ pensation at eparture

Employers Name & Address	Date of Discharge or Resignation	Reason for Leaving

CIVIL, CRIMINAL & INVESTIGATORY PROCEEDINGS

Prior to answering this question, carefully review the definitions and instructions which follow.

<u>DEFINITIONS:</u> For purposes of this question:

- A. "Arrest" includes any time that you were stopped by any law enforcement officer and advised that you were under arrest, detained, held for questioning, or were requested by a law enforcement officer to come to a law enforcement office or facility and answer questions. "Arrest" also includes any circumstances in which you were taken into custody by any law enforcement officer, fingerprinted, detained in any jail or detention center, or otherwise been the subject of a court order to appear in a judicial proceeding in which you were accused of a "crime or offense" as defined in subsection C.
- B. "Charge" includes any indictment, complaint, information, summons, or other notice of the alleged commission of any "offense."
- C. "Offense" includes all felonies, misdemeanors, and summary offenses that may have required you to appear before any municipal, state, or federal grand jury, court, or any other judicial tribunal except juvenile court. "Offense" also includes all driving-related charges or offense which carry any period of incarceration.

INSTRUCTIONS:

- 1. Answer "YES" and provide all information to the best of your ability EVEN IF:
 - A. You did not commit the offense charged.
 - B. The charges were dismissed or downgraded to a lesser charge.
 - C. You completed a pretrial intervention or other rehabilitation or diversionary program.
 - D. You were not convicted.
 - E. You did not serve any time in a correctional facility.
 - F. The charges or offenses happened a long time ago; or
 - G. You were not arrested for the charge.

2. Answer "NO" if:	<u> </u>			
a) You	have never been charge	ed with or arrested for any	crime or offense.	
		d when you were under ei a court imposed, was adju		and your arrest or charge, nile court.
	records of the charge or court of competent juri		d pursuant to an order of	f court or otherwise sealed
☐ I have read and ur	nderstand the definition	ns and instructions		
		IMPORTAN	1T	
Virginia will make inquirie enforcement agencies.	es to establish whether t	he identified individuals h	nave had any involvemen	nt with law
Failure to disclose any su integrity.	ach involvement will be	taken into account in asse	essing the Applicant's ch	naracter, honesty, and
Do you understand? 0	yes 0 no			
32. Have you ever been arr If yes, complete the followi		ny offense in any jurisdic	tion?	0 yes 0 No
Nature of Charge or Offense/Location of Where Incident Occurred	Date of Charge or Offense	Name and Address of Law Enforcement Agency or Court Involved	Disposition (Convicted, Acquitted, Dismissed, Pending, Pardoned, etc.)	Sentence (if any)

If yes, complete the following chart: Name and Address of Governmental Agency/Organization Involved Nature of Proceeding Outcome/Disposition Date	33. To the best of your kn against you, or named you jurisdiction?						
Name and Address of Governmental Agency/Organization Involved Nature of Proceeding Outcome/Disposition Date 34. To the best of your knowledge, have you ever been the subject of an investigation conducted by any government agency/organization, court, commission, committee, grand jury, or investigatory body (local, state, county, provinc federal, national, etc.) other than in connection with a traffic summons? YES NO							YES □ NO
Agency/Organization Involved Nature of Proceeding Outcome/Disposition Date 34. To the best of your knowledge, have you ever been the subject of an investigation conducted by any government agency/organization, court, commission, committee, grand jury, or investigatory body (local, state, county, provinc federal, national, etc.) other than in connection with a traffic summons? YES NO Nature of Proceeding Was Testimony Other Agency Testimony Other Agency Testimony Was Given Approximate Time Period of Investigation Testimony Was Given Testimony Was Giv	If yes, complete the follow	ing chart:					
34. To the best of your knowledge, have you ever been the subject of an investigation conducted by any governmen agency/organization, court, commission, committee, grand jury, or investigatory body (local, state, county, provinc federal, national, etc.) other than in connection with a traffic summons? YES NO			Nature of Proceeding		Outcome/Disposition		Date
agency/organization, court, commission, committee, grand jury, or investigatory body (local, state, county, province federal, national, etc.) other than in connection with a traffic summons? YES	Agency/Organization in	nvoived			1		
agency/organization, court, commission, committee, grand jury, or investigatory body (local, state, county, province federal, national, etc.) other than in connection with a traffic summons? YES NO							
agency/organization, court, commission, committee, grand jury, or investigatory body (local, state, county, province federal, national, etc.) other than in connection with a traffic summons? YES NO							
agency/organization, court, commission, committee, grand jury, or investigatory body (local, state, county, province federal, national, etc.) other than in connection with a traffic summons? YES NO							
Name and Address of Court or Other Agency Nature of Proceeding Other Proceeding Other Agency Testimony Was Given Approximate Time Period Other Agency of Investigation 35. Have you ever received a pardon, or has any government agency/organization dismissed, suspended, or deferred any criminal investigation or prosecution against you for any criminal offense? YES NO	agency/organization, court	c, commis	sion, committee, grand	jury, or invest			
Name and Address of Court or Other Agency Nature of Proceeding or Investigation Nature of Proceeding Other Agency Nature of Proceeding Testimony Was Given Nature of Proceeding Other Agency Nature of Proceeding Testimony Was Given Nature of Proceeding Testimony Other Agency Nature of Proceeding Other Agency Nature of Proceeding Testimony Other Agency Nature of Proceeding Testimony Was Given Nature of Proceeding Testimony Other Agency Organization Other Agency	If yes, complete the follow	ing chart:					lyes □ no
criminal investigation or prosecution against you for any criminal offense? YES NO	Name and Address of Court or		Nature of Proceeding Testimony		which Testimony	Approximate Time Period of Investigation	
criminal investigation or prosecution against you for any criminal offense? YES NO							
criminal investigation or prosecution against you for any criminal offense? YES NO							
criminal investigation or prosecution against you for any criminal offense? YES NO							
criminal investigation or prosecution against you for any criminal offense? YES NO							
If yes, complete the following chart: Date of Pardon, Dismissal, Type of Action Taken Name and Address of Government Agency/ Organization Granting Pardon, Dismissal,						suspende	ed, or deferred any
Date of Pardon, Dismissal, Type of Action Taken Name and Address of Government Agency/ Organization Granting Pardon, Dismissal,							□YES □ NO
Dismissal, Type of Action Taken Organization Granting Pardon, Dismissal,		ing chart:			Nama and Addr	oss of Co	vernment Agency/
	Dismissal,	Dismissal, Type of Action Taken			Organization Granting Pardon, Dismissal,		

36. Have you or any busine petitioned into bankruptcy,							
If yes, complete the following	ing chart:						□YES □NO
Date Filed	iled Docket Number			Name and Address of Court			Date Judgement Entered
37. In the past ten (10) your regulation, or code of any criminal, summary, or motor	local, state	e, county, m					
If yes, complete the following	ing chart:						□YES □ NO
Governmental Agency/ Organization		Nε	Nature of Charge Date			Disposition	
DEDMI	TC 110	PENICEC	CEDTIE		1 0- DE	CICTDAT	FIONE
38. Have you, or any busing certificate, or registration if yes, complete below.	ess entity v	vith which y	ou are or we	re associated			
Name & Address of Applicant	t Name & Address of Licensin		ensing Body	Type of Pern License, Cert Registration		Date of Application	Disposition: Granted, Denied, Pending, Withdrawn

	GARNISHMI	ENT PROCEEDING	S	
39. Have your wages, earn orders in any jurisdiction?	nings or other income ever bee	n subject to garnishment, atta	achment, or other sin	nilar
If yes, complete the follow	ing chart:		□YI	es 🗆 no
Nature & Amount of Obligation	Name & Address of Holder of Obligation	Name & Address of Court	Court Docket Number	Current Statu
40. Have you had a lien or support orders, or judgmen	financial judgment filed againts and federal state and loca	nst you in the past ten (10) yal tax liens)	ears? (This includes	child
If yes, complete the follow	ing chart		□YES	s \square no
			<u> </u>	
Nature & Amount of Obligation	Name & Address of Holder of Obligation	Name & Address of Court	Court Docket Number	Current Statu

f yes, complete the follow	ing chart:		□YE	s 🗆 no
Nature & Amount of Obligation	Name & Address of Holder of Obligation	Name & Address of Court	Court Docket Number	Current Status
(Answer all o	questions and provide in	Vorkplace; Problem formation to any question		ves.")
2. Do you currently engag If yes, please explai 3. The use of alcohol by performance or condu	ge in the illegal use of drugs, n below. licensees may be prohibite	or have ever been arrested for d in a casino, and any use cipline of Gaming employee	on you answer "y r such use? O YE	ersely affects jo
If yes, please explains. The use of alcohol by performance or condu	ge in the illegal use of drugs, n below. licensees may be prohibite tet maybe the basis for disc	or have ever been arrested for d in a casino, and any use cipline of Gaming employee	on you answer "yor such use? O YE of alcohol that adver and revocation or	ersely affects jo
If yes, please explains. The use of alcohol by performance or condu	ge in the illegal use of drugs, n below. licensees may be prohibite act maybe the basis for disc his present a problem for you	or have ever been arrested for d in a casino, and any use cipline of Gaming employee	on you answer "yor such use? O YE of alcohol that adver and revocation or	ersely affects jo
2. Do you currently engage If yes, please explain 3. The use of alcohol by performance or conduct Gaming permit. Does to the second of the s	ge in the illegal use of drugs, n below. licensees may be prohibite let maybe the basis for dischis present a problem for yound below.	or have ever been arrested for d in a casino, and any use cipline of Gaming employee	on you answer "yor such use? O YE of alcohol that advers and revocation on O YE	ersely affects jo



AFFIDAVIT OF INDIVIDUAL APPLICANT

I,
By a separate Authorization for Release of Information, I am authorizing any entity or individual that has information about me to release that information to the Virginia Lottery, and its employees, agents, and vendors (collectively, "the Lottery"), for purposes of the Lottery's investigation of my application for a video lottery employee license.
I expressly waive, release, discharge, and forever hold harmless and agree to indemnify, the Lottery, the Commonwealth of Virginia, and their employees, agents, and representatives, from liability for any and all claims or legal action arising from any actions that the Lottery or the Commonwealth of Virginia may take related to the collection of information from any individual or person and the use of that information in connection with investigating my application for a Gaming Employee Service Permit.
Signature of Applicant Print Name of Applicant Date
NOTARY
NOTARI
The undersigned, a Notary Public in and for the County of
This $_$ $_$ $_$ day of $_$, and to which witness my hand and seal.
Notary Public Stamp or Seal
Printed Name
My commission expires



AUTHORIZATION FOR RELEASE OF INFORMATION

AUTHORIZATION FOR RELE	ASE OF INFORMATION
TO:	T. (()
(To be filled-in by	Lottery)
FROM: (Applicant's Print	ed Name)
I, (printed name Permit in the Commonwealth of Virginia.	e), am an applicant for a Gaming Employee Service
The Virginia Lottery, and its employees, agents, and vendors (conduct an investigation of an applicant Gaming Employee Se Lottery to collect and evaluate information about me. By execu and authorize any: local, State or federal government unit; comconsumer reporting agency; non-profit entity; individual or any Lottery any and all information about me that the Lottery reque in written, verbal, electronic, or any other form.	rvice Permit. That investigation requires the ting this Authorization, I irrevocably give consent imercial or business enterprise, including a vother public or private entity to release to the
With respect to any claims or liability arising from the releasers waive, release, discharge and forever hold harmless that releases information to the Lottery under the authority of the	and agree to indemnify, the unit, entity, or individual
A photo, facsimile, or electronic copy of this signed and date original.	ed Authorization shall be equally effective as an
Signature of Applicant	Date
Print Name of Applicant	
NOTAR	Y
The undersigned, a Notary Public in and for the County of, certifies that the above named individual known to me or satisfactorily proven to be the individual whose signed the Authorization and Notification.	
This day of	, and to which witness my hand and seal.
	Notary Public
Stamp or Seal	
My commission expires 20	Printed Name

Required Documents Notice

Notification to all Gaming Employee Service Permit applicants:

Your application for a Gaming Service Permit requires the Lottery to initiate a comprehensive background investigation on you to determine your suitability for the issuance of a Gaming Service Permit in the Commonwealth of Virginia.

To ensure that this investigation will be completed in a timely manner, please provide all the applicable required documentation listed below to your Account Representative staff member that is handling your application process so that the document copies can be uploaded with your online application. Failure to provide the below listed documents will delay the completion of your background investigation and subsequent approval of your license application.

Once your application has been submitted to the Lottery, you must fully cooperate with the Virginia Lottery's Licensing Investigator. If your action or inaction hinders the Licensing Investigator from completing your background investigation, your Gaming Employee Service Permit may be denied.

Required Documents

All documentation / information provided is confidential and will become the property of the Virginia Lottery. No document will be returned, so please make sure you retain the original document unless otherwise specified in the instructions.

- 1. Copy of your birth certificate.
- 2. Copy of your Naturalization Certificate. (If Applicable).
- 3. Copy of your Passport (If Applicable).
- 4. Copy of your driver's license or government issued ID card, front and back.
- 5. Official copy of your driving record(s) from any State in which you were licensed.
- 6. Copy of your Social Security or Social Insurance Card.
- 7. Copy of your Permanent Resident Card, Work Visa (HIB, H2B, TNl etc.) front and back (If Applicable).
- 8. If you attended college, provide a copy of college transcript(s). College transcripts should be emailed directly to the applicant representative.

 If you have not attended college, provide an official high school transcript, copy of your high school diploma, or a copy of your G.E.D. certificate. Only provide a transcript for the highest education level achieved.
- 9. Request for Military Records, Form 180, completed & signed (If Applicable)
- 10. Copy of any gaming licenses you hold now or have held in the past and documents relative to any

	sanctions, fines, or suspension.
11.	One or two paragraph summaries of all litigation during the past fifteen years, which should include, docket number, court information regarding the cause of action, named litigants, copy of complaint, disposition or current status if pending.
12.	Personal Reference Form - Entire form MUST be completed.

Provide the names and other information requested of three (3) references over the age of 18 who have known you for at least one year and can attest to your good character and reputation. No individual can be a reference who is a member of your family. For purpose of this question "family" means spouse, domestic partner, parent grandparent, child, grandchild, sibling, uncle, aunt, nephew, niece, father-in-law, mother-in-law, son-in-law, daughter-in-law brother-in-law and sister-in-law, or any other individual related by blood, marriage, or adoption.					
biother-in- law and sister-in-law, or	Reference #1 Inform				
Reference Email Address (preferred con	tact method):				
Reference Home Address					
Reference Business Address					
City	State	Postal Code			
Occupation	Home Telephone	Business Telephone			
•	lationship (ex: friend, neighbor, co-	•			
Tears known Explain the re		·			
	Reference #2 Inform	ation			
D. C	44 41 - 1).				
Reference Email Address (preferred con	tact method):				
Reference Home Address					
Reference Business Address					
Occupation	Home Telephone	Business Telephone			
	nship (ex: friend, neighbor, co-wor	<u> </u>			
Tears Known Explain the relation		,			
	Reference #3 Inform	ation			
D. C	44 41)				
Reference Email Address (preferred con	tact method):				
Reference Home Address					
City	State	Postal Code			
Reference Business Address					
Occupation	Home Telephone	Business Telephone			
Years Known Explain the relatio	nship (ex: friend, neighbor, co-wo	orker. etc.)			

MILITARY RECORDS FORM

(In the event the applicant served in the Armed Forces)

Instructions for completing SF 180, Request Pertaining to Military Records 1. If you served in the U.S. Military, complete, sign and date the SF 180, Request Pertaining to Military Records. The form can be found at https://www.archives.gov/files/research/order/standard-form-180.pdf

Include the following information in the appropriate space:

Section I – Information Needed to Locate Records

• Complete all blanks and answer all questions.

Section II – Information and/or Documents Requested

- Item 1 Check the box DD Form 214 or equivalent. Do not check the box requesting a DELETED Report of Separation for the years you indicated in Dates of Service of Section I, Item 5.
 - Check the "Other" box and insert the phrase "Info related to military court martial or other charges."
- Item 2 Purpose- Check the "Other" box Insert the phrase "This information is necessary in order for the Virginia Lottery to complete my background investigation."

Section III – Return Address and Signature

- Item 1 State your name.
- Item 2- Check the box that you are the Service Member or Veteran identified in 1 above.
- Item 3 -Send Information and documents to:

Nathan Warfield

Director of Licensing and Investigations

Virginia Lottery 600 East Main Street Richmond, VA 23219

- Item 4 Complete and sign with your information
- 2. Submit the form to the appropriate Processing Center and submit a copy of the form to your Account Representative for uploading into the gaming system.