



Lottery and Gaming Control Commission

1800 Washington Boulevard, Suite 330, Baltimore, MD 21230

NON-GAMING / NON-WAGERING EMPLOYEE LICENSE RENEWAL APPLICATION

Form # 4002

Applicant: _____

First, Middle, Last Name

Affiliation: _____

(Name of Sponsoring Entity: Casino, Manufacturer, Contractor, Sports Wagering Licensee or Applicant, or Vendor)

NOTICE

Maryland's Gaming Law and Sports Wagering Law are long and complex. Maryland Gaming Law is located in State Government Article, Title 9, Subtitle 1A, Annotated Code of Maryland ("SG"). The regulations promulgated by the Maryland Gaming Control Commission ("Commission") are found in Code of Maryland Regulations ("COMAR") 36.03. Collectively, SG § 9-1A *et seq.* and COMAR 36.03 are referred herein as the "Gaming Law". Maryland's Sports Wagering Law is located in SG Title 9, Subtitle 1E, and the regulations promulgated the Commission are found in COMAR 36.10. Collectively, SG § 9-1E *et seq.* and COMAR 36.03 are referred herein as the "Sports Wagering Law".

The cites referenced within this application are for explanatory purposes, are subject to change, may be different from what is provided, and should not be relied upon. You are expected to be familiar with the current Gaming Law and Sports Wagering Law; updates and information may be found at <https://www.mdgaming.com/>.

Failure or refusal to adhere to Gaming Law and Sports Wagering Law may result in the Commission imposing sanctions and/or penalties, to include, but not limited to, the placing of conditions on a license; suspension or revocation of a license; reprimand of a licensee; and/or fines, and may result in criminal and/or civil charges being filed against the licensee.

APPLICABILITY AND ELIBIGILITY

The Commission is required to investigate an Applicant for a sports wagering or video lottery (hereinafter "gaming") license, as well as, an Applicant for a non-gaming or non-wagering license pursuant to the Sports Wagering Law and Gaming Law. An applicant for a license must establish by clear and convincing evidence that the Applicant is qualified for licensure, and must not be subject to any grounds for mandatory disqualification from license eligibility. SG §§ 9-1A-07(c)(1); 9-1E-07(e)(1); COMAR 36.03.02, 36.10.03.

Individuals who meet the definition of a nongaming employee under COMAR 36.03.01.02 (hereinafter "non-gaming") or a non-sports wagering employee or non-wagering employee (hereinafter "non-wagering employee") under 36.10.01.02 must submit a Non-Gaming / Non-Wagering Employee License Application to the Commission. Generally, an individual requires a Non-Gaming / Non-Wagering Employee License if they are seeking to be employed by an applicant or holder of a gaming or sports wagering license or certain vendors, and whose duties **do not** involve the maintenance, operation, or function of gaming or sports wagering: equipment, activities, functions, or associated assets. Additionally, Non-Gaming / Non- Wagering Employee Licenses are for employees who are not required to work in restricted areas or on the gaming / wagering floors.

The Commission may renew the Non-Gaming / Non-Wagering Employee License, if the licensee:

- a. Submits an application for renewal to the Commission at least **90 days** before the employee's license expires (COMAR 36.03.02.12 and COMAR 36.10.06);
- b. Continues to comply with all licensing requirements and establishes by clear and convincing evidence, that they meet applicable license qualification requirements (COMAR 36.03.02.12; COMAR 36.10.06);
- c. Submits to a background investigation (COMAR 36.03.02.12; COMAR 36.10.06); and
- d. Pays the license renewal fees and costs associated with the background investigation (COMAR 36.03.02.12; COMAR 36.10.03.06).

TERM OF LICENSE

A Maryland Non-Gaming / Non-Wagering Employee License is valid for **five years**.

FEES AND COSTS**Renewal:**

| | |
|----------------------------|-----------------|
| Renewal License fee | \$ 60.00 |
| Fingerprint processing fee | <u>\$ 37.25</u> |
| | \$ 97.25 |

NOTE: Each Applicant is ultimately responsible for the payment of the required renewal license fee and background investigation costs. All fees must be paid in full before a renewal license may be issued.

REMITTANCE OF FEES AND COSTS**Notice Regarding Required Fees:**

A licensee is required by the Gaming Law and Sports Wagering Law to submit a payment to the Commission for the renewal license and background investigation fees ***at the time the application is submitted to the Commission***. If an applicant fails to submit the required payment, the Commission may determine that an Applicant has submitted an incomplete and inaccurate application and may deny the application.

Note: Renewal license and background investigation fees, made payable to “***Maryland Lottery and Gaming Control Agency***” are due at the time of submitting the renewal application. These fees are **non-refundable**. (COMAR 36.03.02.01; COMAR 36.10.02.03).

Payment Submission Process

- A. The payment may be submitted directly to the Licensing Division in the form of a:
1. Business Check;
 2. Cashier’s Check; or a
 3. Money Order (**no** personal checks).

The Business Check, Cashier’s Check or Money Order must be sent to:

Maryland Lottery and Gaming Control Agency
Attn: Regulatory Licensing and Investigations
1800 Washington Boulevard, Suite 330
Baltimore, Maryland 21230

- B. The payment may be submitted via a Wire Transfer:

Bank Name: Wells Fargo Bank, N.A.
Bank Address: 420 Montgomery Street, San Francisco, CA 94104

Account Name: Maryland State Lottery
ABA Routing Number: 121000248
Swift Code: WFBIU6S
Account Number: 4928823376

ELECTRONIC APPLICATION

An Applicant must submit a Maryland Non-Gaming / Non-Wagering Employee License Renewal Application to the Commission **electronically** via the 'eLicensing' system. A paper application for renewal of a Non-Gaming / Non-Wagering Employee License will not be accepted by the Commission.

SECTION A - IMPORTANT NOTICES

- A.1 Official Document:** This form is an official document of the Commission. It may not be altered or changed, except to insert the information that is required. Any alteration or change to this document may cause this application or the renewal of your license to be delayed or denied.
- A.2 License a Privilege:** A Maryland Non-Gaming / Non-Wagering Employee License is a privilege. The burden of proving qualifications to receive and hold a license is at all times on the Applicant.
- A.3 Information Provided:** The Applicant accepts any and all risk of adverse public notice, embarrassment, criticism, emotional distress or financial loss that may result from any action with respect to this application. The Applicant expressly waives any and all claims for damages as result thereof. Information not called for in this application or in addition to that which is provided in response to this application may be requested. The Applicant shall provide all information, documents, materials and certifications at the Applicant's expense.
- A.4 Accuracy, Completeness, and Truthfulness:** You **must** make accurate statements and include all material facts. Any misrepresentations, failure to provide any requested information, or failure to meet any other requirement during the application process or throughout the entire term of any licensure of the Commission, as set out in Gaming Law or Sports Wagering Law, may result in the denial of the application or revocation of any license issued, and may subject you to civil and/or criminal penalties.
- A.5 Required Fees:** The total cost of the investigation conducted pursuant to this application shall be borne by the Applicant. In addition, the Applicant is responsible for the payment of all application fees required under the Gaming Law and Sports Wagering Law. The application will not be processed until the fees have been submitted.
- A.6 Continuing Obligation:** The Applicant is under a continuing duty to **promptly** disclose any changes in the information provided in the application, as well as, all changes to any of the materials submitted in connection with the original License Application and this Renewal Application. The duty to make such additional disclosures shall continue throughout any period of licensure.
- A.7 Corrections and Changes:** The Applicant shall **promptly** provide written notification to the Commission of any corrections or changes to this application once submitted, and to any of the materials submitted in

connection with this Application. The duty to notify the Commission of any changes or corrections shall continue throughout any period of licensure.

- A.8 Conforming to Information in Application:** If the Applicant is issued a license by the Commission, the licensee has a continuing duty throughout any period of licensure to conform to all of the information contained in their application and to meet all licensing requirements.
- A.9 Fingerprints and Photographs:** During the application process, the Applicant is required to be fingerprinted and photographed, the Applicant's financial stability will be assessed, and the Applicant's criminal history, if any, will be carefully examined.
- A.10 Accountability:** If the Applicant is issued a license by the Commission, the licensee will have a continuing duty throughout any period of licensure, to inform the Commission of any act or omission that the licensee knows or should know constitutes a violation of the Gaming Law or Sports Wagering Law.
- A.11 Enforcement Actions:** A violation of the Gaming Law or Sports Wagering Law may result in the Commission taking enforcement action against a licensee which may include the imposition of penalties or sanctions up to and including revocation of a license. COMAR 36.03.04; COMAR 36.10.08.
- A.12 Applicant's Address:** All notices regarding the application will be sent to the address provided by the Applicant listed in their application. The Applicant must immediately notify the Commission of any change of address.
- A.13 Licensee Searches:** A licensee of the Commission may be required to submit to warrantless searches as stated in the Gaming Law and Sports Wagering Law.
- A.14 Commission Property:** All submissions with and for this renewal application become the property of the Commission and **will not** be returned.
- A.15 Licensing Division:** The Maryland Lottery and Gaming Control Agency's Regulatory Licensing and Background Investigations Division is referred to, throughout this application, as the "Licensing Division."
- A.16 Withdrawal of Application:** A Gaming / Wagering License Application may be withdrawn if the: (a) the Applicant submits a written request to the Commission to withdraw the application; and (b) the written request is submitted before the Commission has denied the application.

SECTION B - INSTRUCTIONS

- B.1** Read each question carefully. Answer each and every question completely. **Do not leave blank spaces.** If a question does not apply, write "Does Not Apply" or "N/A." If the correct answer to a particular question is "None," write "None."
- B.2** Do not misstate or omit any material fact(s). All information is subject to verification. False or misleading information may be grounds for the Commission to deny the application, or to suspend or revoke the license.

- B.3** All required documentation **must** be uploaded into ‘eLicensing’ on the Applicant Case Checklist Item page.
- B.4** The Commission may request additional financial and other information as needed.
- B.5** The license and application fees described in the “Fees and Costs” section of this Application and authorized by COMAR are non-refundable. COMAR 36.03.02.01; COMAR 36.10.02.03. The Commission cannot renew a license until all fees are paid.
- B.6** If the Applicant wishes to retain a copy of their application, the Applicant may print it prior to selecting the “Submit” button. Once the Applicant completes their application in the ‘eLicensing’ system, they may select the “Preview Application” button and print out a copy of it. Once the Applicant selects the “Submit” button, the Applicant may no longer view or print their application
- B.7** The Statement and Authorization at the end of this Renewal Application must be signed in the presence of a notary.

SECTION C - DEFINITIONS

Refer to the list of Definitions in the Gaming Law in COMAR 36.03.01 and the Sports Wagering Law in COMAR 36.10.01, which are applicable to all gaming and sports wagering applications. Additional resources for gaming applications; instant bingo license applications; and sports wagering license applications are available on the Maryland Lottery and Gaming Control Agency’s website: <https://www.mdgaming.com/licensing/>.

ACKNOWLEDGEMENT AND DISCLOSURE

I understand and acknowledge with my initials and signature the following:

The Maryland Lottery and Gaming Control Commission ("Commission"), through its employees, agents and vendors, is required by law to conduct a background investigation of each applicant for a license. Each applicant must prove by clear and convincing evidence that he/she is suitable and qualified for the license. Initials _____

I am seeking renewal of my Maryland Non-Gaming / Non-Wagering License. I cannot continue to be employed in a job that requires this license unless the Commission finds that I meet the legal requirements and qualifications for licensure. I am required to submit correct and accurate information, and I am prohibited from submitting false or misleading information to the Commission. Failure to disclose any required information will be considered when assessing my character, honesty and integrity, and may disqualify me. Initials _____

During the investigation, the Commission is required to collect and evaluate various kinds of information or reports to determine if an applicant meets the eligibility and qualification requirements for licensure. The background investigation will include, but not be limited to, information or reports about my: character; general reputation; personal characteristics, including my honesty and integrity; credit worthiness; financial stability; criminal record, record of involvement with law enforcement agencies, as specified in the application, or record of involvement with civil litigation. 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. Initials _____

Approval for any license issued or renewed by the Commission is based on the specific information that I submit to the Commission, whether contained within, attached to, or subsequent to, this application. Changes to any of that information may alter my suitability for licensure. Therefore, I have a continuing obligation for the entire period I am licensed, to inform the Commission of any changes to the information that I submit on my application; on any document attached with this application; or to any information or document I submit subsequent to the submission of this application. Changes include, but are not limited to, contact information (physical/email addresses and phone numbers); name changes; gaming or sports wagering sanctions or penalties imposed by any jurisdiction; arrests, charges, or convictions for any offense; or my ability to maintain my credit stability. Initials _____

I am requesting that the Commission, through its employees, agents or vendors, obtain this information about me to evaluate my eligibility for renewal of my Maryland Non-Gaming / Non-Wagering License. I acknowledge that this disclosure and authorization remains in effect during the time my application is pending and for the duration of any Non-Gaming / Non-Wagering License that I may be issued or renewed. Initials _____

Signature of Individual Completing Form _____ Date _____
Printed Name _____ Title _____

NOTARY PUBLIC

The undersigned, a Notary Public in and for the County of _____, in the State of _____, certifies that the above named individual appeared in person, and before me, either known to me or satisfactorily proven to be the individual whose name subscribed to the within instrument and signed the Authorization and Notification. This _____ day of _____, 20____, and to which witness my hand and seal.

Notary Public
Stamp or Seal _____ Printed Name _____
My commission expires _____, 20____

**ACKNOWLEDGEMENT OF FEDERAL BUREAU OF INVESTIGATION (FBI)
PRIVACY STATEMENT and RIGHT TO CHALLENGE INFORMATION****FBI Privacy Act Statement:**

This privacy act statement is also located on the back of the FD-258 fingerprint card.

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

(As of 03/30/2018)

Right to Challenge FBI Criminal History Record:

As an applicant, you have the opportunity to complete, or challenge the accuracy of, the information contained in the FBI identification record. The procedures for obtaining a change, correction, or update of an FBI identification record are set forth in 28 CFR 16.34. Information regarding this process may be found at <https://www.fbi.gov/services/cjis/identity-history-summary-checks> and <https://www.edo.cjis.gov>.

I understand and acknowledge receipt of the statements contained in this Acknowledgment of FBI Privacy Statement Right to Challenge Information in my FBI criminal history record. I understand that I am permitted a reasonable amount of time to correct or complete my FBI identification record within the process for applying to the Maryland Lottery and Gaming Control Commission in an attempt to obtain a license.

Applicant Signature

Date

Printed Name

SECTION D - APPLICANT INFORMATION

| | |
|--------------|--------------------------------|
| Today's Date | Maryland Gaming License Number |
|--------------|--------------------------------|

| | |
|------------------|------------------|
| Position / Title | Current Employer |
|------------------|------------------|

CURRENT CONTACT INFORMATION

| | | | |
|----------------------------|-------|-------|-------|
| Telephone Numbers Home: | Work: | Cell: | Other |
|----------------------------|-------|-------|-------|

| | |
|----------------|----------------|
| Email Address: | Email Address: |
|----------------|----------------|

NAME AND ADDRESS

| | | | |
|-----------|------------|-------------|-------------------------|
| Last Name | First Name | Middle Name | Suffix (Jr., Sr., etc.) |
|-----------|------------|-------------|-------------------------|

1. Has your name changed since you last completed a Maryland Lottery and Gaming Control Commission Non-Gaming / Non-Wagering Employee License Application? Yes No. If "no", go to Section 2

If Yes, provide the name used in your previous Maryland Lottery and Gaming Control Commission Non-Gaming / Non-Wagering Employee License Application.

| | | | |
|-----------|------------|-------------|-------------------------|
| Last Name | First Name | Middle Name | Suffix (Jr., Sr., etc.) |
|-----------|------------|-------------|-------------------------|

If your name has changed provide an explanation for the name change:

2. Has your address changed since you last completed a Maryland Lottery and Gaming Control Commission Non-Gaming / Non-Wagering Employee License Application? Yes No. If "no", go to Descriptive Information

If Yes, provide your current address and any other addresses used since you last completed a Maryland Lottery and Gaming Control Commission Non-Gaming / Non-Wagering Employee License Application.

CURRENT ADDRESS

| | |
|----------------|----------------|
| Address Line 1 | Address Line 2 |
|----------------|----------------|

| | | | | | |
|-----------|------|--------|----------------|----------|---------|
| P. O. Box | City | County | State/Province | Zip Code | Country |
|-----------|------|--------|----------------|----------|---------|

| | | |
|-------------|-----|--|
| Dates From: | To: | Check One: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other |
|-------------|-----|--|

MAILING ADDRESS (If Different from Above)

| | |
|----------------|----------------|
| Address Line 1 | Address Line 2 |
|----------------|----------------|

| | | | | | |
|-----------|------|--------|----------------|----------|---------|
| P. O. Box | City | County | State/Province | Zip Code | Country |
|-----------|------|--------|----------------|----------|---------|

OTHER ADDRESSES

Provide any other address – residence or mailing – that you have used since you last completed a Maryland Lottery and Gaming Control Commission Non-Gaming / Non-Wagering Employee License Application.

| | | | | | |
|----------------|------|--|----------------|----------|---------|
| Address Line 1 | | Address Line 2 | | | |
| P. O. Box | City | County | State/Province | Zip Code | Country |
| Dates From: | To: | Check One: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other | | | |

Reason for Move

APPLICANT DESCRIPTIVE AND ADDITIONAL INFORMATION

| | | | | |
|--------------------------------|----------------------|---|------------------------|---|
| Height _____ FT _____ IN | Weight _____ lbs. | Social Security Number _____ - ____ - ____ | Date of Birth _____ | Driver's License Number: _____ State Issued: _____ |
|--------------------------------|----------------------|---|------------------------|---|

| | |
|--|---|
| <p>Do you have any tattoos, scars or distinguishing marks? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, describe in detail:</p> | <p>MARITAL STATUS:</p> <p><input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED</p> <p><input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED</p> <p><input type="checkbox"/> WIDOWED <input type="checkbox"/> DOMESTIC PARTNER</p> |
|--|---|

PLACE OF BIRTH:

 City/Town State/Province Country

| | | | |
|--|---|---|--|
| <p>HAIR COLOR</p> <p><input type="checkbox"/> (BK) Black</p> <p><input type="checkbox"/> (BR) Brown</p> <p><input type="checkbox"/> (BD) Blonde</p> <p><input type="checkbox"/> (RD) Red</p> <p><input type="checkbox"/> (GY) Gray</p> <p><input type="checkbox"/> (WH) White</p> <p><input type="checkbox"/> (BA) Bald</p> | <p>EYE COLOR</p> <p><input type="checkbox"/> (BK) Black</p> <p><input type="checkbox"/> (BR) Brown</p> <p><input type="checkbox"/> (HZ) Hazel</p> <p><input type="checkbox"/> (BL) Blue</p> <p><input type="checkbox"/> (GY) Gray</p> <p><input type="checkbox"/> (GR) Green</p> | <p>SEX</p> <p><input type="checkbox"/> (M) Male</p> <p><input type="checkbox"/> (F) Female</p> | <p>RACE*</p> <p>Are you of Hispanic/Latino origin? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> White</p> <p><input type="checkbox"/> Black/African American</p> <p><input type="checkbox"/> Native Hawaiian/Pacific Islander</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> American Indian/Alaska Native</p> <p><input type="checkbox"/> Other: _____</p> <p>* Multiracial respondents may select all applicable racial categories.</p> |
|--|---|---|--|

CITIZENSHIP

1. Are you a United States citizen?

YES NO

If "NO," complete the following:

Country of Citizenship:

Name and Address of
Sponsor Upon Your Arrival:

If You Are a Naturalized
Citizen Complete:

1. C. T.S. Registration Number: _____
2. Date Granted: _____
3. Court: _____
4. City/State of Court: _____
5. Certificate Number: _____

If you are a legally authorized Permanent Resident Alien, provide the "A" number from your Permanent Resident Card:

Card Number: _____

Upload a color copy of the front and back of your Permanent Resident Card into the 'eLicensing' system on the Applicant Case Checklist Item page.

If you do not possess a Permanent Resident Card but are authorized to work in the United States, please describe the U.S. Work Visa that you possess and provide the Visa number:

Description of Authorization: _____

VISA #: _____

2. Acceptable forms of documentation that establish both identity and employment authorization which will be accepted. All documents must be unexpired and a color copy uploaded into the MLGCA's online 'eLicensing' application.

If you have received any of the below documents provide the number assigned to the document ("Document Number"), the issuance date, and expiration date. Upload a color copy of the front and back of the document, and any other documentation of authorization to be employed in the United States into the 'eLicensing' system on the Applicant Case Checklist Item page.

| Document | Document Number | Issuance Date | Expiration Date |
|-------------------------------------|-----------------|---------------|-----------------|
| Permanent Resident Card, Form I-551 | | | |

| | | | |
|---|--|--|--|
| Permanent Resident Stamp, I-551 | | | |
| Employment Authorization Document, Form I-766 | | | |
| Arrival Departure Record, Form I-94 | | | |
| Arrival Departure Record, Form I-94A | | | |
| Admission Stamp | | | |
| I-94 in Unexpired Foreign Passport | | | |
| Form I-797A, Notice of Action with I-94 | | | |
| Global Entry I-94 | | | |
| Form I-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 | | | |

3. 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.

If you are submitting any of the below documents from List # 1 or # 2, upload a legible color copy of the front and back of the document that includes the document number, issuance date, and expiration date into the ‘eLicensing’ system on the Applicant Case Checklist Item page.

| <u>Column # 1</u> Documents that Establish Identity | <u>Column # 2</u> 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 your 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: (1) NOT VALID FOR EMPLOYMENT (2) VALID FOR WORK ONLY WITH INS AUTHORIZATION; or (3) VALID 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 your 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 | |

PASSPORT

Have you ever been issued a Passport? YES NO

If "YES," complete the following chart:

| Passport Number | Country of Issue | Place Issued | Date Issued | Expiration Date |
|-----------------|------------------|--------------|-------------|-----------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Employment Information

A. Other than your current employer, are you now working for, or have you worked for, any other casino, horse racing or gaming related employer in any jurisdiction since you last completed a Maryland Lottery and Gaming Control Commission License Application?

YES NO

If "Yes" complete the following:

| | | | |
|----------------------------------|--------|-------------------------|----------|
| Employer's Name | | Employer's Phone Number | |
| Dates of Employment | | | |
| From: | | To: | |
| Employer's Street Address Line 1 | | Address Line 2 | |
| City | County | State/Province | Zip Code |
| Supervisor's Name | | Title/Position Held | |
| Reason for Leaving: | | | |
| | | | |
| | | | |

| | | | |
|----------------------------------|--------|-------------------------|----------|
| Employer's Name | | Employer's Phone Number | |
| Dates of Employment | | | |
| From: | | To: | |
| Employer's Street Address Line 1 | | Address Line 2 | |
| City | County | State/Province | Zip Code |
| Supervisor's Name | | Title/Position Held | |
| Reason for Leaving: | | | |
| | | | |
| | | | |

B. Since you last completed a Maryland Lottery and Gaming Control Commission License Application have you been – for any reason - reprimanded, suspended, terminated, or asked to leave the employment of any casino, horse racing or gaming related employer in any jurisdiction?

YES NO

If "Yes" complete the following:

| | |
|-----------------|-------------------------|
| Employer's Name | Employer's Phone Number |
|-----------------|-------------------------|

| | | | |
|--|--------|-------------------------|--------------------------------------|
| Employer's Street Address Line 1 | | Address Line 2 | |
| City | County | State/Province | Zip Code |
| Supervisor's Name | | Title/Position Held | |
| Reason: | | | |
| | | | |
| | | | |
| Employer's Name | | Employer's Phone Number | |
| Employer's Street Address Line 1 | | Address Line 2 | |
| City | County | State/Province | Zip Code |
| Supervisor's Name | | Title/Position Held | |
| Reason: | | | |
| | | | |
| | | | |
| C. Since you last completed a Maryland Lottery and Gaming Control Commission License Application, have you applied for any permit, license, certification or registration in connection with any casino, horse racing or gaming-related employment in any jurisdiction? | | | |
| <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |
| If "Yes" complete the following: | | | |
| Licensing Body #1 Name | | Date of Application | Type of Permit, License, Certificate |
| Street Address Line 1 | | Street Address Line 2 | |
| City | County | State/Province | Zip Code |
| Was a background investigation performed on you by, or on behalf of, this licensing body? | | | |
| <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |
| Disposition of the license application? <input type="checkbox"/> Granted <input type="checkbox"/> Denied <input type="checkbox"/> Pending <input type="checkbox"/> Withdrawn | | | |
| Licensing Body #2 Name | | Date of Application | Type of Permit, License, Certificate |
| Street Address Line 1 | | Street Address Line 2 | |

| | | | |
|------|--------|----------------|----------|
| City | County | State/Province | Zip Code |
|------|--------|----------------|----------|

Was a background investigation performed on you by, or on behalf of, this licensing body? YES NO

Disposition of the license application? Granted Denied Pending Withdrawn

| | | |
|------------------------|---------------------|--------------------------------------|
| Licensing Body #3 Name | Date of Application | Type of Permit, License, Certificate |
|------------------------|---------------------|--------------------------------------|

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| Street Address Line 1 | Street Address Line 2 |
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| | | | |
|------|--------|----------------|----------|
| City | County | State/Province | Zip Code |
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Was a background investigation performed on you by, or on behalf of, this licensing body? YES NO

Disposition of the license application? Granted Denied Pending Withdrawn

D. Since you last completed a Maryland Lottery and Gaming Control Commission License Application have you been – for any reason – the subject of any warning, condition, fine, penalty, sanction, suspension or revocation action brought against you by a license authority related to any permit, license, certification or registration you have held in connection with any casino, horse racing or gaming-related employment in any jurisdiction? YES NO

If “Yes” complete the following:

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|------------------------|----------------|----------------|
| Licensing Body #1 Name | Date of Action | Type of Action |
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| Street Address Line 1 | Street Address Line 2 |
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| City | County | State/Province | Zip Code |
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Explanation:

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| Licensing Body #2 Name | Date of Action | Type of Action |
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| Street Address Line 1 | Street Address Line 2 |
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| City | County | State/Province | Zip Code |
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Explanation:

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| Licensing Body #3 Name | Date of Action | Type of Action |
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| Street Address Line 1 | | Street Address Line 2 | |
| City | County | State/Province | Zip Code |
| Explanation: | | | |
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CIVIL, CRIMINAL AND INVESTIGATORY PROCEEDINGS

IMPORTANT:

The Commission **will investigate** to establish whether since you last completed a Maryland Lottery and Gaming Control Commission License Application you have had any involvement with law enforcement agencies. Failure to disclose any such involvement will be taken into account when assessing the Applicant's character, honesty and integrity.

This section asks about any arrests, offenses or charges against "you," which means the Applicant.

Prior to answering this question, carefully review the DEFINITIONS and INSTRUCTIONS.

DEFINITIONS: For purposes of this question only:

- 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" includes all sports wagering/sports betting, gaming and gambling offenses in any jurisdiction except juvenile court. "Offense" also includes all driving-related charges or offenses that carry any period of incarceration. Examples include: Driving Under the Influence; Driving While Intoxicated; Driving While Suspended; Driving While Revoked; Fleeing and Eluding; Falsified Registration Plates; and False Reports.

INSTRUCTIONS:

- a. **Answer "Yes"** and provide ***all*** information to the best of your ability **EVEN IF:**
 - 1) You did not commit the offense charged;
 - 2) The charges were dismissed or downgraded to a lesser charge;
 - 3) You completed a pretrial intervention or other rehabilitation or diversionary program;
 - 4) You were not convicted;
 - 5) You did not serve any time in a correctional facility; or
 - 6) You were not arrested for the charge.

b. Answer “No” if:

- 1) You have never been charged with or arrested for any crime or offense;
- 2) You were arrested or charged when you were under eighteen (18) years of age and your arrest or charge, including any sentence that a court imposed, was adjudicated entirely in juvenile court; or
- 3) The records of the charge or arrest have been expunged pursuant to an order of court or otherwise sealed by a court of competent jurisdiction.

I have read and understand the definitions and instructions.

Question:

Since you last completed a Maryland Lottery and Gaming Control Commission License Application, to the best of your knowledge, have you been:

1. Arrested or charged with any criminal offense in any jurisdiction?

YES NO

2. A party to a criminal indictment, information or complaint filed against you in any jurisdiction?

YES NO

3. Named as an unindicted party or unindicted co-conspirator in any criminal proceeding in any jurisdiction?

YES NO

4. The subject of an investigation conducted by any governmental agency/organization, court, commission, committee, grand jury or other investigative body other than in connection with a traffic summons or gaming licensure?

YES NO

5. Pardoned, or has any governmental agency / organization dismissed, suspended or deferred any criminal investigation or prosecution against you for any criminal offense?

YES NO

If “YES,” to any of the above, provide an explanation below.

IMPORTANT

The Commission will investigate to establish whether the identified individual has had any involvement with law enforcement agencies since you last completed a Maryland Lottery and Gaming Control Commission License Application.

Failure to disclose any such involvement will be taken into account in assessing the Applicant’s character, honesty and integrity.

Do you understand? YES NO

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**ILLEGAL USE OF CONTROLLED DANGEROUS SUBSTANCES;
USE OF ALCOHOL; PROBLEM GAMBLING**

Illegal Drug Use

1. Since you last completed a Maryland Lottery and Gaming Control Commission License Application have you engaged in the illegal use/abuse of drugs, or been arrested for such?

YES NO

Alcohol Use

2. The use of alcohol by licensees may be prohibited in a casino, sports wagering facility, or a sports wagering operation. Any use of alcohol that adversely affects job performance or one's conduct, may be the basis for disciplining a gaming employee or sports wagering employee or revocation or suspension of a gaming or wagering license. Does this present a problem for you?

YES NO

Problem Gambling

3. Are you a compulsive gambler, or have you ever been voluntarily or involuntarily excluded from any gaming facility, horse racing facility, sports wagering/betting facility or from the play of lottery, in any jurisdiction?

YES NO

If "YES" to any of the above, please explain with a detailed explanation listing the jurisdiction, if applicable.

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AUTHORIZATION FOR RELEASE OF INFORMATION

TO: _____
(To be completed by the Commission)

FROM: _____
(Printed Name of Applicant)

I am an applicant for a Non-Gaming / Non-Wagering Employee License in the State of Maryland.

The Maryland Lottery and Gaming Control Commission ("Commission") is required by law to conduct an investigation of an applicant for a Non-Gaming / Non-Wagering Employee License. That investigation requires the Commission to collect and evaluate information about me. By executing this Authorization for Release of Information, I irrevocably give consent to the Commission, and persons authorized by the Commission, to: (1) verify all information provided in the license application, in the application documents, and any information or documents I may subsequently submit as part of the application process; (2) conduct my background investigation; and to have access to any and all information that I have provided to any other jurisdiction seeking a similar license in that jurisdiction, as well as, the information obtained by that other jurisdiction during the course of any investigation that it may have conducted about me.

By executing this Authorization for Release of Information, I authorize any: Local, State or Federal government unit; commercial or business enterprise, including a consumer reporting agency, a non-profit entity, an individual or any other public or private entity, to release to the Commission any and all information about me that the Commission requests. The requested information may be released in written, verbal, electronic, or any other form.

With respect to any claims or liability arising from the release of the requested information to the Commission, I expressly waive, release, discharge and forever hold harmless and agree to indemnify, the unit, entity, or individual that releases information to the Commission, under the authority of this Authorization.

A photo, facsimile, or electronic copy of this signed and dated Authorization shall be equally effective as an original.

| | |
|---|-------|
| _____ | _____ |
| Signature of Individual Completing Form | Date |
| _____ | _____ |
| Printed Name | Title |

NOTARY PUBLIC

The undersigned, a Notary Public in and for the County of _____, in the State of _____, certifies that the above named individual appeared in person, and before me, either known to me or satisfactorily proven to be the individual whose name subscribed to the within instrument and signed the Authorization and Notification. This _____ day of _____, 20____, and to which witness my hand and seal.

Notary Public

Printed Name

Stamp or Seal

My commission expires _____, 20____

AFFIDAVIT OF INDIVIDUAL APPLICANT

I, _____ (printed name) am an applicant for renewal of a Non-Gaming / Non-Wagering Employee License in the State of Maryland. I have read, and understand every page of this Application.

To the best of my knowledge, information, and belief, the information that I have provided in, attached to, or otherwise submitted in connection with this Application is accurate, complete, and not misleading. I understand that any misrepresentation or omission may lead to the delay or denial of my application for a Non-Gaming / Non-Wagering Employee License, or may result in the Commission imposing sanctions against me, up to and including revocation of my license if I have been issued a license, or denial of a license. I understand that any misrepresentation or omission on this Application may also subject me to civil or criminal liability. I also understand that providing the Commission with false or misleading information is grounds for the Commission to reject the application, or to suspend or revoke a license, if one has been issued. I also understand that if I am issued a license, I have an ongoing obligation to comply with all licensing requirements and to promptly notify the Commission if any information that I provided to the Commission changes.

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 Maryland Lottery and Gaming Control Commission, its employees, agents, and vendors (collectively, "the Commission"), for purposes of its investigation of the application for a Non-Gaming / Non-Wagering Employee License.

I expressly waive, release, discharge, and forever hold harmless and agree to indemnify, the Commission, the State of Maryland, and their employees, agents, and representatives, from liability for any and all claims or legal action arising from any actions that the Commission or the State of Maryland may take related to the collection of information from the any individual or person and the use of that information in connection with investigating and processing my application for a Non-Gaming / Non-Wagering Employee License.

Signature of Individual Completing Form

Date

Printed Name

Title

NOTARY PUBLIC

The undersigned, a Notary Public in and for the County of _____, in the State of _____, certifies that the above named individual appeared in person, and before me, either known to me or satisfactorily proven to be the individual whose name subscribed to the within instrument and signed the Authorization and Notification. This _____ day of _____, 20____, and to which witness my hand and seal.

Notary Public

Stamp or Seal

Printed Name

My commission expires _____, 20____