

**APPLICATION FOR VENDOR LICENSURE
IN THE GAMING OPERATIONS OF
THE _____
PERSONAL HISTORY STATEMENT**

FOR INDIVIDUALS HOLDING 5% OR MORE INTEREST IN BUSINESS ENTITY

SECTION I.	PERSONAL HISTORY STATEMENT	Answer Each Question Completely
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NAME: _____
LAST FIRST MIDDLE MAIDEN OR OTHER NAMES USED

ADDRESS: _____
NUMBER STREET CITY STATE ZIP

SOCIAL SECURITY NUMBER: _____ TELEPHONE: _____

DATE OF BIRTH: / / DRIVER'S LICENSE # AND STATE ISSUED _____
MO DAY YR

PLACE OF BIRTH: _____
COUNTY CITY STATE

ARE YOU A U.S. CITIZEN? YES NO IF NOT, COUNTRY OF CITIZENSHIP _____

PHYSICAL DESCRIPTION: HEIGHT _____ WEIGHT _____ EYE COLOR _____
 HAIR COLOR _____ GENDER _____ RACE _____

LIST ALL RESIDENCES FOR THE PAST 5 YEARS: (Include street address, city, county, state and dates-month and year).

Street Address	City	County & State	From:	To:

Use Additional Sheet if Necessary

SECTION II.	CRIMINAL HISTORY	Answer Each Question Completely or Indicate N/A
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- A. Have you ever been convicted of, or are you currently being prosecuted for a FELONY?
- 1 **YES COMPLETE SECTION BELOW**
- List charge, date, City and State where the crime was committed and the name and address of the court involved and the disposition (result): **BE VERY SPECIFIC**
- 1 **NO GO ON TO SECTION B**

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Charge	Date	City and State	Court Name and Address	Disposition

Use Additional Sheet if Necessary

B. Are you now being, or have you been prosecuted for or convicted of a MISDEMEANOR *within the last 10 YEARS* of the date of this application?

í **YES COMPLETE SECTION BELOW**

List charge, date, City and State where the crime was committed and the name and address of the court involved and the disposition (result): **BE VERY SPECIFIC**

í **NO GO ON TO QUESTION C.**

Charge	Date	City and State	Court Name and Address	Disposition

Use Additional Sheet if Necessary

C. Are you now being or have you ever been CHARGED with a crime (excluding minor traffic violations), if such criminal charge is within 10 years of the date of the application and is not otherwise listed above?

í **YES COMPLETE SECTION BELOW**

List charge, date, City and State where the crime was committed and the name and address of the court involved and the disposition (result): **BE VERY SPECIFIC**

í **NO GO ON TO SECTION IV.**

Charge	Date	City and State	Court Name and Address	Disposition

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SECTION III. BUSINESS INTERESTS Answer Each Question Completely or Indicate N/A
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- A. List any business you have owned or had interest in, its address, your ownership interest or position held within the last 10 years:

Business Name	Address	Own/Interest/Position	Dates From:	To:

- B. Describe any previous or existing business relationships with Indian tribes or the Gaming Industry, including ownership interests in those businesses:

- C. Please indicate by answering the following questions whether or not you have a financial interest in any gambling activity including non-Indian business or interest:

TYPE OF INTEREST HELD: (Check YES or No for each question)

1. Have you ever invested or loaned money to, had an option to purchase, or had a contract for service to any gambling facility or activity?

YES _____ Explain below. NO _____
2. Do you have any ownership interest in any equipment being leased or otherwise provided to any gambling facilities?

YES _____ Explain below. NO _____
3. Do you have an investment or ownership interest in any business involving any activities listed under Section IV, Parts A and B?

YES _____ Explain below. NO _____
4. Do you receive any revenue or payments or money from any person who is involved in the activities listed in Section IV, Parts A and B as a result of the operation of gambling?

YES _____ Explain below. NO _____

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5. Have you ever **worked for**, in any capacity, a gambling operation?

YES _____ Explain below. NO _____

PLEASE EXPLAIN ALL YES ANSWERS _____

6. Have you ever applied for a permit or license related to gaming?

YES _____ Explain below. NO _____

7. Have you ever been denied a permit or license related to gaming?

YES _____ Explain below. NO _____

If yes, provide the following information:

TYPE OF LICENSE: _____

LICENSING AGENCY: _____

ADDRESS: _____

Street Address

City

State/Zip

IF DENIED, REASON FOR DENIAL: _____

8. Have you ever held or applied for a privileged or professional license with any regulatory agency?

YES _____ Explain below. NO _____

If yes, list the type of license and the name and address of each licensing agency and the date issued:

Type of License	Agency	Address	Date Issued

CERTIFICATION

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I certify that all statements made by me in this document are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I am aware that the purpose of this investigation is to ensure compliance with the Tribal/State compact and the National Indian Gaming Commission rules and regulations on gambling. I authorize and consent to permit any law enforcement agency and any other persons, business or agency deemed necessary, to release any information to any identified law enforcement officer of the gambling enforcement division of the National Indian Gaming Commission, or authorized agent of the _____ Gaming Commission.

Print Full Name: _____
Last
First
Middle

Signature: _____ Today's Date: _____

STATE OF _____)
) ss.
COUNTY OF _____)

On this, the _____ day of _____, 201_, before me, the undersigned officer, personally appeared _____ known to me or satisfactorily proven to be the party whose name is subscribed to the within instrument and acknowledged that he executed the same for the purposes herein contained.

IN WITNESS WHEREOF I hereunto set my hand and official seal.

Notary Public
My Commission Expires:

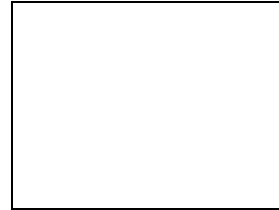
(SEAL)

ATTACHMENTS:

PHOTO PHOTOGRAPH

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FINGERPRINT CARD



The _____ Gaming Commission reserves the right to request any additional information relevant to licensing. This information may be requested at any time by the _____ Gaming Commission.