Key Person/Occupational Level 1 New License Application

Application Instructions

I. COMPLETING THIS APPLICATION

A. You are to complete this application if you are:

1. Required to obtain and maintain a Casino Gaming Employee License pursuant to Nebraska Administrative Code (NAC) Title 296 rule 3.004; or directed to do so by the Commission.

B. Read each question carefully prior to answering. Answer every question completely and legibly. Do not leave blank spaces. If a question does not apply to you, indicate "Does not apply" in response to that question. If there is nothing to disclose in response to a particular question, write "None" in response to that question. **Note: The Commission will not review your application unless you provide a response to every question.**

C. If additional space is needed, provide the extra information on a separate 'Further Response Page,' clearly identifying the question(s). Attach this page behind the application and before any required exhibits.

II. BACKGROUND INVESTIGATIONS

A. You will be required to submit your 3 most recent Tax Returns or extensions and the 'Multi-Jurisdictional Personal History Disclosure Form' with this application.

B. Along with a completed application, you will be required to be fingerprinted so that the Commission can initiate a criminal record background check as part of the investigation of your suitability for a Casino Gaming Employee License.

C. If you are seeking an initial Casino Gaming Employee License and you have received an offer of employment from a casino in Nebraska:

1. You will be notified of a time and date to report to the casino that offered you employment so that fingerprints can be obtained.

2. To establish your identity, you must present one or more of the original documents listed below:
   - i. A government-issued birth certificate with an official seal;
   - ii. A government-issued driver's license that has a photograph and/or identifying information;
   - iii. A military-issued identification card that has a photograph and/or identifying information;
   - iv. A foreign passport with a proper USCIS authorization;
   - v. Any other government-issued identification card that has a photograph and/or identifying information.

NOTE: If the name on any of the provided identification is different than the name on your application, you must also provide a court-ordered name change, marriage certificate, or divorce decree to establish the reason for the different name.

III. DUTY TO UPDATE INFORMATION

A. License holders and applicants must keep all previously submitted information up to date, including information in this application and information required under NAC Title 296 Rule 3.007.07

B. To fulfill this continuing duty to update, the person must:

1. Submit information about the change to the Commission **in writing** and no later than **ten days** after the change occurs; and

2. Include their name and Casino Gaming Employee License number.

IV. IMPORTANT NOTICES

A. Should you be unable to fully understand this application in English, it is your responsibility to obtain adequate means of interpretation or translation, as applicable.

B. All notices regarding your application will be sent to the address that you provide on this application. You must notify the Commission of any change of address in accordance with NAC Title 296 Rule 3.008.04.

C. The Commission will not issue a Casino Gaming Employee License to a person who:

1. Has a conviction prohibited by NAC Title 296;

2. Submitted an application that contains knowingly false information;

3. Violates specific rules adopted by the Commission related to denial of licensure;

4. Is a member of or employed by a gaming regulatory body of a governmental unit in Nebraska, another state, or the federal government, or is an employee of a governmental unit of Nebraska and in that capacity has significant influence or control, as determined by the Commission, over the ability of gaming-related entities to conduct business in Nebraska;

5. Is otherwise ineligible for licensure as determined by the Commission.

D. Certain information submitted, collected, or gathered as part of the application and licensing process for a Casino Gaming Employee License is confidential and not subject to disclosure as a record under Nebraska Public Record Act, Nebraska Revised Statute §§ 84-712 - 84-712.09.

E. A Casino Gaming Employee License expires **three years** after the date of licensure. Renewal of a Casino Gaming Employee License may be requested by submitting a completed Casino Gaming Employee License Application no less than **thirty days** before expiration of the License and paying the application fee.

F. Any Casino Gaming Employee License issued by the Commission is a revocable privilege and is not transferable. No licensee has a vested right in or under a Casino Gaming Employee License issued by the Commission.

Privacy Act Statement

This privacy act statement is 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

See next page for Spanish translation.

Declaración de la Ley de Privacidad

Esta declaración de la ley de privacidad se encuentra al dorso del FD-258 tarjeta de huellas digitales.

Autoridad: La adquisición, preservación, e intercambio de huellas digitales e información relevante por el FBI es autorizada en general bajo la 28 U.S.C. 534. Dependiendo de la naturaleza de su solicitud, la autoridad incluye estatutos federales, estatutos estatales de acuerdo con la Pub. L. 92-544, Órdenes Ejecutivas Presidenciales, y reglamentos federales. El proveer sus huellas digitales e información relevante es voluntario; sin embargo, la falta de hacerlo podría afectar la terminación o aprobación de su solicitud.

Propósito Principal: Ciertas determinaciones, tal como empleo, licencias, y autorizaciones de seguridad, podrían depender de las investigaciones de antecedentes basados en huellas digitales. Se les podría proveer sus huellas digitales e información relevante/ biométrica a la agencia empleadora, investigadora, o responsable de alguna manera, y/o al FBI con el propósito de comparar sus huellas digitales con otras huellas digitales encontradas en el sistema Next Generation Identification (NGI) del FBI, o su sistema sucesor (incluyendo los depósitos de huellas digitales latentes, criminales, y civiles) u otros registros disponibles de la agencia empleadora, investigadora, o responsable de alguna manera. El FBI podría retener sus huellas digitales e información relevante/biométrica en el NGI después de terminar esta solicitud y, mientras las mantengan, sus huellas digitales podrían continuar siendo comparadas con otras huellas digitales presentadas a o mantenidas por el NGI.

Usos Rutinarios: Durante el procesamiento de esta solicitud y mientras que sus huellas digitales e información relevante/biométrica permanezcan en el NGI, se podría divulgar su información de acuerdo a su consentimiento, y se podría divulgar sin su consentimiento de acuerdo a lo permitido por la Ley de Privacidad de 1974 y todos los Usos Rutinarios aplicables según puedan ser publicados en el Registro Federal, incluyendo los Usos Rutinarios para el sistema NGI y los Usos Rutinarios Generales del FBI. Los usos rutinarios incluyen, pero no se limitan a divulgación a: agencias empleadoras gubernamentales y no gubernamentales autorizadas responsables por emplear, contratar, licenciar, autorizaciones de seguridad, y otras determinaciones de aptitud; agencias de la ley locales, estatales, tribales, o federales; agencies de justicia penal; y agencias responsables por la seguridad nacional o seguridad pública.

A partir de 30/03/2018

Is this application for an ☐ Occupational Level 1 or ☐ Key Person License?

Personal Data

Full legal name (First Middle Last): _____

Other names used/legal name changes: _____

Employer: _____ Job Title: _____

DOB (Month/Day/Year): _____ Height (feet' inches"): _____ Weight (lbs.): _____

Eye Color: _____ Hair Color: _____ Race: _____ Gender: _____

Place of birth (City, State or Country if outside USA): _____

Street Address: _____

City: _____State: _____Zip Code: _____

Phone Number: _____ Email Address: _____

SSN: _____ Driver's License Number: _____

Citizenship

☐ I am a citizen of the United States OR

☐ I am a qualified alien under the Federal Immigration and Nationality Act, my immigration status and alien number as follows: _____ and I hereby agree to **attach a copy of my USCIS documentation to this application**.

IF APPLICATION IS TO BE MAILED OR ELECTRONICALLY SUBMITTED

MANUALLY AFFIX OR ELECTRONICALLY INSERT 2"x 2" PHOTO IN THE BOX BELOW

(Taken within the past 6 months, neutral background, no filters, hats or glasses, full-face, front view)

NEBRASKA RACING AND GAMING COMMISSION

RELEASE AUTHORIZATION

The undersigned authorizes the Nebraska Racing and Gaming Commission and its Executive Director to conduct all investigations required to determine my eligibility for licensure pursuant to Neb. Rev. Stat. §9-1106(9).

I authorize the release of my criminal history record information and understand that fingerprinting is required. Failure to comply may prevent licensure.

I authorize the Commission to obtain any background information needed, including credit, employment, education, financial information, inspections, and law enforcement or court records.

All courts, probation offices, employers, schools, banks, financial institutions, and government agencies (federal, state, local, foreign, or domestic) are authorized to release any information about me to the Commission or its agents upon certification that I have an application pending or am a current or provisional licensee. A photocopy of this authorization is as valid as the original.

I understand the Commission may deny, suspend, or revoke a license as permitted by law and Commission rules. I have read this authorization and agree to its terms.

Printed Name of Applicant: _____
Date: _____
Date of Birth: _____

Signature of Applicant: _____

Notarization Required:

STATE OF: _____ COUNTY OF: _____

SWORN TO ME AND SUBSCRIBED IN MY PRESENCE, THIS _____DAY OF _____, 20_____

NOTARY PUBLIC: _____

MY COMMISSION EXPIRES: _____