i-GAMING / SPORTS WAGERING OCCUPATIONAL LICENSE APPLICATION



West Virginia Lottery Commission 900 Pennsylvania Avenue Charleston, WV 25302 304-558-0500



This form is authorized under Article 29D and 29E of the West Virginia Sports Wagering and i-Gaming Act. Failure to provide information could result in rejection of, or delay in, the processing of this application.

Respond to all the questions to the best of your knowledge. Any misrepresentation or omission is grounds for license denial.

Application Fee:

This form below may be completed for one or both license types by indicating the license type in the box(es) provided. The applicant must file this application with the West Virginia Lottery, Licensing Division, P.O. Box 2067, Charleston, WV 25327, and submit a \$100 **non-refundable fee** with the application per license type. All payments must be by check made payable to the West Virginia Lottery or online at www.wvlottery.com select Customer Service, Licensing and Online Payments Options.

Forms and Documents:

The West Virginia Lottery will not process an application for an occupational license unless all requested documentation and fees have been received.

The applicant shall provide all information, documents, materials and certifications at the applicant's sole expense. The applicant shall submit an **original** of the application and all required attachments.

Sports Wagering Position Definitions:

Sports Wagering Pool Manager - an employee of a sports wagering operator or management services provider who is responsible for the oversight and reporting of sports wagering at a licensed gaming facility. Submit COPIES of the following documents with your application:

- Picture identification (valid driver's license, valid passport or other valid state or federal government-issued photo identification). Supply a passport-quality photo by email in jpeg format.
- Endorsement letter AND Affidavit of Training from an authorized representative of the casino in which the applicant is/will be employed.

Sports Wagering Ticket Writer - an employee of a sports wagering operator that reports directly to the Sports Wagering Shift Supervisor and is responsible for the exchange of cash in the form of wagers from patrons. The Ticket Writer pays out winnings and has the ability to void wagers with supervisor approval. At the end of each shift the ticket writer reconciles the assets in the sports wagering ticket writer's drawer. Submit COPIES of the following documents with your application:

- Picture identification (valid driver's license, valid passport or other valid state or federal government-issued photo identification). Supply a passport-quality photo by email in jpeg format.
- Endorsement letter AND Affidavit of Training from an authorized representative of the casino in which the applicant is/will be employed.

Sports Wagering Shift Supervisor - an employee of a sports wagering operator that reports directly to the Sports Wagering Pool Manager is responsible for the operations of the sportsbook during the assigned shift. In addition, this position reconciles and approves the sports wagering count sheets attesting to their accuracy and resolves any issues or inconsistencies. Submit COPIES of the following documents with your application:

- Picture identification (valid driver's license, valid passport or other valid state or federal government-issued photo identification). Supply a passport-quality photo by email in jpeg format.
- Endorsement letter AND Affidavit of Training from an authorized representative of the casino in which the applicant is/will be employed.

Sports Wagering Customer Service Representative – an employee of a sports wagering operator, management services provider or supplier whose duties involve accessing player account information (PII) AND having the ability to modify an account. Submit COPIES of the following documents with your application:

 Endorsement letter AND Affidavit of Training from the sports wagering operator, management services provider or supplier.

i-Gaming Position Definitions:

i-Gaming Manager - an employee of an interactive gaming operator or management services provider who is responsible for the oversight and reporting of interactive gaming at a licensed gaming facility. Submit COPIES of the following documents with your application:

- Picture identification (valid driver's license, valid passport or other valid state or federal government-issued photo identification). Supply a passport-quality photo by email in jpeg format.
- Endorsement letter AND Affidavit of Training from an authorized representative of the casino in which you are/will be employed.

i-Gaming Customer Service Representative – an employee whose duties involve accessing player account information (PII) AND having the ability to modify an account. Submit COPIES of the following documents with your application:

• Endorsement letter AND Affidavit of Training from the i-Gaming operator, management services provider or supplier.

i-Gaming Table Games Simulcast – an employee of a licensed i-gaming management services provider or supplier which provides simulcast online games and services from a West Virginia Lottery approved location. Submit COPIES of the following documents with your application:

- Picture identification (valid driver's license, valid passport or other valid state or federal government-issued photo identification). Supply a passport-quality photo by email in jpeg format.
- Endorsement letter AND Affidavit of Training from the online simulcast entity.
- Include a copy of the license certificate issued by another jurisdiction for the same/similar position for which the applicant is applying in this state.

Application Withdrawal:

In the event the applicant fails to provide the information, forms, and documents required by the West Virginia Lottery in connection with an application within 90 days of the date the application is received by the West Virginia Lottery, the application shall, without further notice, be deemed to have been voluntarily withdrawn as of that date and no further action will be taken in connection with the application.

All occupational licenses expire on June 30^{th} annually. If licensed after April 1 of any year, the license is valid until the following license year ending June 30^{th} .

If the applicant's employer is licensed or registered under the West Virginia Lottery i-Gaming and/or Sports Wagering Act, the West Virginia Lottery will notify the applicant's employers of the application withdrawal, its effective date, and the expiration.

General Information:

When completing this application, you may require additional space. Please use a separate $8 \frac{1}{2} \times 11$ sheet of paper to complete your answers. Be sure to indicate which question you are answering.

The West Virginia Lottery will review your criminal history background during the application process. The West Virginia Lottery, in its discretion, may require the applicant to furnish additional information or complete and submit additional forms.

A license issued by the West Virginia Lottery under the i-Gaming and Sports Wagering Act and Rule is a revocable privilege granted by the West Virginia Lottery. A person who holds a license does not acquire, and shall not be considered to acquire, a vested property right or other right in the license.

The occupational license remains the property of the West Virginia Lottery at all times. The occupational license may be revoked, suspended, canceled, or restricted by the West Virginia Lottery. The West Virginia Lottery may refuse to renew the license when it is reviewed under the laws.

If applicable, neither the occupational license nor the licensee identification badge (if provided) shall be transferred to another person. If the occupational licensee resigns or the occupational licensee's employment is terminated, the occupational licensee shall return the identification badge to the West Virginia Lottery.

The West Virginia Lottery, in its discretion, may require the applicant to furnish additional information or complete and submit additional forms.

Renewal:

All occupational licenses expire on June 30th annually. If licensed after April 1 of any year, the license is valid until the following license year ending June 30th. Renewal forms will be provided no later than February on an annual basis to the Operator, Management Services provider or Supplier. These forms must be completed by the renewal applicant. Additional information will be provided with the annual renewal application packet.



Occupational Initial Application

West Virginia i-Gaming and Sports Wagering

Check License Applying for:	Sports Wagering *If applying for both license t	i-Gaming ypes, select both boxes	
If applying for a Sports Wagering Pool Manager * Shift Supervisor Ticket Writer Customer Service Representation	•	ct a position:	
which provides simulcast onlin	ive * employee of a licensed i-gam ne games and services to an ed location. If applying for a	ning management services provider or supplier operator or management services provider from a Table Games Simulcast occupational license,	
<u>Level 1</u>		Level 2	
Performance Assesso	r	Equipment Specialist	
Risk Analyst		Game Presenter	
Service Manager Team Manager – Flo	or Supervisor	☐ Tech Ops ☐ Video Surveillance	
*If operating as a Manager of box(es) above for Sports Wager Representative for both license type	ring and/or i-Gaming. If	presentative indicate the license type by selecting the operating as a Manager and/or Customer Service	
Application Fees (Nonrefundable):			
• i-Gaming and/or Sport	ts Wagering Manager and/or	r Customer Service Representative: \$100	
• i-Gaming Table Games Simulcast Occupational License: \$100			
Sports Wagering Tick	et Writer: \$100		
• Sports Wagering Shift	Supervisor: \$100		

§179-10-7. Casino key employees and occupational licensees and employees of any management service provider or supplier, shall not be permitted to establish an interactive gaming account with, and are prohibited from wagering on, any interactive gaming system operated by the casino with which they are employed or provide services



Current License Holder
<i>License</i> #:

Occupational Initial Application West Virginia i-Gaming and Sports Wagering

LAST NAME (INCLUDE SR., JR., ETC., IF APPLICABLE)	FIRST		MIDDLE INITIAL
MAIDEN NAME, ALIAS (ES), OTHER NAME	CHANGES -	- Legal or Otherwise OC	CUPATION
MAILING ADDRESS Apt#	City	State	Zip
HOME ADDRESS (IF DIFFERENT THAN MAILING ADDRESS	S)		
HOME TELEPHONE NUMBER: (AREA CODE) (NUMBER)		ALTERNATE TELEPHONE REA CODE) (NUMBER)	NUMBER (EXT.)
PLACE OF BIRTH (CITY, STATE, COUNTRY)	(COUNTRY OF CITIZENSH	IP
		other than U.S., provide one of the following rth certificate, naturalization papers or alien	
DATE OF BIRTH://	I	EMAIL ADDRESS:	
SOCIAL SECURITY NUMBER://	(Applicabl	e only to Sports Wagering Manager, Ti	cket Writer and Shift Supervisor)
LICENSIN	G INFOR	<u>MATION</u>	
1. Do you currently hold a license permit, regist operation (including casino gaming, horse rac interactive wagering etc.) in another jurisdiction	eing, dog raci		
If yes: Jurisdiction(s):			
Position(s):			



Occupational Initial Application - Continued West Virginia i-Gaming and Sports Wagering

answered yes to a lawful gambli	question #1 above) for a	or any other jurisdiction (a license, permit, registrate easino gaming, horse racin ering etc.)?	ion, or other authorization	n to participate in	
If yes, complete the f	following chart:				
Name & Address of Licensing Agency (Include Country, State, County or Municipality)	Type of License, Permit, Approva or Registration		Disposition (Granted, Denied or Pending)	License, Permit, Approval or Registration Number	
If yes, provide authority.	Attach as Exhibit 2	lanation and the supporti			
Excluding traffi		rer been convicted of a fe	г	NO NO	
•	been convicted of any cri	me involving theft, fraud	or gambling? YES	NO 🗌	
1) yes, pieuse comp	tete the Johnwing Char				
Date of Conviction	Name & Address of Court Agency	Nature of Charge/Offense	Felony or Misdemeanor	Case Number and Disposition	

^{*}Attach additional sheets, if needed, as Exhibit 3.



Applicant's Acknowledgment, Agreement, Consent & Release

I,	(Licensee)
hereby acknowledge that the West Virginia L statutory duties.	ottery may require supplemental materials in order to carry out its
hereby agree to submit supplemental materials	as requested by the West Virginia Lottery.
hereby acknowledge that issuance of a table gathat I am eligible, suitable, and qualified to be lice	ames license is a privilege and that I have the responsibility to prove ensed.
financial loss, which may result from action wit	adverse public notice, embarrassment, criticism, or other action, or h respect to an application or the public disclosure of information, laim for damages against the State of WV, WV Lottery or its agents,
information provided in the application and re-	nuing duty to disclose promptly to the Lottery any changes in the quested materials submitted to the Lottery. To comply with this stating the changes and reference the specific question(s) within the
	sizures as provided in W.Va. Code §29-22C-25 and to disclose to the ding tax records held by any federal, state or local agency or credit or holding a license under this act.
hereby affirm, under the penalties of perjury, the best of my knowledge.	hat the information set forth in this document is true and complete to
I have full authority to execute this affidavit o licensee to the above.	f full disclosure on behalf of the licensee and otherwise bind the
Printed name	Licensee Signature
	NOTARY
Before me, the undersigned a Notary Public in a	and for said County and State, the above individual personally
•	Foregoing instrument as his/her voluntary act and deed.
	his release in the County of, State of
, on this	day of, 20
	Notary Public, (Written Signature)
My Commission Expires:	
County of Residence:	
Seal:	



Applicants Verification & Release

(Name of Casino/MSP/Supplier)

_____ having applied for a License at _____

(Applicant)

in the State of West Virginia being first duly swo	rn, upon oath o	r affirmation, depose and state:	
 I am the individual responsible for submitting I swear (or affirm) that the information co attachments are true, complete and accurate t I have not been convicted of a crime, a ga otherwise demonstrated, either by a police of and order. I am at least 21 years of age. I authorize and consent that the West Virgin renewal will request my fingerprints. The Virginia State Police in the Automated Fing any lawful investigative and identification put I am aware that my entire background, both State Lottery Commission. Because my emple a condition of licensure by the State Lotter release to my potential employer the following 6(a). The notification of the issuance and for 	this application that in this of the best of multiple that is a constant of the transfer of th	n. occupational license application y knowledge and belief. offense, a theft or fraud offense satisfactory evidence, a lack of respurposes of identification, licensis will be forwarded and retained cation System by the West Virgin inancial, will be thoroughly investigation/management services provided in the proposes of identification, licensis will be forwarded and retained cation System by the West Virgin inancial, will be thoroughly investigation for licensis about me and my application for licensis of the permanent or temporary	ng, or license by the West ia Lottery for tigated by the der/supplier is tery Office to censure:
to me by the State Lottery Office to my prospective employeement license has been denied by the States of the appeal process 6(c) . The notification to my prospective cases	loyer by the State Lottery Cos. ino employer 1	ate Lottery Office that a temporary commission, whether an appeal of the by the State Lottery Office of the	the denial has status of my
pending application for a license, if requested personal or private information will be disclosed	ed to the casin	0.	
I understand that a false statement in my app or revocation and could lead to the denial of my perjury, that the information set forth in this docum	occupational l	icense application. I affirm, unde	er the penalty of
Applicant's Printed Name		Applicant's Signature	
	NOTARY		
Before me, the undersigned, a Notary Public in a	nd for said Cou	anty and State, the above individua	al personally
appeared and acknowledged the execution of the fo	oregoing instru	ment as his/her voluntary act and de	eed.
IN WITNESS WHEREOF, I have executed the	is release in the	e County of	_, State of
, on this	day of		
	1	Notary Public, (Written Signature)	
My Commission Expires:			
County of Residence:			



Sports Wagering Applicants Only – Please sign your name legibly within both boxes below. Please make sure your signature is fully contained inside the boxes and does not touch the edges.

rst Name	Middle Initial	Last Name
	(First Name, Middle Initial, Last N	Jame)
		,

FINGERPRINT INSTRUCTIONS REQUIREMENTS FOR FINGERPRINT SUBMISSIONS

- 1. All applicants must submit two (2) fingerprint hard cards with this application completed by:
 - A fingerprint service (ex. **IdentoGO** <u>www.identogo.com</u>) or a law enforcement agency) request (2) Fingerprint Cards & ensure the fingerprints taken, are **not** sent to the WV Lottery electronically. Once Fingerprint Cards are completed, please provide them to the WV Lottery with this completed application. If a "Code" is requested, this is not necessary for Fingerprint Cards. Please specify you are requesting the **actual** Fingerprint Cards be printed.
- 2. You must include the completed and signed "Fingerprint Information Release" form provided with the application.
- 3. Legible photocopy of a valid driver's license or other form of state or federal government issued photo identification.

PLEASE BE AWARE THAT FINGERPRINTS MUST BE A GOOD QUALITY OR YOU MAY BE REQUIRED TO BE REPRINTED.



i-Gaming/Sports Wagering Affidavit of Training

Applicant's Full Name	
Please Prin	nt
The above named applicant has successfully complete knowledge to satisfactorily perform as an Occupational Lictypes:	
☐ Sports Wagering Pool Manager	i-Gaming Gaming Manager
☐ Sports Wagering Customer Service Representative	i-Gaming Customer Service Representative
☐ Sports Wagering Shift Supervisor	i-Gaming Table Games Simulcast
☐ Sports Wagering Ticket Writer	
I, the undersigned applicant, certify that I have received demonstrated the skill and knowledge to satisfactorily per license. I understand that providing untruthful or misles application and/or termination of any West Virginia Lottery Applicant's Signature	rform the duties required for this Occupational ading information is cause for denial of the v license.
I, the undersigned trainer, certify that on the date of successfully completed training and demonstrated the skil duties requires for the position. I understand that providing for denial of the application and/or termination of any West	untruthful or misleading information is cause
Trainer's Name Please Print	
Trainer's Signature	Date
Operator/Management Services Provider/Simulcast Entity	



Fingerprint Information

All fields are mandatory unless otherwise noted

Name (Please Print):				SSN:		
rume (rieuse rime).	Last Name	First Name	Middle Name			
Alias (Maiden name)			Citizenship (cour	ntry):		
Home Address:	Street Addres City, State, Zip			Business Na Street Addre	ess	
Date of Birth:			Place of I	Birth:		OCA#
Gender: Race	e: Hei	ght:	Weight:	Eye Color:	Hair Color:	
Finger Amputation	ns/Bandages:					
named in informat Fingerpi I certify	ndividual, and, lion will be retained int Identification	by submitting ined by the We on System.	de to find any polic this request, I unde est Virginia State P s and I am authoriz	erstand that the Police in the Auto	submitted omated	
the crimi challenge procedur	nal history recore the accuracy of	ds of the FBI. the information change, correc	llenge: Your fingerp You have the opport In contained in the F Cation, or updating a	tunity to complete BI identification	or record. The	I
Section 7 of t If you choose	he Privacy Act of 1974.	Your disclosure is volu	er should only be made if obta untary and failure to provide t per, it will be used to aid the V	he number will not subjec	t you to penalty.	
!						
	Id	uttest that all informa	ntion written on this form i	is true and correct		
	Date:					
☐ ID CHE	CKED AND VI	ERIFIED	INITIALS OF	FINVESTIGATO	OR _	



PRIVACY NOTICE USE OF SOCIAL SECURITY NUMBERS

This form is included to notify you of our privacy practices and no action is required on your part.

With the exception of Lottery Commissioners, Lottery officers or Lottery employees, the West Virginia Lottery will only ask you for your social security number in the following circumstances:

- 1. You claim a West Virginia lottery prize of \$600 or more directly from the Lottery, either by mail or personally at our Charleston or Weirton office. Your social security number is also your tax identification number, and the Internal Revenue Code requires that this prize payment be reported to the IRS along with the winner's tax identification number [Form W-2G]¹;
- 2. You are a sole proprietor of a business, a partner in a business, or the shareholder of an incorporated business that is a West Virginia lottery retailer or sales agent, and the Lottery must prepare an IRS [Form 1099] to report sales commissions received by you, along with a tax identification number if that number is also a social security number [Form 1099]; or
- 3. You are applying for a West Virginia lottery license or permit and you must allow the Lottery to capture your fingerprint images to be transported to the FBI's National Criminal Information Center [NCIC] for criminal background investigation required by statutory or regulatory authority. This is an FBI requirement.

Disclosure of your social security number should only be made if obtained from you in accordance with Section 7 of the Privacy Act of 1974. Your disclosure is voluntary and failure to provide the number will not subject you to a criminal or civil penalty.

When the West Virginia Lottery obtains your social security number, it will use the number for the purpose(s) cited above. The Lottery will not sell or share this number with any other person or entity, and will decline to make it available in response to any freedom of information request. Only government entities that are authorized to receive and use social security numbers by law will gain access, other than when outside access is ordered by a competent court of record.

If you have any questions or concerns about this privacy notice, or if you wish to submit a complaint regarding the Lottery's privacy policy, please contact the Legal Division at (304) 558-0500 ext. 1802.

¹ Prize winners of more than \$600 who are unable or unwilling to submit their tax identification number are subject to federal income tax "back-up" withholding of 24% of the prize money.



Applicant Checklist

AN INCOMPLETE APPLICATION WILL RESULT IN DELAY *REFER TO THE INSTRUCTIONS FOR A LIST OF DOCUMENTS REQUIRED FOR EACH POSITION

Your submitted application must contain and adhere to the following rules: Application Pages 1-3Attachment A - Applicant's Acknowledgment, Agreement, Consent & Release Attachment B – Applicant's Verification & Release Application Page 6 – Signature Page Affidavit of Training – must list the position(s) being applied Legible photocopy of a valid driver's license or other form of state or federal government issued Endorsement Letter from an authorized representative of the casino/management services provider/supplier in which you are/will be employed A copy of the license certificate issued by another jurisdiction for the same/similar position for which the applicant is applying in this state – Applicable to Table Games Simulcast positions only Fingerprint Information Release Form (2) Fingerprint Hard Cards \$100 application fee per License Type Photograph Requirements – If applicable to the license type to which you are applying, supply a passport quality photo by email or .jpeg format. The following are the requirements for acceptable photographs. • Head should be positioned directly facing the camera – Not looking to the side, up or down • Photo should capture from slightly above top of hair to bottom of the neck/top of shoulders • Eyes should be open and looking at the camera • Eyeglasses should be worn if normally used by the subject • Glare on eyeglasses can usually be avoided with a slight upward or downward tilt of the head • Background should be plain off-white or egg shell color • Person should be in uniform, if possible • There should be NO; shadows, ball caps, hats, sunglasses, hoodies, or coats worn in the photo. • When taking photos make sure the camera is in normal position (landscape) to take the photo and not standing up (portrait) on its side • Email photo "named" as the applicants full name – no dashes or slashes