

i-GAMING OCCUPATIONAL LICENSE APPLICATION



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

INSTRUCTIONS

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

The Lottery will not process an application for an occupational license unless the application includes **a written statement from a casino or management services provider licensee that the applicant has been hired, or will be hired, upon receiving the appropriate occupational license.**

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

Application Fee:

The applicant is responsible for the payment of all fees required under the Act. The applicant must file this application with the West Virginia Lottery, Licensing Division, P.O. Box 2067, Charleston, WV 25327, and submit a \$100.00 **non-refundable fee** with the application. All payments must be by cashier's check, certified check, company check, or money order and made payable to the "West Virginia Lottery." **DO NOT SEND CASH.**

Forms and Documents:

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.

Submit **COPIES** of the following documents with your application:

A licensee who is on-site at the Casino will be required to provide a picture identification (valid driver's license, valid passport or other valid state or federal government-issued photo identification). Supply a passport-quality photo or have employer submit by email in jpeg format a passport-quality photo. Endorsement letter from an authorized representative of the casino in which you are/will be employed.

Application Withdrawal:

In the event the applicant fails to provide the information, forms, and documents required by the Lottery in connection with this application within 60 days of the date this application is received by the Lottery, the application shall, without further notice, be deemed to have been voluntarily withdrawn as of that date and no further action will be taken in connection with the application

However, if the applicant's employer is licensed or registered under the West Virginia Lottery i-Gaming Act, the Lottery will notify the applicant's employers of the application withdrawal, its effective date, and the expiration of any temporary license that may have been issued pending providing the information, forms, or documents required. The Lottery, in its discretion, may reinstate the application upon good cause shown.

General Information:

When completing this application, you may require additional space. Please use a separate 8 ½ x 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 Lottery, in its discretion, may require the applicant to furnish additional information or complete and submit additional forms.

Failure to provide documents or information required by the West Virginia Lottery in connection with this application within 60 days of the date this application is received by the West Virginia Lottery, will, without further notice, result in your application being considered as having been voluntarily withdrawn and no further action will be taken in connection with the application.

A license issued by the Lottery under the i-Gaming Act and Rule is a revocable privilege granted by the 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 Lottery at all times. The occupational license may be revoked, suspended, canceled, or restricted by the Lottery. The Lottery may refuse to renew the license when it is reviewed under the i-Gaming Rule.

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 license certificate or identification badge to the Lottery.**



Current License Holder

License #:

Occupational Initial Application West Virginia i-Gaming

Customer Service Representative

Gaming Manager

CASINO AFFILIATION/MANAGEMENT SERVICES PROVIDER:

PLEASE PRINT OR TYPE THE ANSWERS TO THE FOLLOWING QUESTIONS IN THE SPACES PROVIDED

LAST NAME (INCLUDE SR., JR., ETC., IF APPLICABLE)

FIRST

MIDDLE INIT.

MAIDEN NAME, ALIAS (ES), OTHER NAME CHANGES - Legal or Otherwise

OCCUPATION

MAILING ADDRESS
(NUMBER AND STREET)

Apt#

City

State

Zip

HOME ADDRESS (IF DIFFERENT THAN MAILING ADDRESS)

HOME TELEPHONE NUMBER:

ALTERNATE TELEPHONE NUMBER:

(AREA CODE) (NUMBER)

(AREA CODE) (NUMBER)

(EXT.)

PLACE OF BIRTH (CITY, STATE, COUNTRY) _____

COUNTRY OF CITIZENSHIP _____

Date of Birth: ____/____/____

Email Address: _____



LICENSING DATA

Have you ever applied in West Virginia or any other jurisdiction for a license, permit, registration, or other authorization to participate in a lawful gambling operation (including casino gaming, horse racing, dog racing, pari-mutual operation, lottery, sports betting, etc.)?

YES

NO

If yes, complete the following chart:

NAME & ADDRESS OF LICENSING AGENCY (INCLUDE COUNTRY, STATE, COUNTY OR MUNICIPALITY)	TYPE OF LICENSE, PERMIT, APPROVAL OR REGISTRATION	DATE OF APPLICATION	DISPOSITION (GRANTED, DENIED OR PENDING)	LICENSE, PERMIT, APPROVAL OR REGISTRATION NUMBER

*Attach additional sheets if required.

CRIMINAL HISTORY

1) Excluding traffic violations, have you ever been convicted of any felony? YES NO

2) Have you ever been convicted of any crime involving theft, fraud, gambling, or moral turpitude?

YES

NO

If yes, please complete the following chart:

Date of Conviction	Name & Address of Court	Charge/Offense	Felony or Misdemeanor	Case Number and Disposition

*Attach additional sheets if required.



ATTACHMENT A

Applicant’s Acknowledgment, Agreement, Consent & Release

I hereby acknowledge that the West Virginia Lottery (hereinafter Lottery) may require supplemental materials in order to carry out its statutory duties. I hereby agree to submit supplemental materials as requested by the Lottery. I further agree that the West Virginia Lottery may consider my application withdrawn in the event that I do not provide materials required by the Lottery, within 60 days from the date the Lottery receives this application.

I hereby acknowledge that issuance of an i-Gaming license is a privilege. I have the responsibility to prove that I am eligible, suitable and qualified to be licensed. I must accept any risk of adverse public notice, embarrassment, criticism, other action, or financial loss, which may result from action with respect to an application or the public disclosure of information not called for in this application or in addition to that provided in response to this application may be requested. (§ 179-8-17.4)

I hereby acknowledge that I am under a continuing duty to promptly disclose to the Lottery any changes in the information provided in the application and requested materials submitted to the Lottery. To comply with this requirement I must submit a letter to the Lottery stating the changes and reference the specific question(s) within the application to which the changes pertain (§ 179-8-17.6a).

To all Courts, Probation Departments, Selective Service Boards, Employers, Educational Institutions, Banks, Financial and Other such Institutions, and all Governmental Agencies, federal, state and local, without exception, both foreign and domestic. I have authorized the West Virginia Lottery and its employees and agents to conduct a full background investigation into my personal and business activities. Therefore, I authorize and request that you release any and all information, materials and documents in your possession which have been requested by any employee or agent of the West Virginia Lottery regarding my personal or business activities. I am voluntarily giving this consent to release information, materials and documents, provided that the employee or agent of the West Virginia Lottery properly identifies himself or herself as an agent or employee of the West Virginia Lottery. This authorization supersedes and countermands any prior authorization and request to the contrary. A photocopy of this authorization will be considered as effective and valid as the original.

The undersigned has filed with the Lottery certain forms and documents relative to a written application request for licensing by the Lottery. In consideration of the assurance by the Lottery that no vote on said application will be taken except after deliberate, intensive and thorough investigation of the undersigned, including, but not limited to, background history, associates, and finances, the undersigned does for myself, my heirs, executors, administrators, successors and assigns, hereby release, remise, and forever discharge the West Virginia Lottery, the State of West Virginia, and their officers, agents and employees, from any and all manner of actions, causes of action, suits, debts, judgments, executions, claims and demands whatsoever, known or unknown, in law or equity, which the undersigned had, now has, may have, or claim to have, against any or all of said entities or individuals arising out of, or by reason of, the processing or investigation of, or other action relating to the application.

I, the undersigned, have read this release and understand all its terms. I execute it voluntarily and with full knowledge of its significance.

Applicant’s Printed Name

Applicant’s Signature

Before me, the undersigned, a Notary Public in and for said County and State, personally appeared and acknowledged the execution of the foregoing instrument as his/her voluntary act and deed.

State of _____

County of _____

IN WITNESS WHEREOF, I, _____, have executed this instrument in the County of _____, State of _____, on this ____ day of _____, 20 ____.

Notary Public

My Commission Expires: _____

Seal:



ATTACHMENT B

Applicants Verification & Release

I, _____ having applied for a License at _____
(Applicant) (Name of Casino or MSP)

in the State of West Virginia being first duly sworn, upon oath or affirmation, depose and state:

1. I am the individual responsible for submitting this application.
2. I swear (or affirm) that the information contained in this occupational license application form and its attachments are true, complete and accurate to the best of my knowledge and belief.
3. I have not been convicted of a crime of moral turpitude, a gambling-related offense, a theft or fraud offense, or have not otherwise demonstrated, either by a police record or other satisfactory evidence, a lack of respect for law and order.
4. I am at least 21 years of age.
5. I authorize and consent that the West Virginia Lottery for purposes of identification, licensing, or license renewal will take my fingerprints. These fingerprints will be forwarded and retained by the West Virginia State Police in the Automated Fingerprint Identification System by the West Virginia Lottery for any lawful investigative and identification purposes.
6. I am aware that my entire background, both criminal and financial, will be thoroughly investigated by the State Lottery Commission. Because my employment by a casino is a condition of licensure by the State Lottery Commission, I hereby authorize the State Lottery Office to release to my potential casino employer the following information about me and my application for licensure:
 - 6(a). The notification of the issuance and forwarding of a copy of the permanent or temporary license issued to me by the State Lottery Office to my prospective casino employer; or
 - 6(b). The notification to my prospective casino employer by the State Lottery Office that a temporary or permanent license has been denied by the State Lottery Commission, whether an appeal of the denial has been filed, and the status of the appeal process.
 - 6(c) The notification to my prospective casino employer by the State Lottery Office of the status of my pending application for a license, if requested by my prospective casino employer, with the understanding that no personal or private information will be disclosed to the casino.

I understand that a false statement in my application or on this form may result in the withdrawal, suspension, or revocation of my temporary license and could lead to the denial of my occupational license application. I affirm, under the penalty of perjury, that the information set forth in this document is true and complete, to the best of my knowledge.

Applicant's Printed Name Applicant's Signature

Before me, the undersigned, a Notary Public in and for said County and State, personally appeared and acknowledged the execution of the foregoing instrument as his/her voluntary act and deed.

State of _____
County of _____

IN WITNESS WHEREOF, I, _____, have executed this instrument in the
County of _____, State of _____, on this ____ day of
_____, 20 ____.

Notary Public
Seal:

My Commission Expires: _____



Applicant – Required only if applying for a Gaming Manager or Customer Services Representative position physically located at a West Virginia Casino. 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.

Licensing Applicant’s Name – Please PRINT Legibly

First Name

Middle Initial

Last Name

(First Name, Middle Initial, Last Name)

(First Name, Middle Initial, Last Name)

FINGERPRINT INSTRUCTIONS
REQUIREMENTS FOR FINGERPRINT SUBMISSIONS

1. All applicants must submit two fingerprint hardcards with this application.
2. You must have the “Fingerprint Information Release form” completed and signed and provided with the application.



Fingerprint Information

All fields are mandatory unless otherwise noted

Name (Please Print): SSN:

Last Name First Name Middle Name

Citizenship (country)

Alias (Maiden name)

Home Address: _____

 Street Address

 City, State, Zip Code

_____ Business Name
 _____ Street Address
 _____ City, State and Zip Code

Date of Birth: _____ Place of Birth:

Gender: Race: Height: Weight: Eye Color: Hair Color:

Finger Amputations/Bandages:

RELEASE OF INFORMATION

I hereby request a record check be made to find any police record on the herein named individual and by submitting this request, I understand that the submitted information will be retained by the West Virginia State Police in the Automated Fingerprint Identification System.

I certify that this is for official business and I am authorizing the West Virginia Lottery to obtain any record found.

Applicant Notification and Record Challenge: Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction, or updating an FBI identification record is set forth in Title 28, CFR. 16.34.

Privacy Act Notice: 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 penalty. If you choose voluntarily to supply your social security number, it will be used to aid the West Virginia Lottery in the conduct of this criminal background inquiry.

Signature: _____

I attest that all information written on this form is true and correct

Date: _____

ID CHECKED AND VERIFIED

INITIALS OF INVESTIGATOR

OCA# _____



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 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 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**];
3. You are applying for a 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; or,
4. You have applied for a lottery license or permit and you have been asked to send copies of one or more years of your federal income tax returns in order to determine your credit worthiness for a IGaming license.²

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. 255.

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.

² Either after the license is issued to the applicant, or after the applicant has exhausted all appeals, the tax returns will be taken from the application file and shredded.



i-Gaming Affidavit of Training

Applicant's Full Name _____

Please Print

The above named applicant has successfully completed training and demonstrated the skill and knowledge to satisfactorily perform as an Occupational Licensee for one or more of the following license types:

Customer Service Representative

Gaming Manager

I, the undersigned applicant, certify that I have received and successfully completed training and demonstrated the skill and knowledge to satisfactorily perform the duties required for this Occupational license. I understand that providing untruthful or misleading information is cause for denial of the application and/or termination of any West Virginia Lottery license.

Applicant's Signature _____ Date _____

I, the undersigned trainer, certify that on the date of _____, the applicant successfully completed training and demonstrated the skill and knowledge to satisfactorily perform at a minimum the duties outlined above. I understand that providing untruthful or misleading information is cause for denial of the application and/or termination of any West Virginia Lottery license.

Trainer's Name _____

Please Print

Trainer's Signature _____ Date _____

Casino/Management Services Provider _____