## Little River Band of Ottawa Indians Gaming Commission

2840 Orchard Highway, Suite A, Manistee, MI 49660 (231) 723-7755 or (888) 540-7084



## KEY AND NON-GAMING EMPLOYEE LICENSE RENEWAL APPLICATION

REPORT SUSPICIOUS OR ILLEGAL GAMBLING-RELATED ACTIVITY, THEFT, MISUSE, ABUSE, ETC. ANONYMOUSLY ON THE GAMING COMMISSION'S TIP HOTLINE:

## Gaming Commission Use Only Position Title:

## **License Application Notice**

By completing and signing this application, you hereby understand that the information you supplied in your application will be used by the Little River Band of Ottawa Indians Gaming Commission to request any documents or other information required to completely investigate your background including, but not limited to, your national criminal record, civil actions, criminal judgments, credit history, education, employment history, or any other information the Little River Band of Ottawa Indians Gaming Commission deems necessary to determine your eligibility to receive a license. The Little River Band of Ottawa Indians Gaming Commission may use other agents, consultants, or professionals in conducting the background investigation.

**Authority**: The Indian Gaming Regulatory Act – 25 U.S.C. § 2701, CFR § 556, and the Little River Band of Ottawa Indians Tribal Gaming Ordinance #10-400-01 (Key Employee License). The Little River Band of Ottawa Indians Gaming Commission Regulation – Chapter #R400-04:GC-03 – Non-Gaming Employee Licensing (Non-Gaming Employee License).

**Purpose**: To protect the gaming enterprise, its employees, patrons, and the public by ensuring that all gaming activities are free from criminal activities and corrupt influences. The required information is used to determine the eligibility of the applicant to be licensed for employment at a gaming enterprise of the Little River Band of Ottawa Indians.

**Disclosure of Information**: In signing this application, you understand that your license may be subject to denial, revocation, suspension, or other adverse action if you fail to provide all information, documentation, and assurances as required or requested, or if you fail to disclose any material facts, or provide misleading or deceptive information. The Gaming Commission reserves the right to request additional information at any time.

Waiver of Claim for Damages: By completing and signing this application for a license, you accept all risks of adverse reaction, financial loss, or public notice, which may result from any action taken or not taken with respect to the background investigation, and you expressly waive any claim for damages as a result of any action taken or not taken with respect to the investigation or the license application.

**Notice Regarding False Statements**: In signing this application, you understand that a false statement on any part of this application may be grounds for denying a license or the suspension and/or revocation of a license. You also understand that you may be punished for making a false statement by fine or imprisonment under 18 U.S.C. § 1001.

**Privacy Act Notice:** In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 25 U.S.C. § 2701 et seq. The purpose of the requested information is to determine the eligibility of individuals to be granted a license. The information will be used by the Tribe's regulatory agency or the National Indian Gaming Commission (NIGC) members and staff who have need for the information in the performance of their official duties. The information may be disclosed by the tribe or the NIGC to appropriate Federal, Tribal, State, local or foreign law enforcement and regulatory agencies when relevant to civil, criminal, or regulatory investigations or prosecutions or when pursuant to a requirement by a tribe or the NIGC in connection with the issuance, denial, or revocation of a license, or investigations of activities while associated with a tribe or a gaming operation. Failure to consent to the disclosures indicated in this notice will result in a tribe's inability to license you for a Primary Management Official, Key Employee or Non-Gaming Employee position. The disclosure of your Social Security Number (SSN) is voluntary. However, failure to supply a SSN may result in errors in processing your application.

**Identification Requirements:** Proof of your identity will be required.

**License Validity:** In signing this application, you understand that your license is valid for one year, and that you must apply for renewal of your license at least sixty (60) days prior to the expiration of your license.

Approved: 06-22-2021 Page 2 of 5 Applicant's Initials

**Reporting Requirements:** In signing this application, you understand that during the time you are employed at the gaming enterprise you must notify the Little River Band of Ottawa Indians Gaming Commission within five (5) <u>calendar</u> days of the date that you were involved in any of the following events:

- ALL ARRESTS, DETENTIONS, AND LITIGATIONS. (This includes any <u>criminal arrest or civil action</u> in which you were involved whether convicted in criminal court or settled in civil court.) All arrests, detentions, charges, indictments, court orders and / or summons to answer for any criminal offense for any reason whatsoever, regardless of the outcome (disposition) of the event
- ANY information that changes your original application.

**Replacement License:** In signing this application, you understand that there will be a \$10.00 fee to replace a lost or stolen license.

**Application Processing:** The processing of your application requires full and complete disclosure. Do not falsify, misstate, or omit any material fact. **Each statement made in this application is subject to verification.** Any corrections, changes, or other alterations must be initialed and dated by you. Each page, including additional pages, must be initialed in the lower right-hand corner. By placing your initials on each page, you are attesting to the truth, accuracy, and completeness of the information contained on that page.

Approved: 06-22-2021 Page 3 of 5 Applicant's Initials

<b>Personal Information:</b> If any section below does not apply to you, so state by entering N/A in the field. If space is insufficient, continue on a separate sheet of paper and precede each answer with the appropriate field title (and number if applicable). All fields must be completed.							
Last Name		•	First Name		Middle Name (if none, enter NMN)		Date
Current Address (Street, City, County, S		ty, State, and Zip Code) Mailing Address		s (if different)		Social Security Number	
Date of Birth Alias(es) (nice		(nickname, maiden na	I me, other name ch	anges (legal or	otherwise) and dates use	ed)	
Home Telephone Number Mol		Mobile T	elephone Number	Email Address			
Title							
Work Schedule Shift Worked						Shift Worked	
☐ Sunday ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thur				ursday 🗌 Friday	Saturday	AM/PM	toAM/PM
<b>IMPORTANT</b> – If you answer "Yes" to <u>any</u> of the questions below, you <u>must</u> provide a complete explanation of your answer in the "Other Information" section. Please identify each explanation (if applicable) by the corresponding number of the question.							
1.	Have you been arrested, detained, charged, indicted, or summoned to answer for any criminal offense or violation for any reason whatsoever, regardless of the disposition of the event in the past 12 months?						
2.	Has a criminal indictment, information, or complaint ever been returned against you, but for which you were not arrested or in which you were named as an unindicted co-party in the past 12 months?						Yes No
3.	Have you been questioned by a City, State, Federal, Tribal or any other law enforcement agency or Gaming Commission (except for the Little River Gaming Commission) in the past 12 months?						Yes No
4.	Have you been subpoenaed to appear or testify before a Federal, State, Tribal or County Court, Board, or Commission in the past 12 months?						Yes No
5.	Have you been a party to a civil action (i.e., marriage/divorce, name change, garnishment, and bankruptcies) in the past 12 months?						☐ Yes ☐ No
6.	Have you received a pardon or the removal of any criminal offense from your record in the past 12 months?						☐ Yes ☐ No
7.	Have you, as an individual, member of a partnership, owner, director, or officer of a corporation, been sued or sued someone in the past 12 months?						
8.	Have you changed you	Yes No					
9.	Have you had any bills sent to a collection agency in the past 12 months?						
10.	Have you incorporated any business in the past 12 months?						
11.	Have you applied for a Gaming License (certification and/or permit), professional, or business license in the past 12 months (other than for LRBOI)?						
12.	Have you held any other jobs in the past 12 months?						☐ Yes ☐ No

Approved: 06-22-2021 Page **4** of **5** Applicant's Initials

<b>Other Information:</b> Please list below any additional info	formation you wish to have considered as part of this application:
I haraby offirm and attact that all the information in	this application is complete and accurate to the best of my
	this application is complete and accurate to the best of my
knowledge.	
Printed Name	Signature/Date

Approved: 06-22-2021 Page 5 of 5 Applicant's Initials