



CHEYENNE & ARAPAHO GAMING COMMISSION EMPLOYEE GAMING LICENSE APPLICATION

Thank you for participating in the Cheyenne & Arapaho Gaming Commission's (CAGC) Employee Gaming License Application (EGLA) Process. You will be asked to complete different phases of the application process. Do not misstate or omit any material fact(s) as each statement made in this application is subject to verification. Any corrections, changes, or other alterations must be initiated by the applicant. You are advised that this EGLA is an official document and misrepresentation or failure to reveal information requested may be deemed to be sufficient cause for denial of a temporary gaming license or revocation of a gaming license.

AUTHORITY:

Indian Gaming Regulatory Act, (IGRA) U.S.C. 2701 et seq., 25 C.F.R., and Cheyenne & Arapaho Gaming Ordinance.

Initials _____

PURPOSE:

To protect the tribe, employees, patrons, and public by ensuring that the gaming activities are free from criminal activities and corruptive elements. The required information is used to determine the suitability of the applicant to be employed by and associated with the gaming activities.

Initials _____

BURDEN OF PROOF:

- The Burden of Proving qualification to receive any license is at all times on the Applicant.
- Should You become involved in Any Criminal Activity, Or Be Arrested, Or Charged with a Felony or Misdemeanor While Employed with a Cheyenne & Arapaho Tribes Gaming Facility, It Is the Applicant's Responsibility at All Times to Report this Information to the Cheyenne & Arapaho Tribes Gaming Commission.

Initials _____

DISCLOSURE OF INFORMATION:

An Applicant may be subject to denial or other action for failing to provide all information, documentation, and assurances as required or requested, or failing to reveal any material facts, or providing misleading or untrue information. The CAGC reserves the right to request additional information at any time.

Initials _____

WAIVER OF CLAIM FOR DAMAGES:

An Applicant accepts any risk of adverse reaction, financial loss, or public notice, which may result from any action taken with respect to an EGLA. By filing an EGLA, an Applicant expressly waives any claim for damages as a result taken with respect to that Applicant.

Initials _____

CRIMINAL INFORMATION DISCLOSURE:

- All Criminal information whether you have been convicted or disposition is a dismissal, must be reported without exception.
- All DUI/DWI's.

Initials _____

SPECIAL INSTRUCTIONS:

- Complete each question. If not applicable, indicate so with "N/A" or "NONE".
- If needed, Attach additional documents or explanation sheet(s).
- Any address or telephone number changes must be immediately reported to the CAGC.
- All EGLA fees are non-refundable.

Initials _____

IDENTIFICATION REQUIREMENTS:

As part of your application, we will require you provide (2) two forms of government issued photo Identification, including one or more of the following official documents:

- *Birth Certificate
- *Social Security Card
- *Passport
- *Military Identification
- *Alien Registration, if you are a registered alien.
- *State-Issued Driver License/Identification card
- *Tribal Identification

Initials _____

***** READ ALL DOCUMENTS CAREFULLY BEFORE SIGNING *****

CHEYENNE & ARAPAHO TRIBES

EMPLOYEE GAMING LICENSE APPLICATION

Applicant's Printed Name (Last, First, Middle)				Tribal Affiliation, if applicable.		Roll #	
Maiden/Married Names Used (Full Name) (Attach separate sheet if necessary)				Nicknames, Aliases, Other Names Used.			
Sex: Female Male	Social Security Number (See Privacy Act Notice)			Date of Birth			
Street Address				Home Phone Number ()		Business Phone Number ()	
City		State	Zip	County		Length At This Address	
Mailing Address (If Different From Street Address)				List All Languages Spoken			
Place of Birth (City, State, County)				List All Driver's License Numbers For the Last Five Years Number/State (Attach A Separate Sheet If Necessary)			
Physical Appearance	Height	Weight	Hair Color	Eye Color	U.S. Citizen Yes No	If No, attach details and indicate Alien Registration No.	
List All Address(es) That You Have Lived At During The Last Five (5) Years Not Including Present Address (Attach a separate sheet if necessary)							
STREET AND NUMBER				CITY/STATE/ZIP		FROM	TO
(1)							
(2)							
(3)							
(4)							
(5)							
List the names of a person who can verify that you lived at each address (Attach a separate sheet if necessary)							
NAME			ADDRESS/CITY/STATE/ZIP			PHONE NUMBER	
(1)							
(2)							
(3)							
(4)							
(5)							
Do You Currently Possess Any Type of Gaming License From Any Jurisdiction? (Tribal or State) Yes No If "Yes" Indicate License Type and Number Here:							
Have You Ever Applied For Any Type of Gaming License From Any Jurisdiction Whether or Not The License Was Ever Issued? (Tribal or State) Yes No If "Yes" Explain Here:							
Have You Ever Been Denied A Gaming License, Withdrawn a Gaming License Application? Or has any disciplinary action been taken against any gaming license that you had? Yes No If "Yes" Explain Here:							
Do You Have Any Relatives Currently Working at a Cheyenne & Arapaho Casino? Yes No If "Yes" List Name and Department:							

EDUCATION

High School Name	Location	Major	Dates Attended	Graduate Yes No	Degree
				Yes No	
				Yes No	

MILITARY INFORMATION

Have You Ever Served in The Armed forces (Please Provide Copy of DD214)

Yes No If "Yes", Active Reserve

Branch/Service	Service Number	Dates of Service	Type of Discharge	Grade/Rank

While in Military Service, Were You Ever Arrested For Any Offense or Violation?

Yes No If "Yes", Explain in Detail On a Separate Sheet And Attach It To Your Application

**EMPLOYMENT HISTORY.....PLEASE LIST CURRENT AND PREVIOUS EMPLOYERS FOR FIVE (5) YEARS BACK
EXPLAIN ANY GAPS IN EMPLOYMENT IF ANY.....ATTACH A SEPARATE SHEET(S) IF NECESSARY.**

Employer/Business Name	Dates: From: To:	Title:	Description of Duties:	Reason for Leaving:

Gaming Present:	Address (Include Zip Code)	Phone	Supervisor's Name
Yes No		()	

Employer/Business Name	Dates: From: To:	Title:	Description of Duties:	Reason for Leaving:

Gaming Present:	Address (Include Zip Code)	Phone	Supervisor's Name
Yes No		()	

Employer/Business Name	Dates: From: To:	Title:	Description of Duties:	Reason for Leaving:

Gaming Present	Address (Include Zip Code)	Phone	Supervisor's Name
Yes No		()	

Employer/Business Name	Dates: From: To:	Title:	Description of Duties:	Reason for Leaving:

Gaming Present:	Address (Include Zip Code)	Phone	Supervisor's Name
Yes No		()	

Employer/Business Name	Dates: From: To:	Title:	Description of Duties:	Reason of Leaving:

Gaming Present:	Address (Include Zip Code)	Phone	Supervisor's Name
Yes No		()	

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Employer/Business Name	Dates: From:	Title:	Description of Duties:	Reason for Leaving:
Gaming Present: Yes No		Address (Include Zip Code)	Phone ()	Supervisor's Name
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Gaming Present: Yes No		Address (Include Zip Code)	Phone ()	Supervisor's Name
Employer/Business Name	Dates: From:	Title:	Description of Duties:	Reason for Leaving:
Gaming Present: Yes No		Address (Include Zip Code)	Phone ()	Supervisor's Name
Employer/Business Name	Dates: From:	Title:	Description of Duties:	Reason for Leaving:
Gaming Present: Yes No		Address (Include Zip Code)	Phone ()	Supervisor's Name
Employer/Business Name	Dates: From:	Title:	Description of Duties:	Reason for Leaving:
Gaming Present: Yes No		Address (Include Zip Code)	Phone ()	Supervisor's Name
Employer/Business Name	Dates: From:	Title:	Description of Duties:	Reason for Leaving:
Gaming Present: Yes No		Address (Include Zip Code)	Phone ()	Supervisor's Name
Employer/Business Name	Dates: From:	Title:	Description of Duties:	Reason for Leaving:
Gaming Present: Yes No		Address (Include Zip Code)	Phone ()	Supervisor's Name
Employer/Business Name	Dates: From:	Title:	Description of Duties:	Reason for Leaving:
Gaming Present: Yes No		Address (Include Zip Code)	Phone ()	Supervisor's Name
Employer/Business Name	Dates: From:	Title:	Description of Duties:	Reason for Leaving:
Gaming Present: Yes No		Address (Include Zip Code)	Phone ()	Supervisor's Name
Employer/Business Name	Dates: From:	Title:	Description of Duties:	Reason for Leaving:
Gaming Present: Yes No		Address (Include Zip Code)	Phone ()	Supervisor's Name
Employer/Business Name	Dates: From:	Title:	Description of Duties:	Reason for Leaving:
Gaming Present: Yes No		Address (Include Zip Code)	Phone ()	Supervisor's Name

CHARACTER REFERENCES: 6 REFERENCES ARE REQUIRED -

List Six Character References Who Have Known You Five or More Years. Do Not Include Relatives (nor In-laws), Present Employer or Employees.

NAME	ADDRESS/CITY/STATE/ZIP CODE	NO OF YEARS KNOWN	PHONE NUMBER
			()
			()
			()
			()
			()
			()

MARITAL INFORMATION:

Current Marital Status

Single Married Common-Law Separated Divorced Widowed Engaged

Spouse's Full Name (Maiden)	Date of Birth	Place of Birth
Residence Address	Wedding Date	Location (City, County, State)
Spouse's Employer	Occupation	Address of Employer

BUSINESS RELATIONSHIP WITH INDIAN TRIBES:

Describe Any Existing or Previous Business Relationships With Indian Tribes, Including Ownership Interests In Those Businesses (Attach A Separate Sheet If Necessary)

Name of Tribe	Address/City/State/Zip	Description of Relation or Business	Describe Ownership Interest

BUSINESS RELATIONSHIP(S) WITHIN THE GAMING INDUSTRY

Describe Any Existing or Previous Business Relationships With Indian Tribes, Including Ownership Interests In Those Businesses (Attach A Separate Sheet If Necessary)

Name of Business	Address/City/State/Zip	Description of Relation Or Business	Describe Ownership Interest

OCCUPATIONAL LICENSES OR PERMITS:

Describe Any Existing or Previous Licensing or Regulatory Agency with Which You have Filed An Application for An Occupational License or Permit, Whether or Not Such License Or Permit Was Granted

Name of Agency	Address/City/State/Zip	Description of License or Permit	Expiration Date

AFFIRMATION AND CONSENT

I, _____, state under penalty of perjury that the entire Application Form, statements, attachments, and supporting schedules are true and correct to the best of my knowledge and belief, and that this statement is executed with the knowledge that misrepresentation or failure to reveal information requested may be deemed sufficient cause for the refusal to issue a gaming license by the Cheyenne & Arapaho Tribes.

Further, I am aware that later discovery of an omission or misrepresentation in the above statements may be grounds for denial of a gaming license or the suspension or revocation of the license. I am voluntarily submitting this application to the Cheyenne & Arapaho Gaming Commission under oath with full knowledge that I may be charged perjury or other crimes for intentional omissions and misrepresentations pursuant to the Indian Gaming Regulatory Act.

I further consent to any background investigations necessary to determine my present and continuing suitability and that this consent continues as long as I hold a Cheyenne & Arapaho Tribes Gaming License, and for 90 days following the expiration or surrender of such gaming license. I also agree that the Cheyenne & Arapaho Tribes, its agencies, officers, and assigns, shall be entitled to collect from all expenses incurred in recovery of a debt created by this license application, or in pursuing any other remedy provided by law, including but not limited to reasonable attorney fees and costs.

CRIMINAL HISTORY

1. Since you turned the age of 18, have you ever been arrested, served with a criminal summons, charged with, or convicted of ANY crime(s) or offenses in any manner in this or any other country? YES NO

- You must include ALL arrests, charges, and convictions regardless of the outcome, even if the charges were dismissed or you were found not guilty.
- You must include ALL Arrests, charges, and convictions regardless of the class of the crime (felonies, misdemeanors, and/or petty offenses).
- You must include ALL serious traffic offenses, including DUI; DWI; reckless driving; leaving the scene of an accident (hit and run); driving under denial; suspension or revocation; or any other offense which resulted in your being taken into custody.

NOTICE: Do not rely upon your understanding that an arrest or charge is "not supposed to be on your record". A criminal record was not cleared, erased, sealed, or expunged unless you were given, and have in your possession, a written record from a judge directing this action.

If you answered YES, explain in detail on a separate sheet and attach it to your application. For each offense for which you were arrested or charged, **YOU MUST OBTAIN OFFICIAL DOCUMENTATION FROM THE COURT WHERE YOU APPEARED, SHOWING THE FINAL DISPOSITION (OUTCOME) OF YOUR CASE.** This information will include whether you were found guilty or not guilty; and the penalty (money fine, time in jail or prison, or probation or deferred sentence). If you received a deferred judgment, a deferred sentence, or probation, your documentation must include the date that you were discharged or released from probation or other supervision.

Date	County or City	Charge	Fine Paid	Jail time	Probation

Other Details:

Date	County or City	Charge	Fine Paid	Jail time	Probation

Other Details:

Date	County or City	Charge	Fine Paid	Jail time	Probation

Other Details:

Date	County or City	Charge	Fine Paid	Jail time	Probation

Other Details:

Date	County or City	Charge	Fine Paid	Jail time	Probation

Other Details:

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Date	County or City	Charge	Fine Paid	Jail time	Probation

Other Details:

Applicant Signature _____ Date _____

2. Has a criminal indictment, information, or complaint ever been returned against you, in this or any other country, but for which you were not arrested or in which you were named as an un-indicted co-party? YES NO
3. Have you ever been questioned by a city, county, provincial, federal, or domestic or foreign governmental or law enforcement or regulatory agency, commission or committee? YES NO
4. Have you ever been subpoenaed to appear to testify before a federal, state, county, or other domestic or foreign governmental grand jury board, commission, or regulatory body? YES NO
5. Have you ever received a pardon or its equivalent for any criminal offense in this country or any other country? YES NO
6. Has any member of your family or your spouse's family ever been convicted of a felony or any other gambling-related offense in this country or any other country? YES NO
7. Have you, as an individual, as a member of a partnership or other form of domestic or foreign business entity, or as owner, director, or officer of a corporation, ever been a party to a lawsuit, (other than divorces), either as a plaintiff or defendant, complainant, or respondent, or in any other fashion, in this country or any other country? YES NO

If you answered yes to any questions 2 through 7, fill out the supplemental information in the boxes on the next page.

SUPPLEMENTAL INFORMATION

Supplemental Information regarding Criminal History Questions 2 thru 7.
You must explain in detail why you answered "YES" to any of the questions.

Applicant's Name: _____
(Please Print)

Questions #: Detailed Explanation of Events:

8. Do you possess a valid Driver's License?
If NO, explain in detail:

YES NO

Applicant's Signature:

Date:

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