

Arizona Department of Gaming Event Wagering

Renewal Employee Disclosure Form



Arizona Department of Gaming

Arizona Department of Gaming
100 N. 15th Avenue #202
Phoenix, AZ 85007
(602) 771-4263

Event Wagering Renewal Employee Disclosure Form

APPLICATION FEE:
Renewal License Fee: **\$125**

"Event Wagering Employee means any person employed by an event wagering operator, sports facility, management services provider or limited event wagering operator who is directly involved in the management or control of the conduct of event wagering under this chapter or in this state." **A.R.S. § 5-1301(5)**

On receipt of a completed application and the required fee, the Department shall conduct the necessary background investigations to determine if the applicant meets the qualifications for licensure. The Applicant agrees to provide access to the following information and/or documents and to provide copies, as requested. This information includes, but is not limited to, the following:

- EW – Individual Renewal
- ADG-902 Release of All Claims
- ADG-907 Criminal History Disclosure
- ADG-907-B Noncriminal Justice Applicant’s Privacy Rights
- Fingerprint Cards (1) set
- Updated Color Photograph
- Payment – <https://adgpay-ewfs.az.gov/> - Please Provide a Copy of Payment Confirmation

Pursuant to A.R.S. § 41-1030:

...B. An agency shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for imposing a licensing requirement or condition unless a rule is made pursuant to that general grant of authority that specifically authorizes the requirement or condition.

...D. This section may be enforced in a private civil action and relief may be awarded against the state. The court may award reasonable attorney fees, damages and all fees associated with the license application to a party that prevails in an action against the state for a violation of this section.

E. A state employee may not intentionally or knowingly violate this section. A violation of this section is cause for disciplinary action or dismissal pursuant to the Agency’s adopted personnel policy.

F. This section does not abrogate the immunity provided by section 12-820.01 or 12-820.02.

Applicant Initials _____

EVENT WAGERING RENEWAL INDIVIDUAL DISCLOSURE FORM

(Type or print in ink)

Company Name		Position in Company		Date	
Name (Last, First, Middle)				Social Security No./National ID No.	
Business Mailing Address				E-mail Address	
Applicant's Residence Address					
Residence Phone No.	Personal Cell-phone No.	Business Phone No.	Business Fax No.	Driver's License No. and State	
Sex	Height	Weight	Color Eyes	Color Hair	Date of Birth

The following information is required for all renewal applicants. If any answer is 'Yes', please attach a written explanation to this form. Please note, any convictions you believe were expunged must be disclosed on this form and have a written statement attached. A set of fingerprint cards must also be returned with this renewal form to start the review process.

Under the Federal Privacy Act, disclosure of social security numbers is voluntary unless a statute specifically requires it or allows states to collect the number. In this instance, disclosure of your social security number is mandatory pursuant to Title 42 United States Code, Sections 405(c)(2)(c), and Sections 653, 654, and 666; and A.R.S. § 25-320(K) in order to aid the Department of Economic Security in locating non-custodial parents or the assets of non-custodial parents.

1. Since you last filed an application with the Department of Gaming, have you been arrested, detained, granted immunity in lieu of testimony, charged, indicted or summoned to answer for any criminal offense or violation for any reason whatsoever (except MINOR traffic violations), regardless of the disposition of the event, dismissal, expungement, or restoration of civil rights?

YES NO

2. Since you last filed an application with the Department of Gaming, have you ever been granted a gaming license or been affiliated with group which has been issued a gaming license in or outside of the State of Arizona?

YES NO

3. Since you last filed an application with the Department of Gaming, have you or your employer had a gaming license denied, suspended, revoked or forfeited by any tribal, state or national gaming authority in any jurisdiction or any country?

YES NO

FALSE OR INCOMPLETE ANSWERS COULD RESULT IN CRIMINAL PROSECUTION AND THE DENIAL, OR SUBSEQUENT REVOCATION OF STATE LICENSURE.

If you answered 'Yes' to any questions 1-3, you **must provide a full explanation** of the circumstances. [*For example, provide dates, city, state, nature of offense or violation, name of court involved, disposition (i.e. fine, confinement, etc.)*] Use additional sheets if necessary.

This application is true and correct to the best of my knowledge and that false or incomplete answers could result in criminal prosecution and the denial, or subsequent revocation, of state licensure by the Arizona Department of Gaming. Further, that I am voluntarily submitting this application with full knowledge that it will be reviewed by appropriate State authorities charged by law with granting state licensure.

Signature of Applicant

**ATTACH A COLOR
PHOTOGRAPH TAKEN
WITHIN THE LAST 30
DAYS**

RELEASE OF ALL CLAIMS

The undersigned has filed with the Arizona Department of Gaming an Application for State Licensure. In consideration of the assurance by the Department of Gaming that no decision on said application will be taken except after a deliberate, intensive and thorough investigation of the undersigned, including but not limited to background, associates, and finances, the undersigned does for myself, my heirs, executors, administrators, agents, representatives, successors and assigns, hereby release and forever discharge the State of Arizona, the Department of Gaming, its members, agents, and employees, from 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 ever 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 undersigned application.

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

I have executed this Release of All Claims on this _____ day of _____, 20_____.

Applicant Signature

Criminal History Record Information Disclosure of Privacy Requirements

Your fingerprints will be used to check the criminal history records of the FBI.

The use of the FBI criminal history record information will be used to assist in the determination of suitability for the issuance of State Licensing or Licensing for employment in, or providing goods or services to the Arizona Gaming Industry.

You may request procedures for obtaining a copy of your record for a change, correction, or updating of an FBI criminal history record as set forth in Title 28, Code of Federal Regulations (CFR) Section 16.30 through 16.34. Information on how to review and challenge your FBI criminal history record can be found at www.fbi.gov . **If requested you will be given thirty (30) days to complete or challenge the accuracy of the information.**

To obtain a copy of your Arizona criminal history in order to review/update/correct the record, you can contact the Arizona Department of Public Safety Criminal History Records Unit at (602) 223-2222 to obtain a fingerprint card and a Review and Challenge Packet. Information on the review and challenge process can be found at the DPS website (www.azdps.gov).

Criminal history record information is solely for the purpose stated and cannot be disseminated outside the Department of Gaming, or other authorized entity.

You may retain a copy of this signed disclosure if desired.

By my signature below, I fully acknowledge that I have read and understand this disclosure.

Print Name

Signature

Date

NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing.¹ These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulations (CFR), 50.12, among other authorities.

- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared, or retained.²
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your FBI criminal history record (if you have such a record).
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the FBI criminal history record.
- If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <https://www.fbi.gov/services/cjis/identity-history-summary-checks> and <https://www.edo.cjis.gov>.
- If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI by submitting a request via <https://www.edo.cjis.gov>. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.³

_____ Initials

¹ Written notification includes electronic notification, but excludes oral notification.

² <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>

³ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).