

This is a Draft Application. The Commission is not currently accepting sports gaming applications.

STATE OF OHIO

CASINO CONTROL COMMISSION



STANDARD

SPORTS GAMING EMPLOYEE

LICENSE APPLICATION

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STANDARD SPORTS GAMING EMPLOYEE LICENSE APPLICATION INSTRUCTIONS

I. COMPLETING THE APPLICATION:

- A. Read each question carefully prior to answering. Answer every question completely. Do not leave blank spaces. If a question does not apply to you, indicate "Does not apply" in response to that question. If there is nothing to disclose in response to a particular question, write "None" in response to that question. **Note: The Commission will not review your Application unless you provide a response to every question.**
- B. The Commission will not review your Application if it is illegible or if you have modified any of the questions or pre-printed information in this form.
- C. All requested attachments to the Application should be numbered to correspond to the question they are responsive to and attached to the back of this form.
- D. If you have any questions about this Application or the licensing process, contact the Division of Licensing and Investigations at sportsgaming@casinocontrol.ohio.gov or (614) 387-5688.

II. BEFORE YOU SUBMIT THE APPLICATION TO THE COMMISSION, BE SURE THAT:

- A. Every question was answered completely, including all necessary appendices.
- B. You have signed the Authorization, Certification, and Waiver document in this Application.
- C. A completed copy of the Application is retained for the Applicant's records.

III. FILING THE APPLICATION WITH THE COMMISSION

- A. A complete Application for a Standard Sports Gaming Employee License consists of this form, including all attachments, and the application fee made electronically at the time of filing. The fees relating to a Standard Sports Gaming Employee License are as follows:
 1. Upon submission of the Application to the Commission, the Applicant must pay a nonrefundable application fee of \$100 for an initial and renewal standard sports gaming employee and all fees necessary to cover the cost of any required criminal-records checks.
 2. Upon the Commission's approval, the Applicant must pay a nonrefundable license fee of \$50 for an initial or renewal Standard Sports Gaming Employee license and an eLicense transaction fee of \$3.50, as required by R.C. 125.18(E).
- B. A sports gaming applicant or licensee that employs a standard sports gaming employee applicant must pay all fees on the standard sports gaming employee's behalf.
- C. All fees must be submitted in the form of an electronic funds transfer payable to the Treasurer of the State of Ohio, unless otherwise approved by the Executive Director.
- D. The Application and all notices regarding an Application must be filed electronically with the Commission, including via email to sportsgaming@casinocontrol.ohio.gov, via a physical media drive

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(e.g., CD, thumb drive) mailed to the Commission's office at 100 E. Broad Street, 20th Floor Columbus, Ohio, 43215, or via secure online drop box, as approved by the Executive Director.

- E. Once an Application is accepted, it becomes the property of the Commission and may not be withdrawn without the permission of the Executive Director.

IV. BACKGROUND INVESTIGATIONS

- A. Pursuant to R.C. 3775.03, the Commission must obtain criminal records checks for each individual applying for a Standard Sports Gaming Employee License. In order to initiate a criminal records check, you must be fingerprinted. Contact the Commission's Division of Licensing and Investigations at (614) 387-5688, toll free at (855) 800-0058, or sportsgaming@casinocontrol.ohio.gov to schedule an appointment or to have an out-of-state fingerprinting packet mailed to you.

V. IMPORTANT NOTICES

- A. Should you be unable to fully understand this form in English, it is your responsibility to acquire adequate means of interpretation or translation.
- B. Each Applicant must make accurate statements and include all material facts. Any failure may result in the denial of the Application, the suspension or revocation of any license issued by the Commission, or the imposition of fines or penalties.
- C. Pursuant to [R.C. 3775.14](#), certain information submitted, collected, or gathered as part of an Application is confidential and not subject to disclosure as a record under [R.C. 149.43](#). **Each Applicant should clearly identify those portions that it deems to be confidential, proprietary commercial information, or trade secrets.** Non-confidential information provided to the Commission is open to public inspection to the extent permitted by [R.C. 149.43](#) and [3775.14](#).

VI. ONGOING DUTIES

- A. The Commission may request information not requested, or in addition to that which is provided, in the Application. The Applicant must provide all information, documents, materials, and certifications at the Applicant's expense and cost.
- B. Pursuant to Ohio Adm.Code 3775-4-01, any person who applies for or holds a Standard Sports Gaming Employee License has a **continuing duty to update** the Commission of changes to any information that the person is required to provide or has provided to the Commission, including information contained in the Application, as well as to any information required by Ohio Adm.Code 3775-4-01. The Commission must be notified of any such change **in writing within ten (10) days of the change**.
- C. A Standard Sports Gaming Employee License expires three (3) years after the date of licensure. Renewal of a Standard Sports Gaming Employee License may be requested by submitting a completed Standard Sports Gaming Employee License Application no less than **one hundred twenty (120) days** before expiration of the License.
- D. A Standard Sports Gaming Employee License issued by the Commission is a revocable privilege and is not transferable. No licensee has a vested right in or under a Standard Sports Gaming Employee License issued by the Commission.

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SECTION I. IDENTIFYING INFORMATION

1. Application Type

Check the appropriate box:			
<input type="checkbox"/> Initial Standard Sports Gaming Employee		<input type="checkbox"/> Renewal Standard Sports Gaming Employee	
Are you applying for a provisional license? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Position/title you hold or will hold with a sports gaming affiliated business:			
Name of sports gaming affiliated business you are associated with:			
Do you hold an active employee VLT gaming license in good standing issued by the Ohio Lottery Commission? If yes, provide the information below.			<input type="checkbox"/> Yes <input type="checkbox"/> No
License Type:	License Number:	Issue/Effective Date:	Expiration Date:
Do you hold an active employee casino gaming employee license in good standing issued by the Ohio Casino Control Commission? If yes, provide the information below.			<input type="checkbox"/> Yes <input type="checkbox"/> No
License Type:	License Number:	Issue/Effective Date:	Expiration Date:

2. Identifying Information

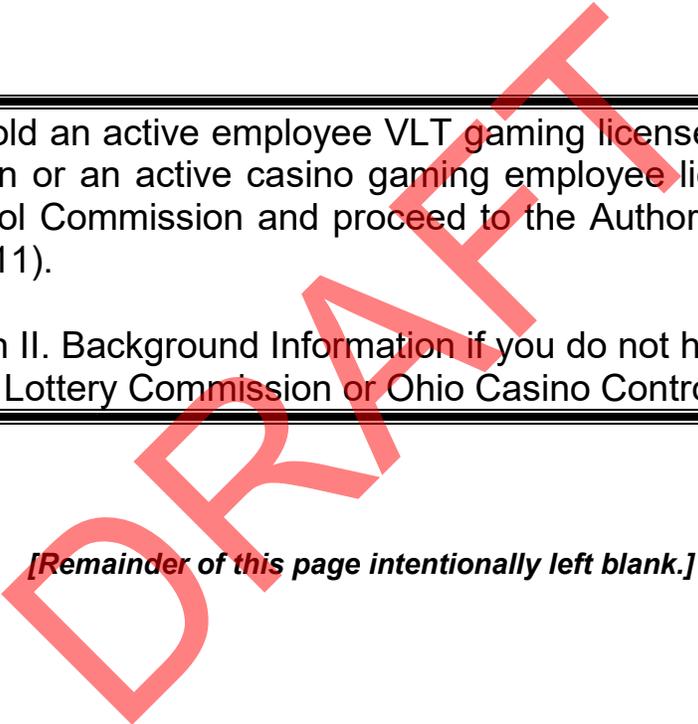
Name (<i>Last, First Middle</i>)			
Social Security Number (Under the Federal Privacy Act, disclosure of your Social Security Number is voluntary.)			
Have you ever been known by any other name(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list the additional name(s) below and specify dates of use for each. (Include: maiden name, aliases, nicknames, etc.)			
Date of Birth (mm/dd/yyyy)		Email Address	
Phone Number		Alternative Phone Number	
<u>Driver's License or State Identification</u>			
Number	Issuing Agency	Issue Date	Expiration Date
<u>Address</u>			
Street Address	City, State	Zip	County
Check your current marital status:			
<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Legally Separated	<input type="checkbox"/> Divorced <input type="checkbox"/> Widow(er)
Provide the name of your current spouse:			
List all former spouses:			

3. Citizenship

Are you a citizen of the United States?		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
If you are a naturalized citizen of the United States, attach to this application, labeled as Appendix 3a, a copy of your Certificate of Naturalization or valid U.S. passport.		
If you are not a citizen of the United States, indicate:		
Place of birth	Country(ies) of which you are a citizen	
If you are not a United States citizen, but you are a legally authorized permanent resident alien or you are authorized to be employed in the United States, provide a copy of your USCIS identification card and/or any other USCIS document that permits, conditions, or restricts your employment, labeled as Appendix 3b.		

Stop here if you hold an active employee VLT gaming license issued by the Ohio Lottery Commission or an active casino gaming employee license issued by the Ohio Casino Control Commission and proceed to the Authorization, Certification, and Waiver (page 11).

Proceed to Section II. Background Information if you do not hold an active license issued by the Ohio Lottery Commission or Ohio Casino Control Commission.



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SECTION II. BACKGROUND INFORMATION

4. Licenses, Permits, Registrations, and Certifications

Do you hold an active sports gaming occupational license in good standing issued in another jurisdiction other than Ohio? If yes, provide the information below. If additional fields are needed, please attach as Appendix 4a.			<input type="checkbox"/> Yes <input type="checkbox"/> No
Issuing Agency:			
License Type	License Number	Issue/Effective Date:	Expiration Date:
Have you ever applied for or been issued any other sports gaming, gambling, or gaming-related permit, license, registration, certification, qualification, or other authorization in any jurisdiction (including Ohio)? You must answer "Yes" to this question if your application was returned to you for any reason or you withdrew your application from consideration. If additional fields are needed, please attach as Appendix 4b.			<input type="checkbox"/> Yes <input type="checkbox"/> No
Type of License or Other Authorization		Date of Application	
License or Other Authorization Number		Date of Disposition	
Name on License or Other Authorization*		Issuing Authority or Agency	
Current Status of License or Other Authorization			
Have you ever applied for or been issued, in any jurisdiction (including Ohio), a non-gaming professional or other occupational license, permit, registration, certification, or other authorization? You must answer "Yes" to this question if your application was returned to you for any reason or you withdrew your application from consideration. If additional fields are needed, please attach as Appendix 4c.			<input type="checkbox"/> Yes <input type="checkbox"/> No
Type of License or Other Authorization		Date of Application	
License or Other Authorization Number		Date of Disposition	
Name on License or Other Authorization*		Issuing Authority or Agency	
Current Status of License or Other Authorization			
Have you ever been fined by, penalized by, or entered into any settlement with any gambling-related governmental agency or regulatory authority regarding a gaming-related matter? If additional fields are needed, please attach as Appendix 4d.			<input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Agency or Authority		Date of Fine Penalty or Settlement	
Terms of the Fine, Penalty, or Settlement		Cause(s) of the Fine, Penalty, or Settlement	

*Provide all names, including former names, under which the license was issued.

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5. Military Service

Have you ever served in a military organization of any country or have you been a member of a reserve force of any country? If yes, provide the information below. If additional fields are needed, please attach as Appendix 5a.		<input type="checkbox"/> Yes <input type="checkbox"/> No
Country of Service	Branch of Service	
Service ID # (or equivalent)	Highest Rank Held	
Period of Service (Beginning Date to Ending Date)	Type of Separation/Discharge	
<p>Labeled as Appendix 5b, attach a copy of your DD-214, NGB-22, or other official documentation evidencing each discharge or separation of service.* If unavailable, attach a copy of a letter to the appropriate branch of the military requesting a copy of this documentation.</p> <p>*If your military service was in a country other than the United States, you must provide a copy of whatever official documentation was provided to you at the time of your discharge or separation of service. If no official documentation is available, provide a detailed explanation of the nature of and reason for your discharge or separation of service as well as an explanation as to why no official documentation can be provided.</p>		
Have you ever been arrested or charged by a military organization or been tried by military court martial or another official military tribunal? If yes, provide a detailed explanation on a separate sheet, wherein you describe the (1) nature of the charge or arrest, (2) date and location of the charge or arrest, (3) name of the military organization filing the charges, (4) disposition (convicted, acquitted, dismissed, pleading, etc.), and (5) sentence (if applicable), and attach it to this application, labeled as Exhibit 5c.		<input type="checkbox"/> Yes <input type="checkbox"/> No

[Remainder of this page intentionally left blank.]

6. Criminal History

For purposes of this question:

- A. "Arrest" includes any detaining, holding, or taking into custody by any police or other law enforcement authorities to answer for the alleged performance of any "offense."
- B. "Charge" includes any indictment, complaint, information, summons, or other notice of the alleged commission of any "offense."
- C. "Convict" includes the finding of guilty of any "offense" upon a trial, a plea of guilty, or a plea of no contest.
- D. "Offense" includes all felonies, crimes, misdemeanors, disorderly persons offenses, petty disorderly offenses, driving while intoxicated/impaired motor vehicle offenses, driving under suspension offenses, violation of probation or any other court order, as well as offenses that may have required a person to appear before a law enforcement agency, state or federal grand jury, county court, municipal court, city court, military court, or any other court not included in this list.
 - 1. Juvenile offenses that occurred within the most recent ten-year period are also included within the definition of "offense."
 - 2. "Offense" does not include traffic offenses that are classified as a minor misdemeanor.

Have you **ever** been arrested for, charged with, or convicted of any offense in any jurisdiction (including Ohio)? If yes, provide the information below. If additional fields are needed, please attach as Appendix 6.

Yes

No

- A. Answer "Yes" and provide all information to the best of your ability EVEN IF:
 - 1. You did not commit the offense charged;
 - 2. The charges were dismissed or subsequently downgraded to a lesser charge;
 - 3. You completed a diversionary program or the equivalent thereof;
 - 4. You were not convicted;
 - 5. You did not serve any time in prison or jail; or
 - 6. The charges or offenses happened a long time ago.
- B. Answer "No" IF:
 - 1. You have never been arrested or charged with any crime or offense; or
 - 2. All records relating to each charge, arrest, or conviction have been expunged or otherwise officially sealed by a court, government agency, or other regulatory authority.

Description of Offense and Location Where Offense Occurred (city, state)

Date Offense Occurred

Name and Address of Any Investigating Agency, Arresting Agency, Charging Agency, and Prosecuting Agency

Disposition (Convicted, Acquitted, Dismissed, Pending, Pardoned, etc.)

Description of Offense and Location Where Offense Occurred (city, state)

Date Offense Occurred

Name and Address of Any Investigating Agency, Arresting Agency, Charging Agency, and Prosecuting Agency

Disposition (Convicted, Acquitted, Dismissed, Pending, Pardoned, etc.)

Description of Offense and Location Where Offense Occurred (city, state)

Date Offense Occurred

Name and Address of Any Investigating Agency, Arresting Agency, Charging Agency, and Prosecuting Agency

Disposition (Convicted, Acquitted, Dismissed, Pending, Pardoned, etc.)

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7. Residence History

Beginning with your current residence(s) and working backwards, provide the following information with respect to each place where you have lived during the past five years. Ensure that there are no gaps in the five-year history. If additional fields are needed, please attach as Appendix 8.

From (mm/yyyy)	To (mm/yyyy)	Address (Number, Street, Apartment, City, State, Zip Code, Country)

8. Employment History

In the chart below, provide the information regarding your employment for the past five years. Begin with your present job and work backwards. Include all part-time and full-time employment and any military service. Give dates of any unemployment between jobs or while a student in proper sequence. Note by means of an asterisk (*) any gaming-related employment (e.g., casino gaming, horse racing, dog racing, pari-mutuel operation, lottery, sports betting, etc.). Ensure that there are no gaps in the five-year history. If additional fields are needed, please attach as Appendix 9.

From (mm/yyyy)	To (mm/yyyy)	Name and Mailing Address of Employer	Telephone Number of Employer	Title(s)/Position(s) Held	Reason for Leaving

[Remainder of this page intentionally left blank.]

9. Civil & Financial History

Are you a party to any currently pending lawsuit? (Include matrimonial matters, negligence matters, auto accident matters, contract matters, collection matters, debt matters, foreclosure matters, and any other civil or administrative matter).		<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you had any financial liens or judgments filed against you in the last 10 years ? (Include federal tax liens, state tax liens, unemployment judgments, defaulted student loans, delinquent child support obligations, and any other financial judgment).		<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes to either question, provide the information below. If additional fields are needed, attach as Appendix 10a.		
Date Filed	Jurisdiction	
Docket Number	Other Parties to the Lawsuit	
Nature of the Lawsuit		
Disposition	Disposition Date	
Have you filed a petition for any type of bankruptcy or insolvency or been adjudicated bankrupt or insolvent under any bankruptcy or insolvency law in the last 10 years ? If yes, provide the information below with respect to the last ten years.		<input type="checkbox"/> Yes <input type="checkbox"/> No
Number of times you have filed for bankruptcy or insolvency (including all dismissals and discharges)?		
Number of times you have been adjudicated bankrupt or insolvent?		
Have your wages, earnings, or other income been subject to garnishment, attachment, charging order, voluntary wage execution, or the like in the last 10 years ? If yes, provide the information below. If additional fields are needed, attach as Appendix 10b.		<input type="checkbox"/> Yes <input type="checkbox"/> No
Date Filed	Docket Number	
Name & Address of Court	Nature of Obligation	
Amount of Obligation	Name & Address of Obligation Holder	

*In addition to those listed in the chart, financial liens or judgments older than 10 years may be asked about if they are found to be unresolved or outstanding.

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AUTHORIZATION, CERTIFICATION, AND WAIVER

1. I declare under penalty of law that I am the Applicant or the duly authorized representative thereof. I am authorized to provide all the information requested in the Standard Sports Gaming Employee License Application (“Application”) or separately by the Commission, and I am authorized to complete, execute, and sign this form, including all certifications, authorizations, and waivers.
2. I certify under penalty of law that the information and material I have provided to be included in this Application is true, correct, and complete. I understand any false or misleading answers, misrepresentations, or omissions is ground for denial of a license or administrative action by the Commission.
3. I authorize the Ohio Casino Control Commission (“Commission”) to conduct a full investigation into the Applicant’s background and activities and to make inquiries and request and obtain information or records from any third parties and use such information or records obtained as, in the sole discretion of the Commission or its agent(s), is necessary to such investigation. This authorization includes any information or records that would otherwise be protected from public disclosure or dissemination.
4. I agree that the Commission may conduct investigations, which may include, without limitation, credit reviews; copies of and inspections of records, including law- enforcement, governmental-entity, third-party, and Applicant-owned or -prepared records; and inquiries, questions, or interrogatories submitted to Applicant or any third party.
5. I release the Commission and its agent(s) from any civil or criminal liability whatsoever for seeking any requested information and for using and evaluating such information as it relates to the Applicant’s Application or License. Moreover, I discharge, save, and hold harmless the Commission and its agent(s) from any and all claims and damages, as well as any responsibility or liability of every nature and kind, resulting from or arising out of the Commission’s investigation. In addition, I release any third party and its agents and employees, both individually and collectively, from any and all liability or damages of whatever kind, which may result because of compliance with this Authorization, Certification, and Waiver.
6. I have read and understand the Application, including the Instructions, the Questions, and the Authorization, Certification, and Waiver, and agree to observe and be bound by them. I acknowledge that the Commission is not obligated to issue a license and can suspend or revoke the license in accordance with the law. Each holder of a license agrees to be bound by and observe the terms and conditions on the Application and comply with the applicable provisions of R.C. Chapters [3772](#) and [3775](#) and the rules adopted thereunder.
7. By printing and signing my name below, I, as the Applicant or on behalf thereof, confirm that I understand, agree to, and will comply with all requirements stated above.

Printed Name of Applicant	Signature	Date Signed