## APPLICATION FOR FINDING OF SUITABILITY TRIBAL KEY EMPLOYEE

PAGE 1 of 2



PLEASE SEND COMPLETED APPLICATIONS TO:

Bureau of Gambling Control P. O. Box 168024 Sacramento, CA 95816-8024 Phone: (916) 830-1700

Designated applicants for licensure as a Gaming Employee (other than a non-key Gaming Employee) are required by the Tribal-State Gaming Compact between the employer Tribe and the State of California to apply to the State Gaming Agency for a determination of suitability for licensure. The State Gaming Agency consists of the California Gambling Control Commission and the Bureau of Gambling Control of the California Department of Justice, which are entities of the State of California and not of the Tribe. The purpose of this application is to obtain information from you that is necessary to determine whether you meet suitability requirements for licensure under state law. By completing this application you are providing information to the State Gaming Agency that will be used to make that determination.

write "N/A" (Not App	olicable). Application	ns not fully and ac	s in this application. If a c curately completed will be are applying for an initial o	retui	rned to the sender for
	a completed Tribal Ke BL-001)	ey Employee Supple	emental Background Investig	ation	Information Packet -
Your Full Name:					
Other Names you have Otherwise):	ve used or been know	n by (Aliases, Nickr	ames, Maiden Name, Other	Name	e Changes, Legal or
*Address of Record:					
Residence Address, I	f Different From Abov	e:			
Phone Number:	Fax Number:	Cell Number:	Birthdate (MM/DD/YYY	Y): *	*Social Security Number:
Name of Tribal Casino:			Name of Tribe:		
Job Title:			Tribal Gaming Agency License Expiration Date:		
information pursuant to (Government Code set this address. If you do number or a personal provide your residence **Disclosure of your Law 94-455 (42 USC will be used exclusive	to the Information Pracection 6250) et seq.) a conot wish your reside mail box (PMB). Howe address to the Computer Section 405(c)(2)(C)) aly for tax enforcement	ctices Act (Civil Cod nd will be placed or nce address to be a vever, if your addres mission, in which ca mber is mandatory. authorizes collection purposes, for purposes	available to the public, you make of record is not your residence will not be see you residence will not be section 30 of the Business of your social security numbers of compliance with any	the Puion wi ay pro ence a availa and Pi ber. N	ublic Record Act Il mail all correspondence to ovide a post office box address, you must also able to the public.  rofessions Code and Public our social security number nent or order for family
security number, your		nsidered incomplete		u tali t	o disclose your social
	of, and the informatio	n contained herein,	ifornia that I have personally including all corrections, cha	nges	oleted this form and know and other alterations, is true, on Date
Signature in Full:					Date:

## APPLICATION FOR FINDING OF SUITABILITY TRIBAL KEY EMPLOYEE





## **Privacy Notice**

As Required by Civil Code § 1798.17

The Bureau of Gambling Control (Bureau) in the Department of Justice collects the information requested on this form as authorized by California Business and Professions (B&P) Code section 19826(a). The Bureau uses this information to establish grounds for the license, permit or other approval indicated on this application form. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The Department of Justice general privacy policy is available at http://oag.ca.gov/privacy-policy.

All the personal information requested in this form must be provided. If you do not provide this information, your application will be denied.

You may review the records maintained by the Bureau in the Department of Justice that contain your personal information as permitted by the Information Practices Act. (See below for contact information.)

In order to process your application, we may need to share the information you give us with law enforcement or regulatory agencies for investigating unlawful activity, or for licensing or regulatory purposes.

The information you provide may also be disclosed in the following circumstances:

- o In response to a Public Records Act request, as allowed by the Information Practices Act;
- o To another government agency as required by state or federal law;
- o In response to a court or administrative order, a subpoena, or a search warrant.

For questions about this notice or access to your records, you may contact the Department of Justice, Bureau of Gambling Control, at P. O. Box 168024, Sacramento, CA 95816-8024 or e-mail at <a href="mailto:GamblingControl@doj.ca.gov">GamblingControl@doj.ca.gov</a>.