

State of Nevada
State Gaming Control Board / Nevada Gaming Commission

Registration of Call Center Employees

NGC Regulation 26C.040 requires any individual who fulfills the function of a Manager or Supervisor for an Operator of a Call Center to register with the Board and provide the following information:

This registration is for my employment with _____ for the position of _____.
I was placed in this position on _____ Mo./Day/Yr.

1. Personal Information

Last Name	First Name	Middle Name
Alias(es), Nicknames, Maiden Name, Other Name Changes, Legal or Otherwise)		
Date of Birth (Month/Day/Year)	Place of Birth (City/County/State)	
Driver's License Number and Issuing State	Social Security Number	Sex

2. Arrests and Detentions

Have you ever been arrested, detained, charged, convicted, pleaded guilty or nolo contendere, indicted, or summoned to answer for any criminal offense, either felony or misdemeanor, or violation for any reason whatsoever, including any record expunged or sealed by a court order, regardless of the disposition of the event? (Except minor traffic citations.) Yes No

If yes, give details in space provided below. List all cases without exception and furnish details on separate page, if necessary.

Date of Arrest	Charge	Location – City and State	Disposition	Arresting Agency

3. Litigation

Have you as an individual ever been a party to a lawsuit as either a plaintiff or defendant or an arbitration as either a claimant or respondent? Yes No

If yes, give details below. List all cases without exception, including bankruptcies.

Plaintiff/Defendant or Claimant/Respondent	Date Filed	Court and Case Number	City/County/State	Disposition/Date

4. Residences

Please list all residences you have had for the last 5 years. Attach a separate sheet if necessary

Month and Year (From – To)	Street and Number	City	State/County/Zip Code
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-			
-			

5. Employment

Beginning with your current employment, please provide a complete list of your work history you have had for the last 10 years. Attach a separate sheet if necessary.

Month and Year (From – To)	Name/Mailing Address of Employer/Business	Position Held	Duties
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-			
-			
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STATE OF _____ }
COUNTY OF _____ } ss.

I do hereby certify that the statements contained herein are true and correct and contain a full and true account of the information requested. I consent to a full licensing investigation by the State Gaming Control Board ("Board") and Nevada Gaming Commission ("NGC"), subject to the provisions of NGC Regulation 26C.040(3). I further consent to provide any additional information as may be required by the Chairman of the Board.

REGISTRANT _____
Signature

SUBSCRIBED AND SWORN TO BEFORE ME

THIS _____ DAY OF _____, _____

Notary Public

(SEAL/STAMP)