



Personal History Record
NEW REGISTRATION ONLY

For: _____
Applicant Name

Please read all instructions carefully before completing this form.

1. Typed answers are preferred. All hand written answers must be in **BLACK** ink and in block lettering. Illegible application(s) WILL NOT be accepted.
2. All applicants are advised that this Personal History Record is an official document and misrepresentation or failure to reveal information requested may be deemed to be sufficient cause for the objection of a registration. Do not misstate or omit any material fact(s) as each statement made herein is subject to verification.
3. Read each question carefully prior to answering and answer every question completely to the best of your knowledge. Do not leave blank spaces, type an answer to every question. If a question does not apply to you, state with "N/A." If there is nothing to disclose, indicate "None." **Failure to provide a response to every question could result in the rejection of your application and/or lengthen the amount of time needed to complete the investigation.**
4. If space available is insufficient, continue on page 11 or use a separate sheet and precede each answer with the appropriate title.
5. Applicant must initial each page, as provided in lower right-hand corner. By placing his/her initials on each page, the applicant is attesting to the accuracy and completeness of the information contained on that page. Sign and notarize all applicable forms and pages.
6. **Additional information may be required and failure to provide the requested documents in a timely manner could result in objection of your application.**
7. It is the responsibility of each applicant for registration to thoroughly familiarize himself/herself with all applicable statutes, regulations, and local ordinances, rules and regulations pertaining to the applied for registration.
8. Once your application is submitted, it becomes the property of the Nevada Gaming Control Board. The applicant is advised to make copies before submitting the application.
9. Provide a copy of your driver's license or state issued identification card and/or passport.

Official Use Only

Attach a passport size color photograph of yourself

Taken within the last 30 days here.

Official Use Only

PERSONAL HISTORY RECORD REGISTRATION

Date Completed _____

1. PERSONAL INFORMATION:

Last Name (Include Sr., Jr., etc., if applicable)		First Name		Middle Name		
Alias (ie, Nicknames, Maiden Name, Other Name Changes, Legal or Otherwise)						
Home Address:		Apt. #	City/Town	Country	State	Zip Code
Mailing Address (If Different Than Home Address)		Apt. #	City/Town	Country	State	Zip Code
Home Telephone Number		Business Telephone Number		Cellular Phone Number		Fax Telephone Number
E-Mail Address (Required)			Company Web Address (Required)			
Date of Birth (Month/Day/Year)		Age	Place of Birth (City/County/State/Country)			
US Social Security Number			Country and Passport Number			
Sex	Color of Eyes	Color of Hair	Complexion	Height	Weight	
Scars, Tattoos, or Distinguishing Marks and/or Characteristics						
Of what country are you a citizen?						

If you are a naturalized citizen of the United States or a non-citizen, you must attach a copy (front and back) of any Certificate of Naturalization, Resident Alien Card, Permanent Resident Card, Employment Authorization Document/Card, Refugee Travel Document, Form I-94, or other U.S. travel and identity document, as applicable, **AND** a copy (front and back) of your driver's license.

****International Applicants must submit a Certificate of Non-Criminal Conviction with this form****

2. MARITAL/FAMILY INFORMATION:

A. Marital Information
 Single Married Separated Divorced Widowed Engaged Life Partner

B. Current Marriage

Date of Marriage		Place (City/County/State/Country)			
Spouse's Full Name (Maiden)			Social Security Number		
Date of Birth		Place of Birth			
Residence Address		Apt. #	City/Town	State	Zip Code
Telephone Residence			Telephone Business		
Spouse's Employer				Occupation	
Address of Employer			City	State	Zip Code

C. Previous Marriages: *If ever legally separated, divorced, or annulled, indicate below:*

Name of Spouse	Date of Order or Decree	Date and Place of Marriage	Nature of Action	City/County/State

D. List the names and current address of each previous spouse

Name	Address (No., Street, Apt#/Flat #)	State/Province	Zip	Telephone

E. Children and Dependents: *List all children, including step-children and adopted children and give the following information:*

Name	Date of Birth	Birth Place	Residence Address

F. Child Support Information:

Pursuant to Nevada Revised Statute 425.520 every applicant is required to submit the Child Support Compliance Statement. Please select the appropriate response:

Note: If you do not have children, please select the first option. If you are presently having your wages garnished for child support or are making payments, but remain in arrears, you are considered in compliance and must select the second option.

- I am **not** subject to a court order for the support of a child.
- I am subject to a court order for the support of one or more children and am in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order; or
- I am subject to a court order for the support of one or more children and am **not** in compliance with the order or **do not** have a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.

G. Parents: List parents, parents-in-law, or legal guardian. If retired or deceased, list last address and occupation.

Name (Maiden)	Date of Birth	Address	Occupation
Father			
Mother			
Father-in-Law			
Mother-in-Law			

H. Siblings: Complete below for all siblings, half-siblings, stepsiblings, adoptive siblings, and siblings-in-law.

Name (Maiden)	Date of Birth	Address	Occupation
Sibling			
Spouse			
Sibling			
Spouse			
Sibling			
Spouse			
Sibling			
Spouse			
Sibling			
Spouse			

3. ARRESTS, DETENTIONS, LITIGATIONS, AND ARBITRATIONS:

For the purpose of these questions:
 "Arrested" include any detaining, holding, or taking into custody by any police or other law enforcement authorities to answer for the alleged performance of any 'offense.'
 "Detained" to be kept in official custody, typically for questioning about a crime.
 "Charged" includes any indictment, complaint, information, summons, or other notice of the alleged commission of any offense.
 "Indicted" to charge with a crime by the finding or presentment of a jury (such as a grand jury) in due form of law.
 "Offense" is all crimes to include: felonies, gross misdemeanors, misdemeanors, disorderly person offenses, petty disorderly offenses, driving while intoxicated/impaired motor vehicle offenses, violations of probations or any other court order.

Answer "Yes" and provide all information to the best of your ability even if:

- You did not commit the offense charged.
- The charges were dismissed or subsequently downgraded to a lesser charge.
- You completed a pretrial intervention or equivalent diversionary program in other jurisdictions.
- You were not convicted.
- You did not serve any time in prison or jail.
- The charges or offenses happened a long time ago.

****International Applicants must submit a Certificate of Non-Criminal Conviction with this form****

A. Have you ever been arrested, detained, charged, indicted, or summoned to answer for any criminal offense or violation for any reason whatsoever, regardless of the disposition of the event? (Except minor traffic citations.)
 Yes No If yes, complete the following **AND** attach a full written narrative of your recollection of each event.

Date of Arrest or Charge	Nature of Charge or Offense	Name and Address of Law Enforcement Agency or Court Involved	Disposition and Date (Convicted, Acquitted, Dismissed, Pending, Pardoned, etc.)	Sentence

- B. Has a criminal indictment, information, or complaint ever been returned against you, but for which you were not arrested or in which you were named as an unindicted co-party?
Yes No If yes, furnish details on page 11.
- C. Have you ever been questioned or deposed by a city, state, federal, or law enforcement agency, commission or committee? (Except Nevada Gaming Control Board and Nevada Gaming Commission.)
Yes No If yes, furnish details on page 11.
- D. Have you ever been subpoenaed to appear or testify before a federal, state, or county grand jury, board or commission?
Yes No If yes, furnish details on page 11.
- E. Have you ever been subpoenaed to testify for any civil, criminal, or administrative proceeding or hearing?
Yes No If yes, furnish details on page 11.
- F. Have you ever had a civil or criminal record expunged or sealed by a court order?
Yes No If yes, furnish details on page 11.
- G. Have you ever received a pardon or deferred prosecution for any criminal offense?
Yes No If yes, furnish details on page 11.
- H. Has any member of your family or of your spouse's family ever been convicted of a felony?
Yes No If yes, furnish details on page 11.
- I. Have you, as an individual, member of a partnership, or owner, director, or officer of a corporation, ever been a party to a lawsuit as either a plaintiff or defendant or an arbitration as either a claimant or respondent? (Other than divorces.)
Yes No If yes, list all cases without exception, including bankruptcies below:

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

- J. Has any general partnership, business venture, sole proprietorship, or closely held corporation (while you were associated with it as an owner, officer, director, or partner) been a party to a lawsuit, arbitration, or bankruptcy?
Yes No If yes, complete the following:

Name of Entity	Type of Entity	Approximate Date(s) of Lawsuit/Arbitration/Bankruptcy

- K. Have you personally ever been adjudicated bankrupt or filed a petition for any type of bankruptcy, insolvency, or liquidation under any bankruptcy or insolvency law in any jurisdiction?
Yes No If yes, complete the following:

Date Filed	Docket/Case Number	Court	City, County, and State	Disposition/Date

- L. Have you ever reached a settlement or had a settlement reached by another person or entity, on your behalf, prior to litigation or criminal charges having been filed against you?
Yes No If yes, furnish details on page 11.
- M. Have you ever reached a settlement or had a settlement reached by another person or entity, on behalf of a company with which you were/are affiliated, prior to litigation or criminal charges having been filed?
Yes No If yes, furnish details on page 11.
- N. Have you had any cash transactions exceeding \$10,000 in the past three (3) years?
Yes No If yes, furnish details on page 11.

4. RESIDENCES (include properties you own including places you don't currently live in):

Beginning with your current residence, list all residences you have had for the last 10 years. If additional space is needed, continue on page 11 or provide attachment.

From Month/Year	To Month/Year	Address (No., Street, Apt#/Flat #)	City/Town	State/Province and County

5. EMPLOYMENT AND BUSINESS INVESTMENTS:

Beginning with your current employment, list your work history, all businesses with which you have been involved with, all corporations, partnerships, limited liability companies, or any other business ventures with which you have been associated with as an officer, director, stockholder, member, or related capacity, and/or all periods of unemployment, for the last 10 years. If additional space is needed, continue on page 11 or provide attachment.

From Month/Year	To Month/Year	Name of Business/Employer	Address	Title of Office or Position Held	Reason for Leaving

6. CHARACTER REFERENCES:

Provide the names and other information requested of three (3) references over the age of 18 who have known you for at least one (1) year and can attest to your good character and reputation. No person can be a reference who is a member of your family. (Spouse, parents, grandparents, children, grandchildren, siblings, uncles, aunts, nephews, nieces, fathers-in-law, mothers-in-law, sons-in-law, daughters-in-law, brothers-in-law and sisters-in-law whether by whole or half blood, by marriage, adoptions or natural relationship).

Name	Employer	Home Address	Business Address	Telephone	Years Known

7. LICENSES, PERMITS OR CERTIFICATIONS:

- A. List all jurisdictions OUTSIDE the State of Nevada, you have ever made application for, or held, a license, permit, registration, finding of suitability, qualification or other authorization to participate in any form or type of casino, gaming/gambling related operation (including any manufacturer of gaming/gambling equipment, junket operation, horse racing, dog racing, pari-mutuel operation, lottery, sports betting, internet gaming, etc.) or alcoholic beverage operation in any jurisdiction?

Name on License	Type of License	From Month/Year	To Month/Year	Name and Address of Licensing Agency/Organization	Disposition of the Application

- B. Have any of the licenses, permits, registrations, finding of suitability or other authorization to participate applied for, or held by you, as identified in the previous question ever been denied, suspended, revoked, received disciplinary actions, restrictions, non-renewals or subject to any conditions in any jurisdiction?

Yes No If yes, complete the following:

Type of License, Permit or Certificate	Name and Address of Licensing Agency/Organization	Date of Denial, Suspension, Revocation or Condition	Reason(s) for Denial, Suspension or Revocation

- C. Have you ever made application for, or held, any NON-GAMING professional or occupational license, permit or certification, in any jurisdiction, including but not limited to the following: real estate broker or salesman, accountant, attorney, medical, boxing promoter, manager or matchmaker, race horse owner, trainer or manager, jockey, race dog owner, securities dealer, contractor, pilot, insurance, or any other type of professional license?

Yes No If yes, complete the following:

Name on License	Type of License	From Month/Year	To Month/Year	Name and Address of Licensing Agency/Organization	Disposition of the Application

D. Have any of the licenses, permits or certifications applied for, or held by you, as identified in the previous question ever been denied, suspended, revoked or subject to any conditions in any jurisdiction?

Yes No If yes, complete the following chart as to each denial, suspension, revocation or conditions:

Type of License, Permit or Certificate	Name and Address of Licensing Agency/Organization	Date of Denial, Suspension, Revocation or Condition	Reason(s) for Denial, Suspension or Revocation

8. MEDICAL AND RECREATIONAL MARIJUANA INFORMATION:

A. Have you or your spouse ever made an application for, or held, any marijuana related license, permit or certification, in any jurisdiction, including but not limited to the following: dispensaries, cultivation, production, laboratories, retail, product manufacture or any other type of marijuana related approvals?

Yes No If yes, complete the following:

Name on License	Type of License	From Month/Year	From Month/Year	Name of Licensing Agency	Disposition

B. Have any of the marijuana related licenses, permits or certifications applied for, or held by you or your spouse, as identified in the previous question ever been denied, suspended, revoked or subject to any conditions in any jurisdiction?

Yes No If yes, complete the following:

Type of License, Permit or Certificate	Name of Government Agency/Organization	Date of Denial, Suspension, Revocation or Condition	Reason(s) for Denial, Suspension, Revocation

C. Have you or your spouse ever made any loan which was used to finance a marijuana related operation, license, permit or certification, in any jurisdiction?

Yes No If yes, complete the following:

Date of Loan	Name of Borrower	Original amount of Loan	Type of Marijuana related enterprise the funds were used to finance

STATEMENT OF TRUTH AND ACKNOWLEDGEMENTS

I, _____, being duly sworn, depose and say that I have read the foregoing
(Registrant's Name)
application and know the contents thereof; that the statements contained herein are true and correct and contain a full and true account of the information requested; that I executed this statement with the knowledge that misrepresentation or failure to reveal information requested may be deemed sufficient cause for objection of a state gaming registration; that I am voluntarily submitting this application with full knowledge that Nevada Revised Statutes 463.140(5) provides "any person making false oath in any matter before either the Board or Commission is guilty of perjury."; and, further, that I have familiarized myself with the contents of the Nevada Gaming Control Act, as amended, and the Regulations of the Nevada Gaming Commission as promulgated thereunder and agree, if registered, to abide thereby. I will abide by all city, county, state and federal laws, and fully understand that failure to do so may result in grounds for objection of an application or disciplinary action.

It is grounds for denial of an application or disciplinary action for any person to make any untrue statement of material fact in any application, notice, statement or report filed with the Board or Commission in compliance with the provisions of law and regulations referred to in paragraph 1, or willfully to omit to state in any such application, notice, statement or report any material fact which is required to be stated therein or omit to state a material fact necessary to make the facts stated in view of the circumstances under which they were stated, not misleading. All information required to be included in an application must be true and complete as of the date of the Board and Commission action sought by such application; and an application shall promptly supply by amendment prior to such date any information based on fact occurring after the original application so as to make such information not misleading as of the dates of such action by the Board and the Commission.

I hereby agree to indemnify, hold harmless and defend, not excluding the State's right to participate, the State of Nevada, the Nevada Gaming Commission, the Nevada Gaming Control Board, the Nevada Attorney General, and each of their members, agents, contractors, and employees in their individual and representative capacities from any and all claims, suits, and actions, brought by anyone associated with this application, or by any third party, against the agencies or persons named in this paragraph, arising out of the submission, application, investigation, and deliberation concerning this application, and against any and all liabilities, expenses, damages, charges, and costs, including court costs and attorneys' fees, which may be sustained by the persons and agencies named in this paragraph as a result of said claims, suits, and actions.

I hereby authorize and request any criminal justice agency to release or disclose records of my criminal history to the Nevada Gaming Control Board for the purpose of registration. The records include, but are not limited to, any and all documents that are maintained by criminal justice agencies that consist of information regarding any arrest, detention, indictment, information or other formal criminal charges and dispositions of charges including dismissals, acquittals, convictions, correctional supervision and release.

I further release, discharge, exonerate and hold harmless the Nevada Gaming Control Board, the Nevada Gaming Commission and any other criminal justice agency, their agents and representatives, and any person furnishing information, from any and all liability of every nature and kind arising out of the collection, dissemination and inspection of my criminal history records.

APPLICANT _____
Signature

STATE OF _____

COUNTY OF _____ (SS)

SIGNED AND SWORN TO (OR AFFIRMED) BEFORE ME ON

THIS _____ DAY OF _____, _____ By _____
Name of Applicant

SIGNATURE OF NOTARY PUBLIC

MY COMMISSION EXPIRES _____

(SEAL)

CERTIFICATION OF FORM

Nevada Gaming Regulation 10.010 requires that every attorney, certified public account, or other agent who prepares this document on behalf of the applicant be properly enrolled with the Commission. Regulation 10.110 requires any such representative to certify such document. If this document was prepared by such a representative, please have that person complete the following:

I, _____, do hereby certify that I am enrolled to practice before the Nevada
(Representative's Name)
Gaming Commission and am fully knowledgeable of my responsibilities under Regulation 10. I further certify that I have prepared this document on behalf of the applicant in conformity with the Nevada Gaming Control Act and the Regulations of the Nevada Gaming Commission.

(Signature of Attorney, C.P.A. or Agent)

(Business Address)

(Telephone)

