

MISSOURI GAMING COMMISSION



TRANSFER / REHIRE OCCUPATIONAL LEVEL II FORM

FORM INSTRUCTIONS

THIS FORM MUST BE SUBMITTED BY PERSONS WHO ALREADY HAVE AN ACTIVE OCCUPATIONAL LEVEL II, RESTRICTED LEVEL II, LEVEL II-SW, OR LEVEL II-SWC LICENSE. IF YOUR LICENSE IS EXPIRED (INACTIVE) YOU MUST COMPLETE THE APPROPRIATE LICENSE APPLICATION.

PLEASE READ ALL INSTRUCTIONS CAREFULLY BEFORE COMPLETING THIS FORM.

I. COMPLETING THIS FORM:

You must make accurate statements and include all material facts. Any misrepresentation, or the failure to provide requested information, may result in revocation or suspension of your license.

IMPORTANT NOTICES

You may be required to provide additional information or submit additional forms.

You must immediately notify the Missouri Gaming Commission of any changes in the information submitted on this form and related materials.

**REQUEST FOR TRANSFER / REHIRE
IS HEREBY MADE TO THE MISSOURI GAMING COMMISSION**

Please print or type the answers to the following questions in the spaces provided.

GAMING LICENSE NO.	SOCIAL SECURITY NO.	DATE OF BIRTH	AGE
Company Name:			
LICENSE TYPE <input type="checkbox"/> Occupational Level II (Licensee must be 21 or older) <input type="checkbox"/> Restricted Level II (A licensee who is 18 or over, but under 21) <input type="checkbox"/> Occupational Level II-SW (Licensee must be 21 or older) <input type="checkbox"/> Occupational Level II-SWC (Licensee must be 21 or older)			
NAME			
LAST NAME	FIRST NAME	MIDDLE NAME	
OTHER NAMES USED [E.G., MAIDEN NAME, ALL PREVIOUS MARRIED NAMES, ALIASES, AKA (ALSO KNOWN AS)]			
ADDRESS			
ENTER LICENSEE'S HOME ADDRESS, INCLUDING HOME AND MOBILE PHONE INFORMATION			
STREET ADDRESS, SUITE NO., ETC.			
PO BOX		HOME PHONE:	
CITY:	STATE:	ZIP CODE:	MOBILE PHONE:
PLACE OF BIRTH:	COUNTRY OF CITIZENSHIP:	EMAIL ADDRESS:	
ETHNIC ORIGIN			
<input type="checkbox"/> African <input type="checkbox"/> African-American <input type="checkbox"/> Alaska Native <input type="checkbox"/> American Indian <input type="checkbox"/> Asian <input type="checkbox"/> Caucasian <input type="checkbox"/> East Indian <input type="checkbox"/> Hispanic <input type="checkbox"/> Middle Eastern <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other			
GENDER: Male <input type="checkbox"/> Female <input type="checkbox"/> Other <input type="checkbox"/>		HEIGHT: ft. in.	WEIGHT: Pounds
HAIR			
<input type="checkbox"/> Auburn	<input type="checkbox"/> Bald	<input type="checkbox"/> Black	<input type="checkbox"/> Blonde
<input type="checkbox"/> Red	<input type="checkbox"/> Salt/Pepper	<input type="checkbox"/> Sandy	<input type="checkbox"/> Strawberry
<input type="checkbox"/> Brown	<input type="checkbox"/> Gray	<input type="checkbox"/> White	<input type="checkbox"/> Other
EYES			
<input type="checkbox"/> Black	<input type="checkbox"/> Blue	<input type="checkbox"/> Brown	<input type="checkbox"/> Gray
<input type="checkbox"/> Maroon	<input type="checkbox"/> Pink	<input type="checkbox"/> Other	
WORK DEPARTMENT			
JOB TITLE			
OCCUPATIONAL CLASSIFICATION (TO BE COMPLETED BY THE HUMAN RESOURCES DEPARTMENT)			
<input type="checkbox"/> BLU Solid Blue (non-gaming)	<input type="checkbox"/> DIA Red Diagonal Stripes (gaming)	<input type="checkbox"/> GRE Solid Green (surveillance)	
<input type="checkbox"/> HOR Red Horizontal Stripes (non-gaming)	<input type="checkbox"/> RED Solid Red (security and guest safety)	<input type="checkbox"/> WHI Solid White (non-casino)	
<input type="checkbox"/> OR Solid Orange (sports wagering)			

1. In the last 30 days, have you applied for a license at another licensed entity in Missouri?
☐ YES ☐ NO

If yes, list where applied:

2. Has your license ever been denied or revoked in any other jurisdiction?
☐ YES ☐ NO

If yes, list jurisdiction:

3. Describe any contact you have had with the police or the courts since your last application.

4. If you have had a name change since your last application, list the other names.

Military Service

Have you ever served on active duty in the Armed Forces of the United States and separated from such service under conditions other than dishonorable?

Yes ☐ No ☐

If you answered yes, would you like to receive information and assistance regarding veterans benefits and services?

Yes ☐ No ☐

If you answered yes, may the Missouri Gaming Commission share your contact information with the Missouri Veterans Commission in order to provide you with information regarding available veterans benefits and services?

Yes ☐ No ☐

General information may also be found on the Missouri Veterans Commission's website.



Missouri Gaming Commission

NOTICE OF DUTY TO DISCLOSE ARRESTS AND CONVICTIONS

The Missouri Gaming Commission (Commission) has advised the following person of his or her duty to disclose all arrests and convictions when completing this form:

Name: _____ SSN: _____

The Commission may revoke or suspend an Occupational Level II, Restricted Level II, Level II-SW, or Level II-SWC license of any licensee who fails to disclose any arrest or conviction on this form. This duty to disclose includes all arrests, which shall include any incidents in which the licensee was detained, held, or taken into custody by law enforcement officials for questioning about an alleged criminal offense, regardless of whether or not the charges for which the licensee was arrested were later dropped, dismissed, or nolle prosequi. This duty to disclose also includes all convictions, including military court-martial convictions and any conviction in which the licensee has been found guilty of, pleaded guilty to, pleaded nolo contendere to, or entered an Alford plea to a crime, as well as any conviction in which the licensee received a Suspended Imposition of Sentence (SIS), regardless of whether or not the record of conviction is currently a closed or expunged record.

Failure by the licensee to disclose any arrest or conviction may result in the REVOCATION or SUSPENSION of the individual's license.

The following examples are intended to help the licensee better understand his or her duty to disclose but are not designed to include every situation in which a licensee has a duty to disclose an arrest or conviction.

ANY LICENSEE WHO HAS QUESTIONS ABOUT OR DOES NOT FULLY UNDERSTAND HIS OR HER DUTY TO DISCLOSE ALL ARRESTS AND CONVICTIONS SHOULD NOT COMPLETE THIS FORM UNTIL SUCH TIME AS THE LICENSEE FULLY UNDERSTANDS THIS DUTY TO DISCLOSE.

Example #1: The licensee pleads guilty to a crime and receives an SIS and is placed on 2 years of probation. The licensee successfully completes the probation period, and the licensee's court records are closed. The licensee must disclose this conviction to the Commission despite any advice the licensee may have received from an attorney or judge to the contrary.

Example #2: The licensee is arrested for a crime, but the charges are later dropped, dismissed, or nolle prosequi by the prosecutor. The licensee must disclose this arrest to the Commission despite any advice the licensee may have received from an attorney or judge to the contrary.

Example #3: The licensee is arrested for or convicted of a crime in another state or jurisdiction. The licensee must disclose this arrest or conviction to the Commission despite any advice the licensee may have received from an attorney or judge to the contrary.

Example #4: The licensee is handcuffed by police, taken to the police station, fingerprinted, and held for questioning, but later released without any charges being filed against them. The licensee must report this interaction to the Commission despite any advice the licensee may have received from an attorney or judge to the contrary.

Example #5: The licensee is charged with, pleads guilty to, or is found guilty of any offense and is granted an expungement. The licensee must disclose any expunged offenses as required per section 610.140.9, RSMo.

Example #6: The licensee is arrested and convicted of a crime and sentenced to 2 years in prison. The licensee later receives a full pardon from the Governor. The licensee must disclose this arrest and conviction to the Commission despite any advice the licensee may have received from an attorney or judge to the contrary.

Acknowledgement of Understanding of Duty to Disclose: I freely acknowledge that I have read this form and fully understand my duty to disclose all arrests and convictions to the Commission.

Signature: _____ Date: _____

Acknowledgement of Receipt: The undersigned hereby certifies that the licensee was provided adequate time in which to read and examine this form, that the licensee indicated to the undersigned that he or she fully understood his or her duty to disclose all arrests and convictions to the Commission, and that the licensee signed the foregoing in exercise of his or her own free will on this, the _____ day of _____, 20____.