



Virginia Lottery

600 East Main Street, Richmond VA 23219

Gaming Employee Service Permit

VIRGINIA LOTTERY GAMING EMPLOYEE SERVICE PERMIT

I. INDIVIDUALS REQUIRED TO OBTAIN A GAMING EMPLOYEE SERVICE PERMIT:

This application must be completed by an individual who is or is seeking to be employed by an applicant for or holder of an operation license, and whose duties relate or will relate to the operation of a facility, and who performs or supervises or will perform or supervise the performance of:

1. Operating, servicing, or maintaining a casino gaming machine, table game or associated equipment;
2. Accounting, maintaining, or auditing a facility's financial records;
3. Counting or processing casino gaming machine or table game revenue;
4. Conducting security or surveillance in or around a facility; or
5. Operating or maintaining a facility's information systems;
6. Is employed by a permit holder and, whose duties directly relate to the repair, service or distribution of a casino gaming machine, table game or associated equipment, or is otherwise required to be present on the gaming floor or in a restricted area of the facility;
7. Is employed by a permit holder as a junket representative.
8. Is otherwise required by the Lottery to be licensed as a gaming employee.

II. COMPLETING THIS FORM:

Sponsoring Licensee's Responsibilities

- a. This form is to be used **only** when a holder of an Operator's License, Supplier Permit or a Service Permit (sponsored licensee) makes application for an employee applicant who has been offered a position within the sponsored licensee business.
- b. The form is to be filled out by the applicant employee, **not** the sponsored licensee.
- c. The sponsored licensee is responsible for ensuring that the following documents are uploaded into the Applicant's online application prior to submitting it to the Lottery:
 - 1. Authorization For Release of Information form (Notarized)
 - 2. Affidavit of Individual Applicant form (Notarized)
 - 3. Due Diligence Background Investigation
 - 4. If the applicant is not a citizen of the United States or a Naturalized United States citizen, provide a color copy of the applicant's naturalization or authorization to be employed documents, front and back, and any other documentation of authorization to be employed in the United States.
 - 5. Copy of birth certificate.
 - 6. Copy of passport (If Applicable).
 - 7. Copy of driver's license or State ID card, front and back.
 - 8. Official copy of driving record(s) from every State in which the applicant was licensed.
 - 9. Copy of Social Security or Social Insurance Card.
 - 10. If applicant attended college, have the applicant request transcripts to be emailed directly to gaminglicensing@valottery.com. If the applicant has not attended college, email an official high school transcript, copy of your high school diploma, or a copy of a G.E.D. certificate directly to gaminglicensing@valottery.com. Only provide transcripts for the highest education achieved.
 - 11. Request for Military Records, Form 180, completed & signed (If Applicable).
 - 12. Copy of any gaming licenses held (past or present) and documents relative to any past sanctions, fines, revocations, and/or suspensions.
 - 13. One or two paragraph summary of all litigation during the past fifteen years, which should include, docket number, court information regarding the cause of action, named litigants, copy of complaint, disposition or current status if pending.
 - 14. Personal Reference Form-Entire form MUST be completed.

Once these aforementioned documents have been uploaded into the applicant's Checklist within the online application portal, the Sponsored Licensee will then submit the online application.

- d. **The form must be submitted to the Lottery by the Sponsored Licensee, not the applicant employee.**

Applicant Employee's Responsibilities

- a. You are to complete this form and submit it electronically to the sponsored licensee for submission to the Lottery.
- b. You must make accurate statements and include all material facts. **Any misrepresentation, or the failure to provide requested information, may result in the denial of your application.**
- c. Read each question carefully prior to answering. Answer every question completely. If a question does not apply to you or you have nothing to disclose, chose N/A. Failure to provide a response to every question could result in the denial of your application.
- d. Once your application is submitted, it becomes the property of the Virginia Lottery and **will not** be returned.
- e. The applicant is responsible for submitting those items listed in the Required Documents Notice to the sponsored licensee that is handling your application process so that a copy can be uploaded with your online application.
- f. Once your application has been submitted to the Lottery, you must fully cooperate with the Investigators completing your background investigation. If your action or inaction hinders the Licensing Investigator from completing your background investigation, your application may be denied. A denial of your application means that you **immediately** lose your ability to work where a Virginia gaming license or permit is required.

III. BE SURE:

- a. You sign the Authorization for Release of Information and the Affidavit of Individual Applicant at the end of this form in the presence of a notary.
- b. You should retain a copy of your completed application for your records.

IV. PHOTOGRAPH AND FINGERPRINTS

You are required to provide a passport style photograph and submit your fingerprints for the completion of a criminal background check.

- a.** Applicants must upload a passport style jpeg photograph, to the Applicant Information section of your online application.

Applicants are strongly encouraged to have their fingerprints electronically taken at one of the designated Fieldprint locations. If the applicant is not able to be fingerprinted at a Fieldprint location, applicants must provide two completed FBI fingerprint cards, to the Virginia Lottery's Gaming Licensing and Investigations Division. The completed fingerprint cards cannot be older than 45 days or the cards will be rejected.

V. NOTICES

The burden of proof shall be on the applicant to show by clear and convincing evidence that:

- a.** The applicant complies with the laws of the Commonwealth of Virginia and the regulations regarding eligibility and qualifications for the permit and,
- b.** The applicant is not otherwise disqualified from holding a service permit.

Any false statements made in your application, or omission of required information, will reflect negatively on your character and may result in the denial of your application. If you receive a Gaming Employee service permit based on a false statements or misinformation, the Lottery may revoke or suspend your service permit.

Your ability to obtain or maintain a gaming license in another jurisdiction may be negatively impacted if:

- (1) the Lottery denies your license application; or
- (2) if approved for a Gaming Employee Service permit in Virginia, you receive punitive action from the Lottery as a result of being determined to have violated Virginia's casino gaming laws or regulations.

APPLICATION AND LICENSURE FEES

- | | |
|------------------------------------|-----------------|
| 1. Application fee..... | \$ 500.00 |
| 3. Fingerprint processing fee..... | <u>\$ 35.72</u> |

Total fee required at application **\$ 535.72**

NOTE: Application & fingerprint processing fees are due at the time the application is submitted. These fees are non-refundable. Payment should be remitted as follows:

Wire Payment To:

Virginia Lottery Account Number: 435029087446

Name of the Account: Gaming License Fees

Transit Routing Number: 026009593

Or ACH Instructions:

Virginia Lottery Account Number: 435029087446

Name of the Account: Gaming License Fees

Transit Routing Number: 051000017

Investigations will not begin until the required fees are remitted.

SERVICE PERMIT TERMS

1. Gaming Employee Service Permit.5 Years

Name of Employer Gaming Company: (You <u>must</u> have an offer to work from a Licensee)	
Type of Service Permit	___ Operator ___ Manufacturer ___ Contractor ___ Vendor Major ___ Vendor Minor
Position Applicant is Applying for:	

NAME AND ADDRESS

1. LastName	FirstName	Middle Name	Suffix(Jr., Sr., etc.)
2. Maiden Name		13. Date of Birth	
4. Address Line I		Address Line 2	
P. O. Box	City	County	State/Province
Zip Code	Country	5. Email Address	6. Home Phone 7. Cell Phone

MAILING ADDRESS (if different from above)

8. Address Line I		Address Line 2	
P. O. Box	City	County	State/Province
Zip Code	Country	Email Address	Home Phone Cell

DESCRIPTIVE INFORMATION

9. Height ____ FT ____ IN	10. Weight ____ lbs	11. Social Security Number ____ . ____ . ____	12. Driver's License ____ State Issued: ____
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13. Do you have any tattoos, scars or distinguishing marks? If yes, describe in detail:	14. MARITAL STATUS:
	<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED <input type="checkbox"/> DOMESTIC PARTNER
15. PLACE OF BIRTH:	

City/Town	State/Province	Country	16. Name of Spouse	17. Spouse's Maiden Name or AKA	18. Spouse DOB	19. Spouse's Social Security Number
20. HAIR COLOR <input checked="" type="checkbox"/> (BK) Black <input type="checkbox"/> (BR) Brown <input type="checkbox"/> (BD) Blonde <input type="checkbox"/> (RD) Red <input type="checkbox"/> (GY) Gray <input type="checkbox"/> (WH) White <input type="checkbox"/> (BA) Bald		21. EYE COLOR <input type="checkbox"/> (BK) Black <input type="checkbox"/> (BR) Brown <input type="checkbox"/> (HZ) Hazel <input type="checkbox"/> (BL) Blue <input type="checkbox"/> (GY) Gray <input type="checkbox"/> (GR) Green		22. SEX <input type="checkbox"/> (M) Male <input type="checkbox"/> (F) Female		23. RACE* Are you of Hispanic/Latino origin? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Caucasian <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Other: ____ * Multiracial respondents may select all applicable racial categories.

**LIST ANY OTHER NAME OR NAMES YOU HAVE BEEN KNOWN BY
(INCLUDE ALIASES, NICKNAMES, MARRIED NAMES)**

24. Have you been known by any other name or names? YES NO

If YES, list the additional names below and specify dates for use for each. Include maiden name, aliases, nicknames or any other names used.

Last Name	First Name	Middle Name	Suffix	From Date	To Date

25. Are you a United States citizen? YES NO **If NO, complete the following:**

a. Country of Citizenship

Name and Address of sponsor upon your arrival:

b. If a naturalized citizen complete

1. C.I.S. Registration Number: _____
2. Date Granted: _____
3. Court: _____
4. City/State of Court: _____
5. Certificate Number: _____

c. If you are a legally authorized Permanent Resident Alien, provide the "A" number from your Permanent Resident Card:

Card Number: _____ (Attach a color copy front and back)

d. If you do not possess a Permanent Resident Card but are authorized to work in the United States, please describe the U. S. Work Visa that you possess and provide the Visa number:

Description of Authorization: _____

VISA#: _____

e. Acceptable forms of documentation that establish both identity and employment authorization which will be accepted. All documents must be unexpired, and a color copy uploaded into the online application :

Document	Document Number	Issuance Date	Expiration Date
Permanent Resident Card, Fonn 1-551			
Permanent Resident Stamp, 1-551			
Employment Authorization Document, Form 1-766			
Arrival Departure Record, Form 1-94			
Arrival Departure Record, Form 1-94A			
Admission Stamp			
1-94 in Unexpired Foreign Passport			
Form 1-797A, Notice of Action with 1-94			
Global Entry 1-94			
Form 1-571, Refugee Travel Document			
Form I-327, Re-entry Permit			
DS-2019			
Form I-20, Certificate of Eligibility			
Machine Readable Immigrant Visa			
Certificate of Naturalization			

If you have received any of the above documents provide the number assigned to the document, the issuance date and expiration date. You must upload into online application portal a color copy of the document, front and back, and any other documentation of authorization to be employed in the United States.

In the event you are not in possession of any of the above documentation, provide one document from column # 1 and one document from column # 2 below.

Column# 1 Documents that Establish Identity	<u>Column# 2</u> Documents that Establish Employment Authorization
Driver's license or ID card issued by a state or outlying possession of the United States, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address	A Social Security Account Number card unless the card includes one of the following restrictions: (1) NOT VAUD FOR EMPLOYMENT (2) VAUD FOR WORK ONLY WITH INS AUTHORIZATION (3) VAUD FOR WORK ONLY WITH DHS AUTHORIZATION NOTE: A copy (such as a metal or plastic reproduction) is not acceptable.
ID card issued by federal, state, or local government agencies or entities , provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address	Certification of Birth Abroad issued by the U.S. Department of State (Form FS-545)
School ID card with a photograph	Certification of Report of Birth issued by the U.S. Department of State (Form DS-1350)
Voter's registration card	Original or certified copy of a birth certificate issued by a state, county, municipal authority, or outlying possession of the United States bearing an official seal
U.S. military card or draft record	Native American tribal document
Military dependent's ID card	Identification Card for Use of Resident Citizen in the United States (Form I-179)
U.S. Coast Guard Merchant Mariner Card	Employment authorization document issued by DHS
Native American tribal document	
Driver's license issued by a Canadian government authority	

If you are submitting any of the above documents from List# 1 or# 2 you must upload into online application portal a legible color copy of the document, front and back, including document number, issuance and expiration dates.

26. Have you ever been issued a passport? YES NO If, yes please complete the following:

Passport Number	Country of Issue	Place Issued	Date Issued	Expiration Date

EDUCATION

29. Beginning with your highest level of education and working backwards complete the information listed below with respect to each school, college, graduate or postgraduate school you have attended.

Dates		Name and Address of School, Training Program, etc.	Description of Educational Program	List Any Degree or Certification	Graduated Yes/ No
From: (Mo/Yr)	To: (Mo/Yr)				

EMPLOYMENT

30. Beginning with your present job and working backwards, list below all periods of employment for the past three years or from age 18, whichever is less. Give dates of any unemployment between jobs in proper sequence. Include all part-time and full-time employment and any military service. For any casino, horse racing or **gaming** related employment list your license number under "Title."

Have you been in the Military? Yes No If Yes, list regardless of time.

Dates		Name, Address and Telephone Number of Employer(s)	Title/Position Held and Description of Duties (License Number)	Supervisors Name	Reason for Leaving/ Compensation at Departure
From: (Mo/Yr)	To: (Mo/Yr)				

31. Have you ever been discharged or asked to resign from a job? YES NO If Yes, complete below.

Employers Name & Address	Date of Discharge or Resignation	Reason for Leaving

CIVIL, CRIMINAL & INVESTIGATORY PROCEEDINGS

Prior to answering this question, carefully review the definitions and instructions which follow.

DEFINITIONS: For purposes of this question:

- A. **"Arrest"** includes any time that you were stopped by any law enforcement officer and advised that you were under arrest, detained, held for questioning or were requested by a law enforcement officer to come to a law enforcement office or facility and answer questions. "Arrest" also includes any circumstances in which you were taken into custody by any law enforcement officer, fingerprinted, detained in any jail or detention center, or otherwise been the subject of a court order to appear in a judicial proceeding in which you were accused of a "crime or offense" as defined in subsection C.
- B. **"Charge"** includes any indictment, complaint, information, summons, or other notice of the alleged commission of any "offense."
- C. **"Offense"** includes all felonies, misdemeanors, and summary offenses that may have required you to appear before any municipal, state, or federal grand jury, court, or any other judicial tribunal except juvenile court. "Offense" also includes all driving-related charges or offense which carry any period of incarceration.

INSTRUCTIONS:

1. **Answer "YES"** and provide all information to the best of your ability EVEN IF:
 - A. You did not commit the offense charged;
 - B. The charges were dismissed or downgraded to a lesser charge;
 - C. You completed a pretrial intervention or other rehabilitation or diversionary program;
 - D. You were not convicted;
 - E. You did not serve any time in a correctional facility;
 - F. The charges or offenses happened a long time ago; or
 - G. You were not arrested for the charge.

33. To the best of your knowledge, has a criminal indictment, information or complaint ever been filed or returned against you, or named you as an unindicted party or unindicted co-conspirator in any criminal proceeding in any jurisdiction?

YES NO

If yes, complete the following chart:

Name and Address of Governmental Agency/Organization Involved	Nature of Proceeding	Outcome/Disposition	Date

34. To the best of your knowledge, have you ever been the subject of an investigation conducted by any governmental agency/organization, court, commission, committee, grand jury or investigatory body (local, state, county, provincial, federal, national, etc.) other than in connection with a traffic summons?

YES NO

If yes, complete the following chart:

Name and Address of Court or Other Agency	Nature of Proceeding or Investigation	Was Testimony Given?	Date on which Testimony was Given	Approximate Time Period of Investigation

35. Have you ever received a pardon, or has any government agency/organization dismissed, suspended or deferred any criminal investigation or prosecution against you for any criminal offense?

YES NO

If yes, complete the following chart:

Date of Pardon, Dismissal, Suspension or Deferral	Type of Action Taken	Name and Address of Government Agency/Organization Granting Pardon, Dismissal, Suspension or Deferral

36. Have you or any business entity with which you are or were associated, ever filed under bankruptcy, been petitioned into bankruptcy or made a proposal under any bankruptcy or insolvency law in any jurisdiction?

YES NO

If yes, complete the following chart:

Date Filed	Docket Number	Name and Address of Court	Date Judgement Entered

37. In the past ten (10) years, have you been cited or charged with, or formally accused of, any violation of a statute, regulation or code of any local, state, county, municipal, provincial, federal or national government other than a criminal, summary or motor vehicle offense?

YES NO

If yes, complete the following chart:

Governmental Agency/ Organization	Nature of Charge	Date	Disposition

PERMITS, LICENSES, CERTIFICATES & REGISTRATIONS

38. Have you, or any business entity with which you are or were associated, ever applied for any permit, license, certificate or registration in connection with *gaming* in any jurisdiction?

YES NO

If yes, complete below.

Name & Address of Applicant	Name & Address of Licensing Body	Type of Permit, License, Certificate or Registration	Date of Application	Disposition: Granted, Denied, Pending, Withdrawn

GARNISHMENT PROCEEDINGS

39. Have your wages, earnings or other income ever been subject to garnishment, attachment or other similar orders in any jurisdiction?

YES NO

If yes, complete the following chart:

Nature & Amount of Obligation	Name & Address of Holder of Obligation	Name & Address of Court	Court Docket Number	Current Status

40. Have you had a lien or financial judgment filed against you in the past ten (10) years? (This includes child support orders, or judgments and federal state and local tax liens)

YES NO

If yes, complete the following chart:

Nature & Amount of Obligation	Name & Address of Holder of Obligation	Name & Address of Court	Court Docket Number	Current Status

41. Are you currently delinquent in the payments, including child support, taxes, student loans, mortgage, credit cards and any other financial obligations?

YES NO

If yes, complete the following chart:

Nature & Amount of Obligation	Name & Address of Holder of Obligation	Name & Address of Court	Court Docket Number	Current Status

**Illegal Use of Controlled Dangerous Substances;
Use of Alcohol in the Workplace; Problem Gambling**
(Answer all questions and provide information to any question you answer "yes.")

42. Do you currently engage in the illegal use of drugs, or have ever been arrested for such use?

YES NO

If yes, please explain below.

43. The use of alcohol by licensees may be prohibited in a casino, and any use of alcohol that adversely affects job performance or conduct maybe the basis for discipline of Gaming employee and revocation or suspension of a Gaming permit. Does this present a problem for you?

YES NO

If yes, please explain below .

44. Are you a compulsive gambler, or have you ever been voluntarily or involuntarily excluded from any gaming facility?

YES NO

If yes, please explain below.



AUTHORIZATION FOR RELEASE OF INFORMATION

TO: _____
(To be filled-in by Lottery)

FROM: _____
(Applicant's Printed Name)

I, _____ (printed name), am an applicant for a Gaming Employee Service Permit in the Commonwealth of Virginia.

The Virginia Lottery, and its employees, agents, and vendors (collectively, "the Lottery"), is required by law to conduct an investigation of an applicant Gaming Employee Service Permit. That investigation requires the Lottery to collect and evaluate information about me. By executing this Authorization, I irrevocably give consent and authorize any: local, State or federal government unit; commercial or business enterprise, including a consumer reporting agency; non-profit entity; individual or any other public or private entity to release to the Lottery any and all information about me that the Lottery requests. The requested information may be released in written, verbal, electronic, or any other form.

With respect to any claims or liability arising from the release of the requested information to the Lottery, I expressly waive, release, discharge and forever hold harmless and agree to indemnify, the unit, entity, or individual that releases information to the Lottery under the authority of this Authorization.

A photo, facsimile, or electronic copy of this signed and dated Authorization shall be equally effective as an original.

Signature of Applicant

Date

Print Name of Applicant

NOTARY

The undersigned, a Notary Public in and for the County of _____ in the State of _____, certifies that the above named individual appeared in person, and before me, either known to me or satisfactorily proven to be the individual whose name subscribed to the within instrument and signed the Authorization and Notification.

This _____ day of _____, 20____, and to which witness my hand and seal.

Notary Public

Stamp or Seal

Printed Name

My commission expires - - - - - 20



AFFIDAVIT OF INDIVIDUAL APPLICANT

I, _____ (printed name) am an applicant for a Gaming Employee Service Permit in the Commonwealth of Virginia. I have read, and understand, every page of this Form. To the best of my knowledge, information, and belief, the information that I have provided on, or attached to, this Form is accurate, complete, and not misleading. I understand that any misrepresentation or omission may lead to the delay or denial of my application for a Gaming Employee Service Permit, and may subject me to civil or criminal liability. I also understand that, if I am issued a license, I remain under an ongoing obligation to comply with all regulatory requirements.

By a separate Authorization for Release of Information, I am authorizing any entity or individual that has information about me to release that information to the Virginia Lottery, and its employees, agents, and vendors (collectively, "the Lottery"), for purposes of the Lottery's investigation of my application for a video lottery employee license.

I expressly waive, release, discharge, and forever hold harmless and agree to indemnify, the Lottery, the Commonwealth of Virginia, and their employees, agents, and representatives, from liability for any and all claims or legal action arising from any actions that the Lottery or the Commonwealth of Virginia may take related to the collection of information from any individual or person and the use of that information in connection with investigating my application for a Gaming Employee Service Permit.

Signature of Applicant

Date

Print Name of Applicant

NOTARY

The undersigned, a Notary Public in and for the County of _____, in the State of _____, certifies that the above named individual appeared in person, and before me, either known to me or satisfactorily proven to be the individual whose name subscribed to the within instrument and signed the Authorization and Notification.

This _____ day of _____, 20____, and to which witness my hand and seal.

Stamp or Seal

Notary Public

Printed Name

My commission expires _____, 20_____

Required Documents Notice

Notification to all Gaming Employee Service Permit applicants:

Your application for a Gaming Service Permit requires the Lottery to initiate a comprehensive background investigation on you to determine your suitability for the issuance of a Gaming Service Permit in the Commonwealth of Virginia..

To ensure that this investigation will be completed in a timely manner, please provide all the applicable required documentation listed below to your Account Representative staff member that is handling your application process so that the document copies can be uploaded with your online application. Failure to provide the below listed documents will delay the completion of your background investigation and subsequent approval of your license application.

Once your application has been submitted to the Lottery, you must fully cooperate with the Virginia Lottery's Licensing Investigator. If your action or inaction hinders the Licensing Investigator from completing your background investigation, your Gaming Employee Service Permit may be denied.

Required Documents

All documentation / information provided is confidential and will become the property of the Virginia Lottery. No document will be returned, so please make sure you retain the original document unless otherwise specified in the instructions.

1. Copy of your birth certificate.
2. Copy of your Naturalization Certificate. (If Applicable).
3. Copy of your Passport (If Applicable).
4. Copy of your driver's license or government issued ID card, front and back.
5. Official copy of your driving record(s) from any State in which you were licensed.
6. Copy of your Social Security or Social Insurance Card.
7. Copy of your Permanent Resident Card, Work Visa (H1B, H2B, TN1 etc.) front and back (If Applicable).
8. If you attended college, provide a certified copy of college transcript(s). College transcripts should be emailed directly to Gaminglicensing@valottery.com.

If you have not attended college, provide an official high school transcript, copy of your high school diploma, or a copy of your G.E.D. certificate. Only provide a transcript for the highest education level achieved.

9. Request for Military Records, Form 180, completed & signed (If Applicable)
10. Copy of any gaming licenses you hold now or have held in the past and documents relative to any

sanctions, fines or suspension.

11. One or two paragraph summary of all litigation during the past fifteen years, which should include, docket number, court information regarding the cause of action, named litigants, copy of complaint, disposition or current status if pending.
12. Personal Reference Form - Entire form **MUST** be completed.

Provide the names and other information requested of three (3) references over the age of 18 who have known you for at least one year and can attest to your good character and reputation. No individual can be a reference who is a member of your family. For purpose of this question "family" means spouse, domestic partner, parent, grandparent, child, grandchild, sibling, uncle, aunt, nephew, niece, father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law and sister-in-law, or any other individual related by blood, marriage, or adoption.

Reference # 1 Information

Reference Email Address (preferred contact method):		
Reference Home Address		
Reference Business Address		
City	State	Postal Code
Occupation	Home Telephone	Business Telephone
Years Known	Explain the relationship (ex: friend, neighbor, co-worker, etc.)	

Reference # 2 Information

Reference Email Address (preferred contact method):		
Reference Home Address		
Reference Business Address		
Occupation	Home Telephone	Business Telephone
Years Known	Explain the relationship (ex: friend, neighbor, co-worker, etc.)	

Reference # 3 Information

Reference Email Address (preferred contact method):		
Reference Home Address		
City	State	Postal Code
Reference Business Address		
Occupation	Home Telephone	Business Telephone
Years Known	Explain the relationship (ex: friend, neighbor, co-worker, etc.)	

MILITARY RECORDS FORM
(In the event the applicant served in the Armed Forces)

Instructions for completing SF 180, Request Pertaining to Military Records 1. If you served in the U.S. Military, complete, sign and date the SF 180, Request Pertaining to Military Records. The form can be found at <https://www.archives.gov/files/research/order/standard-form-180.pdf>

Include the following information in the appropriate space:

Section I – Information Needed to Locate Records

- Complete all blanks and answer all questions.

Section II – Information and/or Documents Requested

- Item 1 – Check the box DD Form 214 or equivalent. Do not check the box requesting a DELETED Report of Separation for the years you indicated in Dates of Service of Section I, Item 5.
- Check the “Other” box and insert the phrase “Info related to military court martial or other charges.”
- Item 2 Purpose- Check the “Other” box – Insert the phrase “This information is necessary in order for the Virginia Lottery to complete my background investigation.”

Section III – Return Address and Signature

- Item 1 – State your name.
- Item 2- Check the box that you are the Service Member or Veteran identified in 1 above.
- Item 3 -Send Information and documents to:
Nathan Warfield
Director of Licensing and Investigations
Virginia Lottery 600 East Main Street Richmond, VA 23219
- Item 4 – Complete and sign with your information

2. Submit the form to the appropriate Processing Center and submit a copy of the form to your Account Representative for uploading into the gaming system.