

VIRGINIA LOTTERY

GAMING LICENSING and INVESTIGATIONS DIVISION



PROCEDURES MANUAL for SPORTS BETTING EMPLOYEE LICENSE APPLICANTS

GENERAL INFORMATION

This procedures manual is a reference tool for sports betting prospective employees within the Commonwealth of Virginia who are applying for a sports betting employee license. The Virginia Lottery's intention is to provide applicants with guidance when using the automated licensing system to complete your online application prior to submitting it to the Virginia Lottery's Gaming Licensing and Investigations Division for the appropriate due diligence.

Only individuals who have received at least a conditional offer of employment from a sports betting permit operator, supplier or vendor who is either licensed or who has applied for a license with the Commonwealth of Virginia should apply through the automated licensing system. Your application must be submitted online through this automated system beginning October 15, 2020. You will be required to contact your sports betting employer's account representatives in order to obtain access to the system prior to initiating the application process. Once an application and all required supporting documents have been submitted, these items will become the property of the Virginia Lottery and will not be returned to you. Applicants will not be able to make any changes to their applications within the automated system once your application has been submitted.

Upon being given at least a conditional offer of employment to work for a sports betting licensee holder or applicant within the Commonwealth of Virginia, your employer's account representative will follow up with you to ensure that you've provided all required supporting documentation. The account representative will provide you with the URL to access the eLicensing website as well as a temporary password and username that you will use to sign into the automated system and begin the application process. The account representative will also provide you with instructions on where to get fingerprinted.

THE FINGERPRINT PROCESS

All applicants will need to have Live Scan fingerprinting done for a criminal history check to be done. The Department has contracted with Fieldprint to provide this service. To schedule a fingerprinting appointment with Fieldprint, please follow these simple instructions:

1. Visit <http://fieldprintvirginia.com>
2. Click on the "Schedule an Appointment" button.
3. Enter an email address under "New Users/Sign Up" and click the "Sign Up" button. Follow the instructions for creating a Password and Security Question and then click "Sign Up and Continue".
4. Enter the Fieldprint Code provided by the Virginia Lottery. This code will be printed on the instructions provided to you by your account representative.

5. Enter the contact and demographic information required by the FBI and schedule a fingerprint appointment at the location of your choosing.
6. At the end of the process, print the Confirmation Page. Take the Confirmation Page with you to your fingerprint appointment, along with two forms of identification.
7. If you have any questions or problems, you may contact our customer service team at 877-614- 4364 or customerservice@fieldprint.com.

THE APPLICATION PROCESS

1. After accessing the Licensing website, sign into the system using the username and temporary password provided by your employer's account representative.
2. You will be prompted to change your password. Your new password must be 12 or more characters containing all the following: special character(s), alphabetical character(s), numerical character(s), upper case letter(s), **and** lowercase letter(s):

CHANGE PASSWORD

Use the form below to change your password.

Passwords must be at least 12 characters and meet the following criteria: at least 1 number, at least 1 lowercase letter, at least 1 uppercase letter, at least 1 special character, and only change by 1 character from previous passwords; and cannot be same as your username.

Account Information

Old Password:

New Password:

Confirm New Password:

3. Read the “Acknowledgement and Disclosure” form and click the button to acknowledge that you understand and agree to the terms within. If you aren't clear on these terms contact your account representative. You will not be able to proceed without acknowledging that you understand.
4. You will then be able to start entering information into your application. You must complete *every* section of the application prior to being able to submit it:

The current progress on your Non-Gaming application is listed below. If you

Section	Progress
Name and Address	(0 of 2 Complete)
Descriptive Information	(0 of 4 Complete)
Residence	(0 of 1 Complete)
Employment	(0 of 2 Complete)
Civil, Criminal & Investigatory Proceedings	(0 of 3 Complete)
Permits, Licenses, Certificates & Registrations	(0 of 1 Complete)
Illegal Use of Controlled Substances	(0 of 1 Complete)

(Every listed section must be completed)

(Each section has sub-sections)

5. Simply follow the instructions when entering your information for each section:

Application On Hold

Question Area: (Name)

Last Name: Doe First Name: Jane Middle Name: sally

Phone Number	Type	Primary
Edit Delete (999) 999-9999	Cell	Yes

[Edit](#) [Delete](#)

Do you have another phone number to enter? -- Select --

[Previous](#) [Next](#) [Hold](#)

[Name](#) [Address](#) [Descriptive](#) [Aliases](#) [Citizenship](#) [Passport](#) [Residence](#) [Employment](#) [Discharge](#) [Criminal](#) [Indictment](#) [Investigation](#)

Use the “hold” button if you wish to complete the section later and you’ll be able to proceed to another section to complete. Be sure to save any data you enter first.

Each required section to complete is listed in the yellow field at the bottom of the page and will be underlined once successfully completed.

6. When you get to the “criminal” section of the application, click the instructions link and read the “Civil, Criminal, and Investigatory Proceedings” document prior to answering the questions in this section. You must acknowledge that you’ve read and understand the definitions in these instructions. If you do not understand, contact your account before proceeding:

Prior to answering these questions, carefully review the definitions and instructions: [Click Here for Instructions](#)

Have you read and understood the definitions and instructions?

[Home](#) [Address](#) [Descriptive](#) [Aliases](#) [Citizenship](#) [Passport](#) [Residence](#) [Employment](#) [Discharge](#) [Criminal](#) [Indictment](#) [Investigation](#) [Certificates](#)

7. Once you've completed each section you will be able to preview your application prior to submitting it. Be sure your information is accurate and complete as you will not be able to make changes within the automated system once you submit it. You will be able to print a copy of your application for your records.

The current progress on your Non-Gaming application is listed below. If you have not yet started your application, click on the first section to begin.

Section	Progress
Name and Address	(2 of 2 Complete) ✓
Descriptive Information	(4 of 4 Complete) ✓
Residence	(1 of 1 Complete) ✓
Employment	(2 of 2 Complete) ✓
Civil, Criminal & Investigatory Proceedings	(3 of 3 Complete) ✓
Permits, Licenses, Certificates & Registrations	(1 of 1 Complete) ✓
Illegal Use of Controlled Substances	(1 of 1 Complete) ✓

8. Your account representative will obtain all required supporting documents from you to submit to Virginia Lottery as part of the application process.



Virginia Lottery | 600 E Main St. Richmond, VA 23219 | 804-692-7165 | gaminglicensing@valottery.com

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 sports betting employee license in the Commonwealth of Virginia. The Virginia Lottery, and its employees, agents, and vendors (collectively, "the Department"), is required by law to conduct an investigation of an applicant for a sports betting license.

That investigation requires the Department 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 Department any and all information about me that the Department 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 Department, I expressly waive, release, discharge and forever hold harmless and agree to indemnify, the unit, entity, or individual that releases information to the Department 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

NOTARY PUBLIC

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__



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AFFIDAVIT OF INDIVIDUAL APPLICANT

I, _____ (printed name) am an applicant for a sports betting employee license in the Commonwealth of Virginia. I have read, and understand, every page of this application. To the best of my knowledge, information, and belief, the information that I have provided as part of this application 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 sports betting employee license, and may subject me to civil or criminal liability.

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, its employees, agents, and vendors (collectively, "the Department"), for purposes of its investigation of the application for a sports betting license.

I expressly waive, release, discharge, and forever hold harmless and agree to indemnify, the Department, 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 Department or the Commonwealth of Virginia may take related to the collection of information from the any individual or person and the use of that information in connection with investigating the application for a sports betting employee license.

Signature of Applicant

Date

Print Name of Applicant

NOTARY PUBLIC

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

Printed Name

Stamp or Seal

My commission expires _____, 20____



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CERTIFICATION OF BUSINESS RELATIONSHIP

LICENSEE: _____

APPLICANT: _____

(Applicant's Printed Name)

I, _____ (printed name), am authorized to complete and execute Business Agreements on behalf of _____ (Licensee Name). The applicant listed above has received at least a conditional offer of employment from the Licensee. The Applicant will have the following job description:

Signature of Licensee Representative

Date

Printed Name

Title

NOTARY PUBLIC

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

Printed Name

Stamp or Seal

My commission expires _____, 20____