Iowa Racing and Gaming Commission (IRGC) License Application

Please print legibly and use blue or black ink only.

Commission Use Only

Applicant's Position:_____
Reviewing Official:_____ Outcome: I P D
Review Type: INI / REL Date: _____

Category	Type	Occurred
1._____	_____	_____
2._____	_____	_____
3._____	_____	_____

Date Licensed: _____
License Number: _____
License Fee: _____CA_____
Fingerprint Fee: _____CK_____
IRS Fee: _____DB_____
Total: _____
LA _____BKG_____
FP Date: _____State: _____
ID: _____and _____

1. IRGC License Fees (mark appropriate box) □ **999 Commission**

$10 License Fees

□ 101 Non-Racing/Gaming "O"
□ 102 Vendor Employee
□ 103 Apprentice Jockey
□ 104 Assistant Trainer
□ 105 Exercise Rider
□ 106 Farrier
□ 107 Groom
□ 108 Jockey/Driver
□ 109 Jockey Agent
□ 110 Kennel Helper
□ 112 Owner (Greyhound)
□ 114 Pony Rider
□ 115 Trainer
□ 122 QF Driver
□ 116 Practicing Veterinarian
□ 117 Owner (Thoroughbred)
□ 118 Owner (Quarter horse)
□ 119 Owner (Standard bred)
□ 121 Practicing Vet Asst
□ 902 Open Claim

$20 License Fees

□ 207 Contract Kennel Owner
□ 208 Exercise/Pony Rider
□ 212 Owner/Trainer THB
□ 213 Owner/Trainer QTR
□ 215 Racing/Gaming "A"
□ 216 Racing/Gaming "C"

2. Social Security No. *
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3. Name: Last First Middle (full name) Maiden Name (if applicable) Aliases (if used)

4. Marital Status
Married / Single

5. Spouse's name: Last First Middle Initial Maiden Name (if applicable)

6. Permanent Mailing Address at which service of all papers may be made upon you. (No P.O. Box)

Number and Street or Rural Route

City **State** **Zip Code**

7. Current Local Address:

Number and Street or Rural Route

City **State** **Zip Code**

8. Home Phone: ( ) -

Alternate Phone: ( ) -

9. Birth date (MM/DD/YY)
/ /

10. Place of Birth (City and State; List country if other than U.S.)

11. U.S. Citizen?
Yes / No

12. Physical Description:	**Height**	**Weight**	**Gender**	**Eye Color**	**Hair Color**	**Racial/Ethnic Group**
	' "	lbs.	M / F			

13. Occupational Licensing Questions:

A Have you **ever** been convicted, pled "guilty" or "no contest" to **any** criminal offense (felony or misdemeanor)?..... □ Yes □ No
(This includes moving traffic violations, adjudications of delinquency & military convictions, including summary court-martials.)
B Have you **ever** been convicted of a gambling related offense?..... □ Yes □ No
C Have you **ever** been convicted or pled "guilty" or "no contest" to any alcohol or drug related offense?..... □ Yes □ No
D Have you **ever** received any type of a deferred judgment?..... □ Yes □ No
E Do you have any charges pending against you on **any** criminal offense (felony or misdemeanor)?..... □ Yes □ No
F Have you or your spouse **ever** been fined, suspended, or denied a license by a gaming or racing authority?..... □ Yes □ No
(For careless riding suspensions, jockeys need only list those in excess of 10 days; for fines of racing industry participants, only those in excess of $100.00 need be listed.)
G Have you **ever** been expelled, ejected, or denied privileges at any racetrack or gaming facility?..... □ Yes □ No
H Do you have any **overdue** income taxes, fines, court ordered legal obligations or judgments?..... □ Yes □ No
I Do you have any history of mental illness or repeated acts of violence?..... □ Yes □ No
J Do you have an addiction to alcohol or a controlled substance?..... □ Yes □ No
K Have you **ever** used a name other than your current legal name or maiden name?..... □ Yes □ No

14 . Provide an explanation for each question in item 13 that was marked "Yes" (continue on a blank sheet of paper if needed).

Date (Mo/Yr)	**County** (if known)	**State**	**Type of Offense** (speeding, OWI, theft, etc.)	**Category** (i.e. simple, serious, or aggravated misdemeanor; or felony.)	**Disposition** (fine paid, jail, community service, etc.)

* Disclosure of your social security number on this license application is required by 42 U.S.C. §666(a)(13) and Iowa Code Sections 252J.8(1) and 99D.8A.

15. Have you, or are you licensed by any racing or gaming commission/authority? Yes / No If yes, please complete the following:

State:_____ Position held:_____ Year(s)_____

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15 a. Last U.S. state where you were fingerprinted:_____ Month/Year:_____/_____

16. Employment in the last 5 years: (continue on a blank sheet of paper if more room is needed)

Dates (from / to)	Name and address of employer or business	Type of business	Position held

17. Addresses of locations where you have lived in the last 3 years: (use blank sheet of paper if more room is needed)

Dates (from / to)	Number and street or rural route	City	State

18. *Racing animal owners only:* List name(s) of horses or greyhounds you plan to race in Iowa that are owned wholly or in part, or leased by you. If leased, add a capital "L" beside the name of the horse or greyhound.

A. Do you race under a stable or kennel name, corporation or partnership? □ Yes □ No Name_____

B. Do you own these horses or greyhounds in partnership with anyone? □ Yes □ No

Name of horse(s)/greyhound(s)	Animal's Age	Other Owners	Your Share (%)

19. YOUR TRAINER'S NAME:

20. *Trainers Only:* Provide the following owner information (owners for whom you are training).

Owner	Address	Number of horses/greyhounds:

Certification Statement: I hereby certify that the information provided on both sides of this application form is true and correct to the best of my knowledge and I agree to inform the Iowa Racing and Gaming Commission (Commission) of changes or updates to the information I have provided on this form, to include any future criminal convictions/pending charges.

I hereby make application for a license to be issued in accordance with the terms and provisions of the rules and regulations of the Commission. In making this application for a license to participate in racing and/or gaming, I understand that an investigative report may be made whereby information is obtained through FBI personal interviews with third parties such as family members, business associates, financial sources (including requesting a credit report from a credit bureau), friends, neighbors, AmercianChecked, or others with whom I am acquainted. I further understand that this report will include information pertaining to my criminal history, credit history, character, general reputation and personal characteristics which may be applicable.

§99D.8A(4) and 99F.6(6) of the Code of Iowa: "A person who knowingly makes a false statement on the application is guilty of an aggravated misdemeanor." Penalty for such may result in a fine up to $5,000, imprisonment up to 2 years, or both.

My signature verifies that I understand that failure to provide true and complete information, or failure to comply with Commission rules may result in a fine, suspension, denial, or revocation of this license.

_____ _____

Employer's Printed Name Interpreter's Signature (if applicable)

_____ _____|_____/_____/_____

Employer's Signature (authorized signature) **Applicant's Signature** **Date**