NOTICE - DOCUSIGN DISCLOSURE AND WAIVER

In processing your license application, the Pueblo of Laguna Gaming Control Board and Tribal Gaming Regulatory Authority ("TGRA") have contracted with DocuSign, the leading company for securely providing electronic signature services. Particularly during the pandemic, TGRA is committed to limiting travel and personal contact, which makes an e-signature service like DocuSign important. As part of the application process, therefore, TGRA will provide documents to be hosted by DocuSign, which then makes them available to you over the internet for review and signature.

DocuSign claims to have industry-standard security and also claims that it does not access or review any documents it hosts for signature, but there is always some risk. By submitting your application to TGRA electronically, you also acknowledge that you waive any claim against TGRA for any data breach relating to the use of DocuSign for licensure purposes.

ACKNOWLEDGEMENT AND AUTHORIZATION

By submitting my application to TGRA electronically, I consent to TGRA providing application data, including my personal information, to DocuSign, I hereby authorize TGRA to use DocuSign for TGRA's process of reviewing, obtaining electronic signatures, and tracking my licensure documents, which necessarily includes DocuSign having possession of my personal information.



P.O. Box 225 • Laguna, NM 87026

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Gaming license renewal applications are due 30 days before the expiration of your current license. Late applications submitted before your license expires will be assessed a late fee in addition to the renewal fee.

Last Name	First Na	ime	Full Middle Name			
Other names changed legally or other names used since last update			Phone Number			,
Physical Residence Ac	ldress City		State/Zip			
Mailing Address	City		State/Zip			
Date of Birth		Social Securit	y Number			
Driver License State	Driver License Numb	er	Tribal Affiliation			
Race		Gender	Eye Color			
Height		Weight				
Natural Hair Color	Countr	y of Citizenship	<u>.</u>			
Place of Birth						
	City/Town	State				
Have you changed residences in the last 12 months?				Yes	No	
lf 'Yes", please provide	the following:					
Address		City	State/Zip			
Have you been charge	d or convicted of any felony, mise	demeanor or criminal traffi	c violation that resulted in a			
sentence of probation,		Yes	No			
			u must disclose all civil or criminal the date you were discharged or			
other supervision.	nence, or probation and your do		the date you were discharged of			

Your current position with the LDC Gaming Enterprise:



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NOTIFICATION

Please note that you must keep your Gaming license on your person while you are on duty or on the gaming property in uniform and must provide it when requested by a TGRA representative, or your supervisor. If you cannot produce your gaming license while on duty or on the gaming property in uniform, you will not be allowed to work, or have access to the restricted areas of the gaming facility. You are not allowed to alter, deface or obscure your gaming license in any manner. If you lose your gaming license, you will be required to obtain a replacement license at a cost of \$5.00 from our office. In addition to this license, you will also receive a separate identification badge from LDC which functions to allow you proxy access to the appropriate areas of the gaming facility and utilize the timeclocks.

I certify that all statements are true, complete and correct to the best of my knowledge and belief and are made in good faith. I am aware that the purpose of the investigation is to ensure compliance with the Tribal/State Compact(s) on gambling. I authorize and grant my consent to permit any Law Enforcement Agency and other person, business or agency deemed necessary, to release any information to any identified Tribal Gaming Regulatory Authority Employee.

By my signature below, I have read and understand the notification above:

Applicant Signature

Print Name

Date



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FULL DISCLOSURE AND ASSURANCES

<u>Note</u>: If you cannot attest to, truthfully acknowledge, or do not fully understand the statements below you must notify a TGRA licensing investigator for assistance and clarification.

I acknowledge that:

I do not have any other criminal history required to be disclosed such as arrests or detainments, with any law enforcement agency (City, County, Tribal, State, or Federal) or court cases on record of deferred sentencing, dismissed, dropped or Nolle Prosequi in tribal courts or in <u>ANY</u> other Court of Jurisdiction other than what is listed on my gaming license application.

I understand that the phrase "I did not remember " or "I just plain forgot" will not be accepted as an excuse for failing to reveal criminal history.

I understand that the burden of proving my suitability to hold any license is at all times mine alone. I will obtain and provide any required documents requested by the Pueblo of Laguna TGRA within the specified time allotted.

I certify that a representative of the Pueblo of Laguna TGRA is available to review this gaming license application with me. I also acknowledge that I have answered all sections in good faith with the full knowledge that I can be denied a Gaming License for not being honest or for failing to disclose any criminal activity in which I have been involved as required within this application.

I state under penalty of perjury that the entire Gaming Employee License Application Form, statements, attachments, and supporting schedules are true and correct to the best of my knowledge and belief, and that this statement is executed with the knowledge that misrepresentation or failure to reveal information requested may be deemed sufficient cause for the refusal to issue a gaming license by the Tribal Gaming Regulatory Authority. Further, I am aware that later discovery of an omission or misrepresentation made in the above statements may be grounds for the denial of gaming license or the revocation of the license. I am voluntarily submitting this application to the Tribal Gaming Regulatory Authority under oath with full knowledge that I may be charged with perjury or other crimes for the intentional omissions and misrepresentations pursuant to federal, tribal and other applicable law. I further consent to any background investigation necessary to determine my present and continuing suitability and this consent continues as long as I hold a Gaming License, and for 90 days following the expiration or surrender of such license. I also agree that the Tribal Gaming Regulatory Authority, its officers and designee, shall be entitled to collect from me all expenses incurred in recovery of any debt created by this license application, or in pursuing any other remedy provided by law, including but not limited to reasonable attorney fees and costs.

By my signature below, I have read and understand the Full Disclosure and Assurances above:

Applicant Signature

Print Name

TGRA Representative Signature

Date

Date

Print Name



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PRIVACY ACT AND FALSE STATEMENT NOTICES

1. In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 25 U.S.C. 2701 et seq. The purpose of the requested information is to determine the eligibility of individuals to be granted a gaming license. The information will be used by the Tribal Gaming Regulatory Authorities and by the National Indian Gaming Commission (NIGC) members and staff who have need for the information in the performance of their official duties. The information may be disclosed by the tribe or the NIGC to appropriate Federal, Tribal, State, Local or Foreign law enforcement and regulatory agencies when relevant to civil, criminal or regulatory investigations or prosecutions or when pursuant to a requirement by a tribe or the National Indian Gaming Commission in connection with the issuance, denial, or revocation of a gaming license, or investigations of activities while associated with a tribe or a gaming operation. Failure to consent to the disclosures indicated in this notice will result in a tribe's being unable to license you for a primary management official or key employee position. *The disclosure of your Social Security Number (SSN) is voluntary. However, failure to supply a SSN may result in errors in processing your application.*

2. This privacy act statement is located on the back of the FD-258 fingerprint card. (03/30/2018)

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

3. <u>False Statement Notice</u>. A false statement on any part of your license application may be grounds for denying a license or the suspension or revocation of a license. Also, you may be punished by fine or imprisonment (U.S. Code, Title 18, and Section 1001).

I have read and understand these Notices:

Applicant Signature

Date

Print Name



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Noncriminal Justice Applicant's Privacy Rights (FBI Update 11/06/2019)

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing. ¹ These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulations (CFR), 50.12, among other authorities.

- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared, or retained.²
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your FBI criminal history record (if you have such a record).
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the FBI criminal history record.
- If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at https://www.fbi.gov/services/cjis/identity-history-summary-checks and <a href="https://www.fbi.gov/services/cjis/
- If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI by submitting a request via https://www.edo.cjis.gov. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.³

By my signature below, I have read and understand the Noncriminal Justice Applicant's Privacy Rights:

Applicant Signature

Print Name

TGRA Representative Signature

Date

Date

Print Name

² https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement

³ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).

¹ Written notification includes electronic notification, but excludes oral notification.



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NOTICE – BACKGROUND INVESTIGATION

In connection with your licensure from the Pueblo of Laguna Gaming Control Board and Tribal Gaming Regulatory Authority ("TGRA"), notice is hereby given that a consumer report and/or investigative consumer report may be obtained from a consumer reporting agency for employment purposes. TGRA uses two Companies, currently AmericanChecked, Inc. and Truescreen Inc., to obtain some or all of these reports, which may contain information about your character, general reputation, personal characteristics, and mode of living, whichever are applicable. They may involve personal interviews with sources such as your neighbors, friends or associates. The reports may also contain information about you relating to your criminal history, credit history, driving and/or motor vehicle records, education or employment history, or other background information.

You have the right, upon written request made within a reasonable time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report prepared by contacting TGRA. You may also directly contact AmericanChecked at 4870 South Lewis Ave., Suite 120, Tulsa, OK. 74105 or 1-800-975-9876 or Truescreen at PO Box 541, Southampton, PA 18966 or 1-800-260-1680. For information about AmericanChecked Inc. privacy practices, see http://americanchecked.com/privacy-policy and for Truescreen Inc., see http://www.truescreen.com/privacy-policy/. The scope of this notice and below authorization is not limited to the present and, if you are licensed, will continue throughout the course of your licensure and allow TGRA to conduct future screenings for review or renewal of your license as permitted by law and unless revoked by you in writing. Note that under certain circumstances and as permitted by law, some of the information contained in the reports may be shared with federal, tribal, and state gaming regulatory agencies.

ACKNOWLEDGEMENT AND AUTHORIZATION

By signing below, I hereby authorize the obtaining of consumer reports and/or investigative consumer reports by the Company at any time after receipt of this authorization and throughout the course of my employment, if applicable.

Applicant Signature

Date

Print Name