## SILETZ TRIBAL GAMING COMMISSION

## APPLICATION FOR RENEWAL OF GAMING LICENSE

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Las	t Name	First Name	Full Middle Name	Date		
Physical and Mailing Address				Social Security Number		
				Driver's License # & State		
City, State, Zip Code				Telephone Number		
Date of Birth		Position	Department	Email Address		
SECTION A						
Answer Yes or No to the following questions. If YES is answered to any question, furnish complete details in section B (page 2).						
	1. Within the last year have you been questioned, arrested, detained, charged, indicted, or summoned by any law enforcement agency to answer for any criminal offense or violation for any reason whatsoever, regardless of the disposition of the event (except for minor traffic citations)?   Yes  No					
2.	Within the last year has a criminal indictment, information, or complaint ever been returned against you, but for which you were not arrested or in which you were named as an un-indicted co-party?  Yes No					
3.	Within the last year have you been questioned by a city, state, federal, or other law enforcement agency, commission, or committee (except for the Siletz Tribal Gaming Commission)?   Yes  No					
4.	Within the last year have you been subpoenaed to appear or testify before a federal, state, or county grand jury, board or commission?   Yes  No					
5.	Within the last year have you had a civil or criminal record expunged or sealed by a court order?   Yes  No					
6.	. Within the last year have you received a pardon for any criminal offense?   Yes   No					
7.	. Within the last year have you been the subject of any civil or criminal order, judgment, or decree of any court?   Yes No					
8.	Within the last year have you, as an individual, member of a partnership, or owner, director, or officer of _a corporation, ever been a party to a lawsuit as either a plaintiff or defendant (include bankruptcies)?    Yes   No					
9.	Within the last ve	ear have vou changed	vour mailing address or	telephone number?  Yes  No		

## APPLICATION FOR RENEWAL OF GAMING LICENSE (CONTINUED)

SECTION B				
Details:				
I certify that all the statements made in this document are true, complete to the best of my knowledge and belief and are made in good faith. I am aware that the Siletz Tribal Gaming Commission may conduct an investigation to determine my suitability for a Siletz Tribal Gaming License.				
I authorize and grant my consent to provide any law enforcement agency and any such person, business or agency deemed necessary to release information to the Confederated Tribes of Siletz Indians of Oregon, Siletz Tribal Gaming Commission, or it's designated representative.				
Signature & Employee Number	Print Name			