| Full Name: | License #: |
|------------|------------|
| | |
| Hire Date: | |

BAY MILLS TRIBAL GAMING COMMISSION

RETURNING EMPLOYEE PERSONAL HISTORY DISCLOSURE FORM

Employee Gaming License Application

BAY MILLS GAMING COMMISSION Ogimaag-Gamig Governmental Center 12140 W. Lakeshore Dr./Brimley, MI 49715 Phone (906) 248-3241 Fax (906) 248-8535 Extensions 8531, 8532, or 8533

| The information contained in this form is fro | om throught Last Effective Date | n Current Date |
|---|---------------------------------|----------------|
| ******** Second Appoint | ment with Compliance | ***** |
| Date: | Time: | _ |
| With: | | _ |

INSTRUCTIONS FOR THE RETURNING PERSONAL HISTORY DISCLOSURE FORM

This form is to be completed by any person who wishes to apply for a Key Employee/Primary Management Gaming License.

The answers in this form will start from the last date of your termination.

Read each question carefully and answer them completely and truthfully. Do not leave any spaces blank. If a question is not applicable to you write "NA" on the line.

All entries on this form, except signatures, must by typed or printed in ink. If your form is not legible, it will not be accepted.

If you need additional space to answer any questions, use the Continuation Sheet. Be sure to indicate the section and question number you are answering. (Attach additional sheets if necessary.)

Please attach a copy of the following documents to this form if not already in your file:

- a) Drivers License or State ID
- b) Tribal Card if applicable
- c) Naturalization papers if applicable
- d) DD-214 if applicable
- e) Social Security Card *The disclosure of your Social Security Number (SSN) is voluntary; however, failure to supply a SSN may result in errors in processing your application.*

All persons completing this Returning Personal History Disclosure Form must be fingerprinted by the agencies appointed by the Bay Mills Gaming Commission.

- a) Fingerprints submitted will be used to check the criminal history records of the FBI.
- b) Procedures for obtaining a copy of FBI criminal history record are set forth at Title 28, Code of Federal Regulations (CFR)2, Section 16.30 through 16.33 or go to the FBI website at http:fbi.gov/about-us/cjis/background-checks
- c) Procedures for obtaining a change, correction, or updating of an FBI criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34

The original Personal History Disclosure Form must be submitted to the Compliance Department. We recommend that you keep a copy of this form for your records.

This form is maintained as a confidential document and will be destroyed 5 years after applicant leaves employment.

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, section 1001).

All Temporary/Provisional Licenses are issued on a CONDITIONAL BASIS ONLY, pending an investigation of the applicant's background.

The Bay Mills Gaming Commission has the ultimate authority to grant, deny, suspend, revoke or terminate an employee gaming license.

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NOTICE & AGREEMENT

- 1. I have read, and I understand the following false statement notice:

 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, section 1001).
- 2. I have read, and I understand the following Privacy Act notice:

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 members and staff who have need for the information in the performance of their official duties. The information may be disclosed 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.

- 3. I hereby swear that I will abide by all applicable laws, regulations and policies of the Bay Mills Indian Community and the United States.
- 4. I understand that my employee gaming license will expire on an annual basis, and I understand it is my responsibility to submit a gaming license renewal form 2 weeks prior to my gaming license expiration date.
- 5. I understand and agree that failure to report any changes regarding my Personal History Disclosure Form and/or Renewal Application for an employee gaming license may result in the suspension or termination of my employee gaming license.
- 6. I understand that termination of key employee/primary management official status by my employer, or by my resignation, will terminate my employee gaming license. Subsequently, if I apply for a new gaming license I will occur a \$10.00 license fee.
- 7. I understand that there will be a \$10 fee to replace a lost or stolen gaming license.
- 8. I understand that the gaming license is at all times the property of the Bay Mills Gaming Commission and there will be a \$10 fee if I don't return my gaming license in at the termination of my employment as a key employee/primary management official.
- 9. I hereby swear that I will submit to the jurisdiction of the Tribe and the Bay Mills Tribal Court, if employed.
- 10. I agree to be photographed as part of my application for employment.
- 11. I agree to be fingerprinted by law enforcement agencies appointed by the BMIC Gaming Commission.
- 12. I hereby swear that all of the information contained herein is true and correct to the best of my knowledge, information and belief and that I have withheld nothing.
- 13. A swear that neither myself nor any member of my immediate family has a past or current financial interest, other than a salary interest, in any gaming-related enterprise anywhere. If the applicant has any relative who has such a relationship, the applicant shall fully disclose his name and the nature of the relationship.

| Signature | Date | |
|-----------|------|--|
| | | |
| | | |
| | | |
| Witness | Date | |

T. Personal Information Last Name: First Name: Middle: _____ Maiden/other names used: _____ DOB: ______ SSN: _____ Citizenship: _____ Driver's License #: ______ Sex: _____ Phone # (____) ____ Current Position: _____ Location: ____ Bay Mills Member: Yes / No Native American: Yes/ No Tribal Affiliation: II. Residences List all addresses below that you lived at since you left employment from Bay Mills, starting with current. At each address list a reference that was acquainted with you. Street Address City State Zip From: Month/Year _____ To: Month/Year _____ Last Name _____ (____)____ Telephone Number First Name s City Street Address Zip From: Month/Year To: Month/Year Reference: ______ Last Name City Street Address From: Month/Year _____ To: Month/Year _____ Reference: _____

Please list any individual residing in your household. Please specify if they are involved in Gaming. (Employee of casino or casino establishment, restaurant, hotel, etc.)

| 1. | | 3. | |
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| 2 | | 4 | | | |
|------------------|----------------------|-------------------------|----------------------|-------------|-----------------|
| III. Family In | formation | | | | |
| | | es in family informatio | on (due to marriage. | divorce, bi | rth, etc.) list |
| | de: Step, half and i | | (0.0.0 00 | | , |
| • | • • | | | | |
| 1. | | | | | |
| Full Name | Including Maiden | | Relationship | | |
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| | | | | | |
| Street Address | | City | Sta | ite Z | ip |
| 2 | | | | | |
| Full Name | Including Maiden | | Relationship | | |
| i uli Nairie | including Maluen | | Relationship | | |
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| Street Address | | City | | ate Z | ip |
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| 3 | | | _ | | |
| Full Name | Including Maiden | | Relationship | | |
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| Street Address | | City | Sta | ate Z | ip |
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| 4 | Including Maiden | | Relationship | | |
| i dii Nairie | including Maluen | | Relationship | | |
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| Street Address | | City | | ate Z | ip |
| | | • | | | |
| IV. Personal F | References (Wh | o are not related to | vou) Contact with a | a minimur | m of three |
| references is re | | | , , | | |
| | 4 | | | | |
| 1. | | | (|) | |
| First Name | | Last Name | Telep | hone Numbe | er |
| | | | | | |
| | | | | _/ | _ |
| Street Address | | City | | State | Zip |
| _ | | | , | | |
| 2 | | Last Name | (| <u> </u> | |
| First Name | | Last Name | reiep | hone Numbe | er |
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| Street Address | | City | | State | Zip |
| on eet maaress | | City | | Juic | - 'P |
| 3 | | | (|) | |
| First Name | | Last Name | Telep | hone Numbe | er |

| Street Address | | City | / | State | Zip |
|---|----------------------|-------------------------|------------|--------------|-----------------|
| 4. | | | (|) | |
| First Name | Last Na | me | Teleph | one Numbe | r |
| Street Address | | City | | State | Zip |
| 5 | | | (|) | |
| First Name | Last Na | me | Teleph | one Numbe | r |
| Street Address | | City | | State | Zip |
| V. Employment | | | | | |
| A. Were you ever an emp | loyee of an Indian T | ribe? Yes | No | | |
| B . Have you ever had pas | t employment with a | a Gaming Business? | Yes _ | No | |
| C. Starting with your curre room is needed, use contin | | jobs held during your s | eparation | ı from Bay | / Mills. If mor |
| 1. | | | | (|) |
| Company Name | | Position Held | | Telepho | ne Number |
| Street Address | City | | State | Zip | |
| Supervisor: | | (Month/Year) From:_ | | _ To: _ | |
| | | | | . (|) |
| Company Name | | Position Held | | - | ne Number |
| Street Address | City | | State | Zip | |
| Supervisor: | | (Month/Year) From:_ | | _ To: _ | |
| VI. Military Informati | <u>on</u> | | | | |
| A. Have you ever served i | n the Armed Forces | ?YesNo If ye | es, provid | le the follo | owing: |
| Branch: | Locat | tion: | | Date: | |
| Congration Date: | Type of Disc | chargo | Dogge | n. | |

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| B . While in the military were you ever a special or general court martial?Y | | | - | | | | ary action, or |
|---|-----------------------|----------|---------|----------|--------------|-------------|-----------------|
| C . While in the military, were you ever odetails. | charged v | with an | Article | 15? | Yes | No | If yes, furnish |
| ** If you are unsure about your answe Compliance Department for assistance. | | | | | | | |
| VII. Arrests, Convictions, or Civ | il Actio | <u>n</u> | | | | | |
| A . Since leaving our employment, have summoned to answer questions for any theft crime for any reason whatsoever, | felony ga | ambling | related | d offens | se, fraud, | misrep | |
| 1. Charge: | | Da | te: | | | | _ |
| Court Name: | | City/ | State: | | | | |
| Outcome: (Convicted, dismissed, Noli Prosequent) | [ui, etc.) | Date O | f Final | Dispos | ition: | | |
| B . Since leaving our employment, have summoned to answer questions for any | • | | | - | | ged, ind | icted, or |
| 1. Charge: | C | ourt Na | ame: _ | | | | |
| City, State and County | | | | | ate Of Final | Dispositi | on |
| 2. Charge: | C | ourt Na | ame: _ | | | | |
| City, State and County | | | | Da | ate Of Final | l Dispositi | on |
| C . Since leaving our employment, haveNo If yes, provide the following. | you ever | been ii | nvolved | l in any | civil litiga | ation? _ | Yes |
| 1. Case Name: | | | (| Case N | umber: _ | | |
| Date: Out Com | ie: | | | | | | |

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| Court Name: | | | | | |
|--|---------------------------|-------------|-------------|-------------|------|
| D. Since leaving our employment, have provide the following: | you ever filed for bankro | uptcy? | _Yes | _No If yes, | |
| Chapter: | Year: | _ Why: | | | |
| E. Since leaving our employment, has the No If yes, please explain: | nere been any negative a | activity on | your credit | : history? | _Yes |

Continuation Sheet for any Section

| | Additional | Information: |
|----------|------------|--------------|
| | | Information: |
| | | |
| | | Information: |
| Section: | Additional | Information: |
| | | Information: |
| Section: | | Information: |
| Section: | Additional | Information: |
| | | |

RELEASE OF INFORMATION

I understand that the information I supplied in my Renewal Application Form for an Employee Gaming License will be used by the Bay Mills Gaming Commission to request any documents or other information required to completely investigate my background, including but not limited to, my criminal history record, civil litigation records, credit history, education, employment history, including personal references or any other information the Bay Mills Gaming Commission or their agents deems necessary. I authorize any information to be released to the Bay Mills Gaming Commission and agents thereof.

| Signature | Date | |
|-----------|------|--|
| | | |
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| | | |
| Witness | Date | |