Support Occupational License Application 3-Year

Please Check: Horse OTB Location Minor

Application Instructions and Requirements

Apply and Submit Application: To apply for a Support Occupational License, applicants must complete this application in its entirety. Be aware that there is a significant amount of information needed for this application and it may not be submitted without all the required information. Some highlights of the application to be prepared for are as follows:

- **Provide Identification:** Applicants must show a valid driver's license with photo, State identification, Passport or certified copy of your birth certificate.
- **Submit Fingerprints:** Fingerprints submissions are required for all new license applications, and every subsequent six years or second renewal application. See forthcoming Verification of Fingerprints section for more details on submission.
- Thoroughbred HISA Registration: Applicants involved with the training and/or handling of covered (Thoroughbred) horses must be registered with the Horseracing Integrity and Safety Authority (HISA) as a covered person. Submission of HISA registration number will be required for this application. To complete said registration visit <u>https://www.hisaus.org/</u>. Entry of a Division license number will be required for registration so applicants without a current license number please contact the Division to be assigned one.
- W-9 Submission: Applicants with a Horseman's Account must submit a W-9 (Request for Taxpayer Identification Number and Certification) form. The form can be found at <u>https://www.irs.gov/pub/irs-pdf/fw9.pdf</u> or can be provided by the Division upon request. Note -This form will be given to the Horseman's Bookkeeper and Will Not Be retained by the Division.
- Payment Fee: Applicants must submit payment of licensing fees. Payment can be made in the form of check or credit/debit card through licensing staff. NO CASH payments accepted. Costs are as follows: \$30.50 New License \$20.00 Renewal Additional Fees: \$39.50 Fingerprints \$4.00 CBI Name Check
- **Under 18:** For applicants less than 18 years of age, please contact the licensing section at 303-619-2696 for further information.
- **Criminal and Racing History:** Applicants will be required to input specific details about their criminal history and regulatory history related to racing and gaming industries.
- **Related Business Information:** If this application is related to a Division of Racing Events business license the applicant will be required to input details of their relationship to said business.

Disclaimer:

All applicants are advised that this application and its information constitute an official document and that misrepresentation or failure to provide information requested may be deemed sufficient cause for the denial, suspension, fine, or revocation of a license.

Failure to fully complete this application may result in the application not being processed, being returned to the applicant for completion, or may result in denial of a license.

All applicants are further advised that an application for a racing license may not be withdrawn without the permission of the Colorado Division of Racing Events.

This application has been designed to allow the Division to determine your suitability for licensure. However, the Division's investigation may require you to submit additional information in support of your application. Any additional information requested must be provided in a timely manner or your application for license may be denied.

License fees are nonrefundable.

Some license types may require interviewing or testing. For those licenses requiring fingerprints, tests and interviews, they must be completed prior to submission of the application.

Verification of Fingerprints

Fingerprints submissions are required for all new license applications, and every subsequent six years or second renewal application. If the applicant falls in either of those categories they will need to have completed their fingerprints submissions prior to but no more than sixty days in advance of completing this application. If the applicant is not required to submit fingerprints, skip to the Applicant Information section.

The below options are different avenues by which an applicant can get their fingerprint submissions completed either in-person or by mail. Please read through and utilize the best option.

Colorado Fingerprints (CABS):

Colorado Applicant Background Services can be completed in-person through the vendor Colorado Fingerprinting. They have a number of locations throughout Colorado for use in the process. To utilize this service please follow the instructions below. If the applicant is not located in Colorado or cannot visit a site in-person, please reference the forthcoming Mail-in Physical Fingerprinting Card section.

- 1. Online Registration Register through the online Enrollment Center at *www.coloradofingerprinting.com*.
- **2.** Select Location and Time During the enrollment process choose a convenient location, day and time for your appointment.
- 3. CBI Unique Code Utilize the following CBI Unique Code in scheduling your appointment: 0500RCMI
- 4. Payment Select your method of payment.
- **5.** Confirmation Receive your appointment confirmation with your number which is delivered by both text and email.
- 6. Fingerprinting Go to the fingerprint location at your scheduled time. Provide the Order Number to the enrollment agent along with your government issued photo ID (drivers license, state issued ID, US passport or foreign-issued passport). Your live scan fingerprints, digital photo and digital signature are then captured and submitted to CBI.
- 7. Results The results are returned to CBI authorized agencies.
- **8.** Status You can login to the Enrollment Center at any time to see the status of your fingerprint submission to CBI.
- **9.** Division Use The Division will retrieve the fingerprint results from the system for use with the application process.

Please contact 720-292-2722, toll free 833-224-2227 or email info@coloradofingerprinting.com if you have any questions or need assistance.

IdentoGO:

Fingerprinting services can be completed in-person through the vendor IdentoGO. They have a number of locations throughout the United States for use in the process. To utilize this service please follow the listed instructions. If the applicant is unable to find a location or utilize an in-person appointment, please utilize the forthcoming Mail-in Physical Fingerprinting Card section.

- To schedule your appointment, visit <u>https://uenroll.identogo.com</u> and enter the following service code: 25YGHY
- When prompted, please enter the following CBI Unique Code number: **0500RCMI**
- Bring an official government issued ID to your enrollment appointment.

If you are unable to utilize the internet to make an appointment you may still schedule an appointment by calling 844-539-5539

Mail-in Physical Fingerprinting Card: If located out of state and utilizing an in-person location is not possible, please contact a local law enforcement/government agency about having official fingerprint cards completed. Completed cards would then need to be delivered to one of the two fingerprint vendors listed prior.

Contact those vendors for directions on card type and how to complete the mail-in process. Do not send fingerprint cards to the Division of Racing Events.

Please note that mailed fingerprint cards could significantly delay the application approval process.

Applicant Information

Type of Support License

If you require multiple licenses, such as Owner and Trainer, please identify all license types.

Animal Tattooer	Director of Simulcasting	OTB Manager	Plater
Apprentice Jockey	Exercise Rider	Outrider	Pony Person
Assistant Mutuel Manager	Groom	Owner	Private Veterinarian
Assistant Racing Secretary	Horse Person's Bookkeeper	Video Operator	Security Guard
Assistant Starter	Horse Identifier	Owner/Assistant Trainer	Stable Supervisor
Assistant Trainer	Jockey	Owner/Trainer	Starter
Authorized Agent	Jockey Agent	Paddock Judge	Tote Operator
Clerk of Scales	Money Room Manager	Photo Operator	Trainer
Clocker	Mutuel Employee	Placing Judge	

Other:

Is this application related to a Division of Racing Events business license(s)?	Yes	No
If you answered yes please provide business trade name and license number		

Personal and Conta	act Information			
Legal Last Name	Legal First Name		Name	Legal Middle Name
Maiden Name				
Other Name(s), Alias((es), Nicknames(s) Us	ed		
Email Address				
Business Phone	Cell Pho	ne	Social Security Number	Date of Birth (MM/DD/YY)
Gender	Hair Color	Eye Color	Height (in feet & ind	ches) Weight (in pounds)
Driver's License Num	ber	D	river's License State	
Mailing Address for	r service of all pape	ers and notices		
Street Address				
City	State	County	ZIP Code	Country
Local Address duri	ng meet (if applical	ole)		
Street Address				
City	State	County	ZIP Code	Country
Division of Racing	Events Connection	s		
Do you have any	relatives who are e	employees of th	e Division of Racing Even	ts? Yes No
If you answered yes p	please provide addition	nal information		

In case of emergency please notify

Name

Phone Number

Thoroughbred Horse Contact (HISA Registration)		
Will you be involved with the handling or training of thoroughbred horses?	Yes	No
If you answered yes then HISA registration is required. Please provide HISA registration number		
Horseman's Account (W-9)		
Does the applicant have a Horseman's Account with Bally's Arapahoe Park?	Yes	No
If you answered yes then a W-9 (Request for Taxpayer Identification Number and Certifi must be submitted with this application	cation) fo	rm
Background Information		
Reminder: Providing false information on this application may result in denial, revoc other disciplinary action. Be detailed in your answers as omission could affect licens		/al.
Within the last ten years, have you had contact with law enforcement (been arrested, cited, charged with a crime)?	Yes	No
If you answered yes please provide additional information		
Within the last ten years, have you been convicted, entered a plea of guilty or no contest, forfeited bail, or been fined for any criminal offense, either felony, misdemeanor, petty offense, or local ordinance?	Yes	No
Within the last ten years, have you had any other Colorado licenses (including Driver's License) denied, or revoked or suspended?	Yes	No
If you answered yes please provide additional information		

Background Information (continued)		
Are you delinquent in the payment of any taxes, interest, penalties or judgments owed to the State of Colorado?	Yes	No
If you answered yes please provide additional information		
Within the last ten years, have you been placed under or on court supervision, probation or parole?	Yes	No
If you answered yes please provide additional information		
Are you delinquent in payments for child support?	Yes	No
If you answered yes please provide additional information		
License History		
Are you presently licensed, or have you been licensed within the last five (5) years by any racing or gaming jurisdiction, including Colorado?	Yes	No
If so, please provide jurisdiction		
Have you ever been convicted of any gambling related offense?	Yes	No
If you answered yes please provide additional information		
Has your racing or gaming license ever been denied or revoked?	Yes	No
If you answered yes please provide additional information		

License History (continued)

Have you been placed under suspension for more than 7 days, or are you currently under suspension or the subject of any alleged rule violation in this or any other racing or gaming jurisdiction?	Yes	No
If you answered yes please provide additional information		
Have you ever been ruled off, suspended, or discharged for cause, or denied the privileges of a racetrack or gaming facility, by any commission or board?	Yes	No
If you answered yes please provide additional information		
Owner Information (Owners Only)		
Name of employed Trainer(s)		
Email Address		
Will you be racing under a Stable name?	Yes	No
If yes please provide Stable name		
Tracks currently running at		

Corporation / LLC Instructions

All persons involved in a partnership must obtain an owner's license. For corporations, only one corporate officer must obtain an owner's license and the authorized agent must be licensed. For LLC's, at least one managing partner and an authorized agent must be licensed. Written notice must be given to the Colorado Racing Commission prior to any change in ownership.

Are you a part of a racing corporation, partnership, or limited liability company?	Yes	No
If yes, you must provide a Corporation/Partnership/Stable Name Form with this application	on.	
Do you have an Authorized Agent?	Yes	No
If yes please provide Agent's name		

Owners who appoint an Authorized Agent must provide him/her with an Affidavit of Appointment stating the authority of the agent.

I attest that I own racing animals which will run in Colorado.

Signature		Date (MM/DD/Y	YYY)
Jockey Information (Jockey/Appren	ntice Jockey Only)		
Do you have an Authorized Agent If yes then please complete and submit	t? Jockey Agent Form (DR 9073E).	Yes	No
Agent's Name	Email Address		
•	a Jockey or Apprentice Jockey in Colorado or any		No
Dates licensed	State(s) Las	t date raced	
and approvals are required. Inquire with	en licensed and in good standing within the last three year licensing staff or Stewards about New Jockey Application		-
Note: A physical examination by a	licensed physician is required within 30 days of th cate of Physical (DR 9032) must be completed an		th
this application.		Date (MM/DD/Y	
When was your last baseline con	cussion test performed?		
Apprentices Only			
Have you ridden a winning horse	(s)?	Yes	No
If so, please provide number of winning	horses ridden		
For your first winner, provide winning tra	ick name	Date (MM/DD/Y	YYY)
Trainer Information (Trainer/Assista	ant Trainer Only)		
Have you previously had a Traine	er/Assistant Trainer's License?	Yes	No
Where?	What year(s)?		

If you answered no or your previous license has been expired for more than three years, additional testing and approvals are required. Inquire with licensing staff or Stewards about New Trainer's License Application (DR 9061).

Note: Trainers employing an Assistant Trainer must complete and submit an Assistant Trainer Acceptance Form (DR 9067E).

Certification

By accepting any license issued pursuant to this application, I agree to be familiar with and comply with the pro-visions of the Colorado Racing Commission's regulations pertaining to racing (which may include "for cause" or random drug and alcohol testing), and laws of the United States and the State of Colorado, and the subdivisions thereof. I consent to allow personnel of the Division of Racing Events or authorized law enforcement agents to search, without warrant, my person, personal property, vehicle(s), and other work premises while within the racetrack, simulcast facility, other licensed premises, or any adjacent related facilities and premises thereto, pursuant to Commission rules. I understand that any investigation and any information submitted regarding this application are subject to the Open Records Act of Colorado, and I hereby waive any right of confidentiality. I authorize all reporting agencies and other law enforcement agencies to release to the Commission, the Division, or its agents, any information requested by them for completion of the background investigation and processing of this application. I consent to the release of the information contained in my application to law enforcement agents of this or any other state, or the U.S. government; and I understand that providing false information or failing to provide complete information on this application will justify either the Commission or the Division to assess a fine, refuse to issue, deny, suspend, revoke my license, or institute other disciplinary action. I understand that my fingerprints will be used to check the criminal history records of the Colorado Bureau of Investigation (CBI) and the Federal Bureau of Investigation (FBI). In consideration for any of the investigatory agencies releasing any information concerning me contained within criminal history record files to either the Commission or the Division, or to each other, I, on behalf of myself, my spouse, legal representatives, heirs, and assigns, hereby release, waive, discharge and agree to hold harmless the Commission, the Division, investigating agencies, their officers and employees, from all liability for any claim of damage resulting from this information. I understand and agree that any license I receive from the Division, issued pursuant to this application, shall be temporary and conditioned upon the Division rendering a final determination on my suitability to receive permanent licensure. Any limitation or condition upon my temporary licensure does not constitute a final determination, and is not appealable until I receive such a final determination from the Division. Until I receive such a final determination from the Division, I agree and consent to the license being summarily denied upon demand and notice provided to my address noted herein, subject only to my right to appeal such action to the Commission. All license badges remain the property of the Division, and shall be returned upon demand by either the Commission or the Division. I understand that all license and application fees are nonrefundable whether or not I am approved for licensure.

I certify under penalty of perjury that the statements and answers I have provided in this application are complete and true and that no material facts or information relevant to qualification have been omitted.

For a challenge of Colorado state CHRI a subject of a record can do a record challenge at Colorado Bureau of Investigation. (For information on this procedure go to the website, <u>https://cbi.colorado.gov/sections/biometric-identification-and-records-unit/identity-theft-and-mis-identification</u>). You can also take your dispute directly to the arresting agency. The subject of a record may also direct his/her challenge as to the accuracy or completeness of any entry on his/her record to the FBI, Criminal Justice Information Services (CJIS) Division, ATTN: SCU, Mod. D-2, 1000 Custer Hollow Road, Clarksburg, WV 26306.