

License Clerk - WI

License Application



Phone: 304.231.1778

Fax:

2019



Section 1	Section 2
Soc Sec # or Tax ID # _____	Address _____
Name _____	City _____
Date of Birth / / _____	State _____ Zip _____
Trainer / Employer _____	Phone # _____ Cell # _____
Stable Name _____	Partners _____
Identification: Sex _____ Age _____ Color: Hair _____ Color: Eyes _____ Height _____ ft. _____ in. Weight _____	

Questions a-h must be answered "yes" or "no"

a. Has you or your spouse's racing license ever been denied, suspended for more than 7 days, or revoked ?	Yes	No
b. Has any other type of license or permit of you or your spouse ever been suspended, denied, or revoked ?	<input type="checkbox"/>	<input type="checkbox"/>
c. Have you ever been expelled, discharged, or ejected from any race track or fined more than \$100.00 ?	<input type="checkbox"/>	<input type="checkbox"/>
d. Have you or your spouse ever been convicted of, or forfeited bail on, any felony or misdemeanor criminal offense ? (Including DUI or DWI)	<input type="checkbox"/>	<input type="checkbox"/>
e. Are there any criminal charges currently pending anywhere against you or your spouse ?	<input type="checkbox"/>	<input type="checkbox"/>
f. Are you or your spouse currently on parole or probation ?	<input type="checkbox"/>	<input type="checkbox"/>
g. Are there any outstanding civil judgements against you or your spouse ?	<input type="checkbox"/>	<input type="checkbox"/>
h. Do you have or, have you had a valid GREYHOUND LICENSE at any other racetrack ?	<input type="checkbox"/>	<input type="checkbox"/>
i. Are you a United States citizen ?	<input type="checkbox"/>	<input type="checkbox"/>

If NO, Citizenship _____ Visa # _____

For a through h above, for each "yes" above, you must provide full details on back of this application. Expiration _____

I hereby certify that I have read the foregoing application and affirm that every statement contained therein is true and correctly set forth, and I do hereby assert and agree, as a condition precedent to the receiving of said license, that the same may, at any time, be summarily revoked, canceled or suspended, or withdrawn.

I authorize the West Virginia Racing Commission or it's designated agent to investigate my background to determine my eligibility for a license as per the West Virginia Rules of Racing.

I authorize any company, organization, educational or health care institution or law enforcement agency to release any personal records, medical records, educational records, credit history records, criminal history records, or other such documentation to the West Virginia Racing Commission or it's authorized agent.

NOTE: Trainers and Businesses need copy of Workers' Compensation	State & Year Last Fingerprinted: State: _____ Year: _____	Return to: WVRC License Clerk - Wheeling Island Casino & Resort 1 Stone Street Wheeling WV 26003
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Section 3			Signature of Applicant	Date
Please mark the license(s) you are requesting today				
<input type="checkbox"/> 104 A	ADMIN. ASST SEC	\$20.00	<input type="checkbox"/> 228 A	F&B SERVER \$20.00
<input type="checkbox"/> 29 B	ADOPTION CENTER	\$20.00	<input type="checkbox"/> 229 A	F&B STAND ATTEN \$20.00
<input type="checkbox"/> 30 O	ANNOUNCER	\$20.00	<input type="checkbox"/> 117 B	FEED STORE \$20.00
<input type="checkbox"/> 243 B	ASST KENNEL MAS	\$20.00	<input type="checkbox"/> 12 B	FILM, PATROL \$20.00
<input type="checkbox"/> 27 O	ASST RACING SEC	\$20.00	<input type="checkbox"/> 115 A	FINANCE \$20.00
<input type="checkbox"/> 235 A	BARTENDER	\$20.00	<input type="checkbox"/> 114 A	FOOD & BEVERA \$20.00
<input type="checkbox"/> 21 O	BOXMAN	\$20.00	<input type="checkbox"/> 125 A	HARD/SOFT COUNT \$20.00
<input type="checkbox"/> 20 O	BRAKEMAN	\$20.00	<input type="checkbox"/> 57 A	HOTEL/ SUPERVIS \$20.00
<input type="checkbox"/> 221 A	CAGE CASHIER	\$20.00	<input type="checkbox"/> 58 A	HOTEL/BELLHOP \$20.00
<input type="checkbox"/> 240 A	CAGE MGT	\$20.00	<input type="checkbox"/> 51 A	HOUSEKEEPING \$20.00
<input type="checkbox"/> 121 A	CAGE SUPERVISOR	\$20.00	<input type="checkbox"/> 118 A	HUMAN RESOURCE \$20.00
<input type="checkbox"/> 22 O	CHART WRITER	\$20.00	<input type="checkbox"/> 225 A	IT \$20.00
<input type="checkbox"/> 116 A	CLEANING ATTEND	\$20.00	<input type="checkbox"/> 225 B	IT \$20.00
<input type="checkbox"/> 19 O	CLERK OF SCALES	\$20.00	<input type="checkbox"/> 13 O	JUDGES \$30.00
<input type="checkbox"/> 236 A	COCKTAIL SERVER	\$20.00	<input type="checkbox"/> 25 B	KENNEL HELPER \$20.00
<input type="checkbox"/> 124 A	CONTROLLER	\$20.00	<input type="checkbox"/> 26 O	KENNEL MASTER \$20.00
<input type="checkbox"/> 231 A	COOK	\$20.00	<input type="checkbox"/> 1 B	KENNEL NAME \$40.00
<input type="checkbox"/> 2 B	CORPORATION	\$40.00	<input type="checkbox"/> 56 A	LAUNDRY \$20.00
<input type="checkbox"/> 106 A	DEALER	\$20.00	<input type="checkbox"/> 23 B	LEADOUT \$20.00
<input type="checkbox"/> 31 B	DIR OF RACING	\$30.00	<input type="checkbox"/> 24 B	LURE OPERATOR \$20.00
<input type="checkbox"/> 233 A	DISHWASHER	\$20.00	<input type="checkbox"/> 223 A	MAIN BANKER \$20.00
<input type="checkbox"/> 113 A	EMS	\$40.00	<input type="checkbox"/> 224 A	MAINTENANCE \$20.00
<input type="checkbox"/> 230 A	F&B CASHIER	\$20.00	<input type="checkbox"/> 239 A	MARKETING MGT \$20.00
<input type="checkbox"/> 237 A	F&B MGT	\$20.00	<input type="checkbox"/> 242 A	MARKETING OTHER \$20.00
<input type="checkbox"/> 234 A	F&B PORTER	\$20.00	<input type="checkbox"/> 10 A	MUTUEL EMPLOYEE \$20.00
			<input type="checkbox"/> 10 B	MUTUEL EMPLOYEE \$20.00
			<input type="checkbox"/> 150 A	OTHER \$20.00
			<input type="checkbox"/> 150 B	OTHER \$20.00
			<input type="checkbox"/> 5 B	OWNER \$30.00
			<input type="checkbox"/> 15 O	PADDOCK JUDGE \$30.00
			<input type="checkbox"/> 15 B	PADDOCK JUDGE \$30.00
			<input type="checkbox"/> 232 A	PANTRY \$20.00
			<input type="checkbox"/> 17 O	PATROL JUDGE \$20.00
			<input type="checkbox"/> 11 B	PHOTO, TOTALIZ \$20.00
			<input type="checkbox"/> 226 A	PLAYER SERV REP \$20.00
			<input type="checkbox"/> 55 A	PORTER/RUNNER \$20.00
			<input type="checkbox"/> 14 O	RACING SEC. \$30.00
			<input type="checkbox"/> 54 A	RETAIL CLERK \$20.00
			<input type="checkbox"/> 105 A	REVENUE AUDIT \$20.00
			<input type="checkbox"/> 227 A	SECURITY \$20.00
			<input type="checkbox"/> 227 B	SECURITY \$20.00
			<input type="checkbox"/> 238 A	SECURITY MGT \$20.00
			<input type="checkbox"/> 109 A	SLOT ATTENDANT \$20.00
			<input type="checkbox"/> 110 A	SLOT MGT \$20.00
			<input type="checkbox"/> 111 A	SLOT TECH \$20.00
			<input type="checkbox"/> 112 A	STAGE HAND \$20.00
			<input type="checkbox"/> 18 O	STARTER \$20.00
			<input type="checkbox"/> 103 A	SURVEILLANCE \$20.00
			<input type="checkbox"/> 108 A	TABLE GAMES MGT \$20.00
			<input type="checkbox"/> 6 B	TRAINER \$30.00

License Clerk - WI

License Application



Phone: 304.231.1778

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2019



Section 1

Soc Sec # or Tax ID # _____

Name _____

Date of Birth / / _____

Trainer / Employer _____

Stable Name _____

Section 2

Address _____

City _____

State _____ Zip _____

Phone # _____ Cell # _____

Partners _____

Identification: Sex _____ Age _____ Color: Hair _____ Color: Eyes _____ Height _____ ft. _____ in. Weight _____

Questions a-h must be answered "yes" or "no"

a. Has you or your spouse's racing license ever been denied, suspended for more than 7 days, or revoked ?	a.	Yes	No
b. Has any other type of license or permit of you or your spouse ever been suspended, denied, or revoked ?	b.	<input type="checkbox"/>	<input type="checkbox"/>
c. Have you ever been expelled, discharged, or ejected from any race track or fined more than \$100.00 ?	c.	<input type="checkbox"/>	<input type="checkbox"/>
d. Have you or your spouse ever been convicted of, or forfeited bail on, any felony or misdemeanor criminal offense ? (Including DUI or DWI)	d.	<input type="checkbox"/>	<input type="checkbox"/>
e. Are there any criminal charges currently pending anywhere against you or your spouse ?	e.	<input type="checkbox"/>	<input type="checkbox"/>
f. Are you or your spouse currently on parole or probation ?	f.	<input type="checkbox"/>	<input type="checkbox"/>
g. Are there any outstanding civil judgements against you or your spouse ?	g.	<input type="checkbox"/>	<input type="checkbox"/>
h. Do you have or, have you had a valid GREYHOUND LICENSE at any other racetrack ?	h.	<input type="checkbox"/>	<input type="checkbox"/>
i. Are you a United States citizen ?	i.	<input type="checkbox"/>	<input type="checkbox"/>

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NOTE: Trainers and Businesses need copy of Workers' Compensation	State & Year Last Fingerprinted: State: _____ Year: _____	Return to: WVRC License Clerk - Wheeling Island Casino & Resort 1 Stone Street Wheeling WV 26003
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Section 3

Please mark the license(s) you are requesting today

<input type="checkbox"/> 52 A VALET \$20.00	<input type="checkbox"/> 8 B VETERINARIAN \$30.00
<input type="checkbox"/> 3 B VENDOR \$40.00	
<input type="checkbox"/> 9 B VET ASSIST \$20.00	

Signature of Applicant _____ Date _____

AFTER you complete Section 3, please give completed form to the clerk.