



License Clerk - CT

License Application

Phone: 304.724.4312

Fax: 304.725.4021



10/14/2009 18:38:12

Instructions: If you have previously received a license from this office, please complete SECTIONS 1 & 3 ONLY
 If you have never received a license from this office, please complete SECTIONS 1, 2 & 3
 If you are not sure, please complete SECTIONS 1, 2 & 3

Section 1

Soc Sec # or Tax ID # _____

Name _____

Date of Birth ____ / ____ / ____

List latest dates fingerprinted and what states fingerprinted you:

Month & Years Fingerprinted _____ In what state(s) _____

Section 2

Address _____

City _____

State _____ Zip _____

Phone # _____

Stable Name _____

Certification

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to the receiving of said license, that the same may, at any time, be summarily revoked, canceled or suspended, or withdrawn.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 its 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 its authorized agent.

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

	Yes	No
a. Has you or your spouse's racing license ever been denied, suspended for more than 7 days, or revoked ?	<input type="checkbox"/>	<input type="checkbox"/>
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 a position with the Racing Commission, racetrack, political party or in government ?	<input type="checkbox"/>	<input type="checkbox"/>

For each "yes" above, you must provide full details.

Clerk ID: 01 Donna

Signature of Applicant _____

Date _____

Section 3

Please mark the license(s) you are requesting today

<input type="checkbox"/>	\$0.00	<input type="checkbox"/>	9 A GM / ASST GM	\$10.00	<input type="checkbox"/>	42 A POKER DEALER/GA	\$10.00
<input type="checkbox"/>	\$0.00	<input type="checkbox"/>	15 B GROOM	\$10.00	<input type="checkbox"/>	33 B PONY RIDER	\$10.00
<input type="checkbox"/>	\$0.00	<input type="checkbox"/>	11 A HORSEMEN'S BOOK	\$10.00	<input type="checkbox"/>	6 O RACING IDENTIFI	\$10.00
<input type="checkbox"/>	\$10.00	<input type="checkbox"/>	16 B HOT WALKER	\$10.00	<input type="checkbox"/>	16 O RACING OFFICAL	\$15.00
<input type="checkbox"/>	\$10.00	<input type="checkbox"/>	101 HOTEL	\$10.00	<input type="checkbox"/>	19 O RACING STEWARD	\$15.00
<input type="checkbox"/>	\$10.00	<input type="checkbox"/>	102 HOUSEKEEPING	\$10.00	<input type="checkbox"/>	21 A SECURITY	\$10.00
<input type="checkbox"/>	\$15.00	<input type="checkbox"/>	5 C INVESTIGATOR	\$10.00	<input type="checkbox"/>	100 SERVER	\$10.00
<input type="checkbox"/>	\$10.00	<input type="checkbox"/>	17 B JOCKEY	\$15.00	<input type="checkbox"/>	32 B STABLE NAME	\$20.00
<input type="checkbox"/>	\$10.00	<input type="checkbox"/>	19 B JOCKEY AGENT	\$10.00	<input type="checkbox"/>	18 O STALL SUPER	\$10.00
<input type="checkbox"/>	\$10.00	<input type="checkbox"/>	8 O JOCKEY RM CUST	\$10.00	<input type="checkbox"/>	22 A TOTE	\$10.00
<input type="checkbox"/>	\$10.00	<input type="checkbox"/>	38 A JOCKEY VALET	\$10.00	<input type="checkbox"/>	23 A TRACK SUPER	\$10.00
<input type="checkbox"/>	\$10.00	<input type="checkbox"/>	12 A MAINT EMPL	\$10.00	<input type="checkbox"/>	35 B TRAINER	\$15.00
<input type="checkbox"/>	\$10.00	<input type="checkbox"/>	14 A MEDIA REL	\$10.00	<input type="checkbox"/>	24 A VENDOR	\$20.00
<input type="checkbox"/>	\$10.00	<input type="checkbox"/>	15 A MISCELLANEOUS	\$10.00	<input type="checkbox"/>	24 B VENDOR HELPER	\$10.00
<input type="checkbox"/>	\$10.00	<input type="checkbox"/>	16 A MUTUEL EMPL	\$10.00	<input type="checkbox"/>	40 B VET ASST	\$10.00
<input type="checkbox"/>	\$10.00	<input type="checkbox"/>	17 A MUTUEL MANAGER	\$10.00	<input type="checkbox"/>	41 B VET TECH	\$10.00
<input type="checkbox"/>	\$10.00	<input type="checkbox"/>	12 O OUTRIDER	\$10.00	<input type="checkbox"/>	22 O VETERINARIAN	\$15.00
<input type="checkbox"/>	\$10.00	<input type="checkbox"/>	25 B OWNER	\$15.00	<input type="checkbox"/>	13 A VP OF MARKETING	\$10.00
<input type="checkbox"/>	\$10.00	<input type="checkbox"/>	29 B OWNER/ASSIT TRA	\$30.00			
<input type="checkbox"/>	\$10.00	<input type="checkbox"/>	28 B OWNER/TRAINER	\$30.00			
<input type="checkbox"/>	\$10.00	<input type="checkbox"/>	18 A PARKING	\$10.00			
<input type="checkbox"/>	\$36.00	<input type="checkbox"/>	30 B PARTNERSHIP	\$10.00			
<input type="checkbox"/>	\$10.00	<input type="checkbox"/>	19 A PHOTOGRAPHER	\$10.00			
<input type="checkbox"/>	\$10.00	<input type="checkbox"/>	15 O PLACING JUDGE	\$10.00			

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