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**OATH OF APPLICANT**

I declare under penalty of perjury, under the laws of the state of Washington, that all the answers and statements are true, correct and complete. I understand that untruthful or misleading answers are cause for denial of my application and / or revocation of any certification granted. I agree to notify the Tribal / State Gaming Agency if any information required on this application and / or my [Personal / Criminal History Statement](#), changes or becomes inaccurate in any way. I understand that if I fail to make such notification, it may constitute grounds for denial, suspension or revocation of my temporary or permanent state certification. I further understand that the State Gaming Agency (Washington State Gambling Commission) may revoke, suspend or deny a state certification for any reason(s) it deems to be in the public interest under the provisions of [Chapter 9.46](#) of the Revised Code of Washington.

Signature: \_\_\_\_\_ Date: |\_\_|\_|/|\_\_|\_|/|\_\_|\_|\_|\_|\_|

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**TRIBAL AUTHORIZATION**

I hereby authorize the applicant to submit this application as a Class III Indian Gaming Employee.

Last Name: |\_\_\_\_\_|

First Name: |\_\_\_\_\_| MI: |\_\_|

Title: |\_\_\_\_\_|

Signature of  
Authorizing Tribal Agent: \_\_\_\_\_ Date: |\_\_|\_|/|\_\_|\_|/|\_\_|\_|\_|\_|\_|

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**WAIVER FOR TRIBAL MEMBERS ONLY**

Under the terms of the Tribal State Compact – if you are a Tribal member of the Tribe that you are applying for, you are required to sign the waiver below.

I agree to submit to state certification to the extent necessary to determine qualification to hold such certification, including all necessary administrative procedures, hearings and appeals pursuant to [RCW 9.46](#), [WAC 230-17](#), and the State Administrative Procedures Act, [RCW 34.05](#). I further waive any immunity, defense, or other objection that I might have in allowing the Washington State Gambling Commission to exercise their authority pursuant to the provisions of the Tribal-State Compact for Class III Gaming.

Signature of Tribal Member: \_\_\_\_\_

Name of Tribe: |\_\_\_\_\_|

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**YOUR APPLICATION AND THE PUBLIC RECORDS ACT**

From the moment we receive your application, it becomes a public document subject to the Public Records Act ([RCW 42.56](#)) and other Washington laws. The Commission may disclose to the public, other state or federal agencies, or discuss at a public meeting all information set forth in this application and all supplemental information submitted. The Commission responds to public document requests through a Public Disclosure Request process. In the event that the Commission receives a public disclosure request regarding this application or the license file established, you may request in writing, that the Commission notify you of such request as provided in [RCW 42.56.540](#).