

FOR AGENCY STAFF & CONTRACTORS

NAME:				
DATE:				
POSITION APPLIED FOR:				
FINGERPRINTS COMPLETE:	☐ Yes	□ No		

Purpose and Use of the Background Disclosure Form

The Texas Racing Commission is a law enforcement agency with a unique mission. The *Texas Racing Act* requires background checks to determine suitability and qualifications for people to be employed by the Commission (*Texas Occupations Code, Sec. 2022.057*). Completion of the Background Disclosure Form does not guarantee selection for employment. The information you provide will be evaluated by our agency human resources team with the cooperation of other state or federal law enforcement partners to determine your suitability for the position or license sought. For potential agency employees, the Background Disclosure Form is a required in addition to *The State of Texas Application for Employment*.

Instructions for Completing the Background Disclosure Form. It is essential that the information is accurate and complete in all respects so please read all instructions carefully before proceeding. Avoid errors by reading the directions carefully before making any entries on the form. Be sure your information is accurate and in proper sequence before you begin. Omissions or falsifications will result in disqualification from employment or may be grounds for future termination of employment.

- 1. Answer all questions truthfully and accurately. Print legibly in **BLACK INK** or typed. Your statement **will be evaluated on completeness and legibility.** Unclear information may prevent an investigator from completing your background check in a timely manner. The investigator may, but has no obligation to, ask you for clarification.
- 2. If a question is not applicable to you, enter N/A in the space provided.
- You are responsible for obtaining correct telephone numbers and full addresses. If you are not sure of a telephone number and/or address, personally verify before making that entry on this history statement. ALL ADDRESSES MUST BE COMPLETE WITH ZIP CODES.
- 4. If additional space is needed, use the continuation page on Page 12 (make additional copies as necessary) and indicate the page number, section and number (if applicable).
- 5. You are responsible for providing timely changes and/or updates in writing via email.
- 6. If your application is incomplete, you WILL NOT BE CONSIDERED FOR EMPLOYMENT OR LICENSURE.
- 7. The following documents must be submitted with the Personal History Statement:
 - A copy of a government-issued identification (e.g., Driver's License, Passport, etc.)
 - A copy of your fingerprint receipt from IndentoGO (NOTE: Applicants for employment do not need this until after interview)
 - A copy of your driving history from the Texas Department of Public Safety (or governing agency in your jurisdiction)
 - If required for qualification for the position you are seeking, a copy of your official high school or college transcripts
 - If required for the position you are seeking (e.g., Veterinarian, Attorney, Peace Officer), written verifications of licensure by the state agency governing your license (e.g., Texas Board of Veterinary Medical Examiners)
 - If prior or current military, a copy of all DD-214(s), NGB Form 22, or similar records related to your service

1.	APPLICANT IDENTIFICATION	Indicate your name as	it appears on your SOCIAL	. SECURITY card.	
a.	Last Name:	First:	Middle:	Maiden:	
	Have you ever been known or go				
b.	Street Address:			Pt. No.:	
	City:	State: _		Zip code:	
	Mailing Address (if different from	residence):			
	Home Telephone No.:	Work Telep	hone No.:	Cellular No.:	
	Date of Birth:	Social Sec	urity No.:		
	List ALL E-Mail Addresses:		Driver License No.:	State:	
	Have you ever possessed a drive	er's license issued by an	y state other than Texas?	Yes □ No □	
c.	If yes, give details below:				
	Driver's License No.:				
	State:	Date:			
d.	Have you ever had your driver's suspension or revocation:	icense suspended or re	voked? Yes □ No □	If yes, give reason, date, and len	gth of
e.	Place of Birth (City, County, State	e, Country):			
f.	Are you a U.S. Citizen by birth?	Yes □ No □			
	If not a U.S. citizen by birth, are y	ou a naturalized citizen	of the U.S? Yes □ No		
g.	If hired by the agency, you will be the boxes below which documen			ents for citizenship purposes. Select United States citizen:	from
	U.S. Passport ☐ Original of	or certified copy of Birth	Certificate □ Original o	or certified copy of Naturalization \Box	

2.	MARITAL and FA	MILY HISTORY									
a.	Single	Married □		Engaged		Cohabi	itating				
b.	Spouse's/Co-habita	ant's name (includ	e maid	en name):							
	Address:				_						
	Date of Birth:		Date o	f Marriage:							
	Home Telephone N	No.:		Work T	elephone N	lo.:					
c.	If you have been se	eparated, divorced	d, or wid	dowed, provide	details belo	w:					
	Date of Marriage:				_Date of M	arriage:					
	City and State:				_ City and S	State:					
	Separated	Divorced □ V	Vidowe	d 🗆	Separated	d 🗆 Divord	ced	□ Wid	dowed [
	Date:			Date:							
	Ex-spouse's Name	:		Ex-spouse's	Name:						
	Telephone No.:			Telephone N	lo.:						
d.	Identify <i>children</i> re the address colum		ur spou	se (Natural, Ste	p-Children,	Adopted, or l	Foste	r Childrer	n). If dec	eased, i	ndicate unde
	Relation	Name			Address			City		State	Zip
e.	Identify relatives in step-parents (if an										
	Relationship	Name		Address		City		State	Zip	Pho	ne Number
							+				
							+				

3. RESIDENCES

Identify all residences where you have lived in the last ten (10) years, beginning with the most recent, including your present address. List date by month/year.

From	То	Address	City	State	Zip Code

4. PERSONAL REFERENCES

List at least three (3) persons who know you well enough to provide current information about you. **<u>DO NOT</u>** list relatives or former supervisors listed on the standard State application.

1.	Name:	Years known:
	Address:	_Alternate Telephone:
	Home Telephone:	_
	Email Address:	_
	Nature of Relationship:	_
2.	Name:	Years known:
	Address:	_Alternate Telephone:
	Home Telephone:	_
	Email Address:	_
	Nature of Relationship:	_
3.	Name:	Years known:
	Address:	_Alternate Telephone:
	Home Telephone:	_
	Email Address:	_
	Nature of Relationship:	

	4.	Name:		Yea	rs known:_		
		Address:		Alternate Teleph	one:		
		Home Telephone:					
		Email Address:					
		Nature of Relationship:					
	5.	Name:		Yea	rs known:_		
		Address:		Alternate Teleph	one:		
		Home Telephone:					
		Email Address:					
		Nature of Relationship:					
5.	PE	RSONAL DECLARATIONS					
		you consume alcoholic beverages? Yes	s □ No □	If yes, hov	v often?		
b.	In t	the last three (3) years, have you used illeg	jal drugs? Yes □	l No □	If yes,	when last used?	
	Pro	ovide explanation:					
c.	Are	e you currently using any illegal drugs? Y	′es □ No □				
	Da	te last used?		If yes, he	ow often?		
6	ΔR	RESTS, DETENTIONS, AND LITIGATION	N				
		ve you ever been arrested or detained by I		gardless of outco	me?	Yes □ No □	
b.	На	ve you ever been the subject of a lawsuit o	r had civil actions t	aken against you	in court?		
c.	If y	es, complete the following					
		Agency	Offens	se	Date	Location	on
d.	aga ass	ve you ever committed an act of family vainst another member of the family or housault or that is a threat that reasonably pla	sehold that is interces the member in	nded to result in fear of imminent	physical ha	arm, bodily injury, assa arm, bodily injury, assa	ault, or sexua
	ass	sault, but does not include defensive meas	ures to protect one	eselt.) (Texas Fan	nily Code S	ection /1.004)	
	Υ	'es □ No□ If yes, explain:					

€.		Have you ever been involved in any incident (do not include vehicular accidents) in which a police report was made or law enforcement was called?								
	Yes □	No □ If yes, explain	n:							
7.		RELATIVES' ARRESTS		. 10 . 17						
			/ or close relatives ever bee							
	Relationship	Name	Agency	Offense	Year		Outcome			
3.	FINANCIAL IN	FORMATION								
1.	Have you ever	•	uspended, charged off, or o	cancelled for failure to pay	/? Ye	s 🗆	No □			
Э.	•	• •	property repossessed or fo	preclosed?	Ye	s 🗆	No □			
	It "Yes" to abov	e, please explain:								
) .	Have you ever	failed to pay federal, stat	e, or other taxes?		Ye	s 🗆	No □			
	If "Yes" to abov	e, please indicate year(s	s):							
ı.	Have you ever	defaulted on any type of	loan?		Ye	s 🗆	No □			
	If "Yes" to abov	e, please explain:								
€.	Have you ever	had bills or debts turned	over to a collection agency	?	Ye	s 🗆	No □			
	If "Yes" to abov	re, please explain:								
	Have you ever	had any credit account s	uspended, charged off, or o	cancelled for failure to pay	/? Ye	s 🗆	No □			
	If "Yes" to abov	e, please explain:								

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g.	Are you currently more than sixty (60)	'es □	No □	
	If "Yes" to above, indicate how many d	lelinquent debts:		
1.	Name of Account:	Explanation:		
	Amount Behind:	Date Behind:		
2.	Name of Account:	Explanation:		
	Amount Behind:	Date Behind:		
3.	Name of Account:	Explanation:		
	Amount Behind:	Date Behind:		
4.	Name of Account:	Explanation:		
	Amount Behind:	Date Behind:		
2.	Reason? Employer Reason?	When? When?		
	ave you ever quit a job without providing	at least two (2) weeks-notice? Yes \square No \square		
1.		When?		
2.	Employer			
	Reason?	When?		
Do	you have any reason to believe that a for	mer employer(s) may give you a negative job reference? Yes□	No	
1.	Employer			
	Reason?	When?		
2.	Employer			
	Reason?	When?		

9. OCCUPATIONAL AND BUSINESS LICENSES Have you even been licensed by the Texas Racing Commission in any capacity? Yes 🗌 No □ **1.** Type of License When? 2. Type of License When? 3. Type of License When? Have ever held any other occupational license through the State of Texas? Yes □ No □ **1.** Type of License When? **2.** Type of License When? **3.** Type of License When? Have ever held a business license through the State of Texas? Yes □ No □ 1. Type of License When? IRS Tax ID No. (EIN) TX Secretary of State Business No. Business Name and Type of Entity (e.g., LLC, PLLC, Corporation) 2. Type of License When? IRS Tax ID No. (EIN) TX Secretary of State Business No. Business Name and Type of Entity (e.g., LLC, PLLC, Corporation) 3. Type of License When? IRS Tax ID No. (EIN) TX Secretary of State Business No. Business Name and Type of Entity

(e.g., LLC, PLLC, Corporation)

10. MILITARY SERVICE OBLIGATION

- 0	erved from (Date):	to	Highest Rank held:	
Br	anch of Service:	<u> </u>		
Jo	ob Title(s) (e.g., Rifleman, Security):			
Ty	/pe of discharge:			
Uı	nit:	Last Duty Station:		
D	o you have an Active Security Clearance?	Yes □ No □		
b.	Are you actively serving in a National Gua	rd or Reserve Unit (inclu	ding State Military Forces)?	Yes □ No □
Se	erved from (Date):	to	Current Rank held:	
Br	anch of Service:			
	ob Title(s) (e.g., Rifleman, Security):			
1.11				
O.	nit:	Last Duty Station:		
	hit: Have you ever been subject to court marti (Include non-judicial, Captain's mast, et outcome(s):	ial or any other disciplina	ry proceeding under the Unifo	
a.	Have you ever been subject to court marti (Include non-judicial, Captain's mast, et	ial or any other disciplina ic.) If "Yes," provide da nk should be considered i	ry proceeding under the Unifo te(s), charge(s), military cou	urt(s) or authority(ies), and
а. b.	Have you ever been subject to court marti (Include non-judicial, Captain's mast, et outcome(s): Identify any additional information you thin	ial or any other disciplina ic.) If "Yes," provide da nk should be considered i	ry proceeding under the Unifo te(s), charge(s), military cou	urt(s) or authority(ies), and
a. b.	Have you ever been subject to court marti (Include non-judicial, Captain's mast, et outcome(s): Identify any additional information you thin any further explanation of answers to prev	ial or any other disciplina ic.) If "Yes," provide da nk should be considered i vious questions:	ry proceeding under the Unifo te(s), charge(s), military cou n your application for the posi	urt(s) or authority(ies), and

Sec. 2026.051. COMMISSION RULES REGARDING EXCLUSION OR EJECTION. The commission shall adopt rules providing for the exclusion or ejection from an enclosure where horse or greyhound races are conducted, or from specified portions of an enclosure, of a person:

- (1) who has engaged in bookmaking, touting, or illegal wagering;
- (2) whose income is from illegal activities or enterprises;
- (3) who has been convicted of a violation of this subtitle;
- (4) who has been convicted of theft;
- (5) who has been convicted under the penal law of another jurisdiction for committing an act that would have constituted a violation of any rule described in this section;
- (6) who has committed a corrupt or fraudulent act in connection with horse or greyhound racing or pari-mutuel wagering or who has committed any act tending or intended to corrupt horse or greyhound racing or pari-mutuel wagering;
- (7) who is under suspension or has been excluded or ejected from a racetrack by the commission or a steward in this state or by a corresponding authority in another state because of corrupt or fraudulent practices or other acts detrimental to racing;

(8) who has submitted a forged pari-mutuel ticket or has altered or forged a pari-mutuel ticket for cashing or who has cashed or caused to be cashed an altered, raised, or forged pari-mutuel ticket; (9) who has been convicted of committing a lewd or lascivious act or other crime involving moral turpitude; (10) who is guilty of boisterous or disorderly conduct while inside an enclosure; (11) who is an agent or habitual associate of a person excludable under this section; or (12) who has been convicted of a felony. 2. HAVE YOU PERSONALLY EVER BEEN INVESTIGATED AND / OR LICENSED BY ANY STATE RACING AND/OR GAMING COMMISSION? Yes □ No □ IF YES, ATTACH AN EXPLANATION. ARE YOU PERSONALLY RELATED, LINKED, ACQUAINTED, OR A BETTOR WITH ANY SPORTS BOOKMAKER IN TEXAS OR THE UNITED STATES? Yes □ No □ IF YES, ATTACH EXPLANATION AND IDENTIFY THE BOOKMAKER. 4. ARE YOU AN OWNER, LESSOR, OR LESSEE OF ANY HORSE OR GREYHOUND INVOLVED IN THE PARI-MUTUEL INDUSTRY, IN THIS STATE OR ANY OTHER STATE? Yes □ No □ IF YES, ATTACH A LIST WITH THEIR NAMES, BREED AND PARI-MUTUEL STATE INVOLVED. 5. DO YOU PRESENTLY OWN OR CONTROL A FINANCIAL INTEREST IN A LICENSE OF THE COMMISSION? Yes □ No □ IF YES, ATTACH AN EXPLANATION. 6. DO YOU PRESENTLY ACCEPT ANY REMUNERATION FROM A RACETRACK? Yes □ No □ IF SO, ATTACH LIST WITH NAME OF RACETRACK AND REASON FOR REMUNERATION. DO YOU PRESENTLY HAVE ARRANGEMENTS TO RECEIVE ANY PART OF THE PURSE OR TEXAS BRED INCENTIVE. AWARD PAID ON ANY GREYHOUND OR HORSE WHICH RACES IN THE STATE OF TEXAS? Yes □ No \square IF SO, ATTACH DETAILS. 8. IN REFERENCE TO THESE RESTRICTIONS, DO YOU HAVE ANY RELATIVES WHOSE ACTIVITIES MEET ANY OF THE RESTRICTIVE CRITERIA ABOVE? IF YES, PLEASE EXPLAIN:

	O YOU HAVE ANY RELATIVES RELATED IN THE SAME EMPLOYED BY THE TEXAS RACING COMMISSION?	
,	EMPLOYED IN ANY CAPACITY AT A LICENSED PAR	
	AS BEEN CONVICTED OF ANY FELONY CRIME?	
,	—— E ANSWER IS YES TO ANY OF THE ABOVE, PLEASE	EXPLAIN:
12. RELATIVI	ES .	
	SSION MAY NOT EMPLOY OR CONTINUE TO EMPLO	DY A PERSON WHO:
1) 2) 3) 4) 5)	STATE BREED REGISTRY, OR A TEXAS TRADE AS RACING ACT, IN THE FIELD OF HORSE OR GREYHOWNS OR LEASES A RACE ANIMAL THAT PARTIC ACCEPTS OR IS ENTITLED TO ANY PART OF THE ON A GREYHOUND OR A HORSE IN A RACE CONTRESIDES WITH OR IS RELATED WITHIN THE F PERSON SUBJECT TO A DISQUALIFICATION PRE	TANT TO A COMMISSION LICENSE HOLDER, AN OFFICIAL SOCIATION, AS DEFINED BY SECTION 2022.004(a) OF THE HOUND RACING OR BREEDING; IPATES IN PARI-MUTUEL RACING IN THIS STATE; OR PURSE OR TEXAS-BRED INCENTIVE AWARD TO BE PAIR
questions. I fu or licensed, m	ully understand that any misrepresentation, omission, or nay lead to the termination my employment or revocation	·
Printed Name	e of Applicant	Signature of Applicant
		Date

TEXAS RACING COMMISSION PERSONAL HISTORY CONTINUATION SHEET