

KANSAS RECORD RELEASE FORM

Kansas Racing and Gaming Commission
700 SW Harrison, Suite 500
Topeka, KS 66603-3754
Phone: (785) 296-5800 * Fax: (785) 296-0900**

Office Use Only:

Fingerprint reciprocity is available to: **KENNEL OWNERS, OWNERS, TRAINERS, and ASSISTANT TRAINERS** only. You must complete this form and submit with fingerprint reciprocity documentation required by the Kansas Racing and Gaming Commission (KRGC).

I, _____ born _____
(print full name) (date of birth)

hereby state that I have submitted to the Kansas Racing and Gaming Commission proof of fingerprinting this year or the previous four years and a license this year or the previous two years in:

(Check box that corresponds with racing jurisdiction where fingerprinted)

- | | | | |
|-------------------------------------|------------------------------------|-----------------------------------|-------------------------------------|
| <input type="checkbox"/> CALIFORNIA | <input type="checkbox"/> COLORADO | <input type="checkbox"/> ILLINOIS | <input type="checkbox"/> INDIANA |
| <input type="checkbox"/> IOWA | <input type="checkbox"/> MINNESOTA | <input type="checkbox"/> NEBRASKA | <input type="checkbox"/> NEW MEXICO |
| <input type="checkbox"/> OHIO | <input type="checkbox"/> OKLAHOMA | <input type="checkbox"/> TEXAS | <input type="checkbox"/> WISCONSIN |

for purposes of fingerprint reciprocity when applying for my Kansas occupation license. The fingerprint reciprocity information is for the purpose of checking any criminal history record which I may have that is maintained by the Federal Bureau of Investigation (FBI) or a state, county, or city criminal investigatory agency.

I hereby grant permission to the KRGC Director of Security, or his designee, to request copies of records maintained by the racing jurisdiction indicated above or by any other means deemed necessary by the KRGC. I hereby authorize the release of any information in any agency's file, which pertains to any criminal history records obtained by submission of my fingerprint cards to the FBI or an equivalent criminal investigatory agency, to the KRGC Director of Security. I understand this release form is submitted as part of my application for an occupation license.

Signature of Applicant

Date