

NEW YORK STATE RACING AND WAGERING BOARD

PROOF OF IDENTIFICATION CHECKLIST

*Appropriate Boxes MUST be checked**

<u>PRIMARY IDENTIFICATION</u> COLUMN A	<u>SECONDARY IDENTIFICATION</u> COLUMN B	<u>SUPPORT IDENTIFICATION</u> COLUMN C
<input type="checkbox"/> Original or certified copy of a birth certificate issued by the appropriate State Bureau of Vital Statistics or equivalent agency.	<input type="checkbox"/> Current photo driver license or photo ID issued by any state in the United States, US territory, the District of Columbia, or Canadian Province.	<input type="checkbox"/> School Records
<input type="checkbox"/> United States Passport (unexpired or expired).	For applicants born before 1961, the following items would be acceptable in this category:	<input type="checkbox"/> Insurance Policy (at least two years old)
<input type="checkbox"/> Original or certified copy of United States Department of State Certification of Birth (issued to United States citizens born abroad).		<input type="checkbox"/> A) original or certified copy of Form DD-214;
<input type="checkbox"/> United States citizenship (naturalization) certificate with identifiable photograph.	<input type="checkbox"/> B) original or certified copy of other state or federal governmental record that states name and date of birth (such as United States records or Social Security records)	<input type="checkbox"/> Military Records
<input type="checkbox"/> Current United States Immigration and Naturalization Service document with verified date and identifiable photograph.	<input type="checkbox"/> Current United States military ID card for active duty, reserve or retired personnel with identifiable photograph.	<input type="checkbox"/> Current Military dependant identification card
<input type="checkbox"/> Unexpired foreign passport (with a United States Visa or unexpired employment authorization card);	<input type="checkbox"/> Voter Registration Card	<input type="checkbox"/> Original or certified copy of marriage license or divorce decree
	<input type="checkbox"/> ID card used by federal, state, or local government agencies or entities provided it contains a photograph or information such as name, date of birth, sex, height, eye color and address.	<input type="checkbox"/> Social Security card
	<input type="checkbox"/> School ID card with a photograph	<input type="checkbox"/> Pilot's license
	<input type="checkbox"/> Native American tribal document	<input type="checkbox"/> Concealed handgun license
		<input type="checkbox"/> Occupational License from another racing jurisdiction
		<input type="checkbox"/> New driver license temporary receipt
		<input type="checkbox"/> Expired driver license or identification certificate issued by another state, territory, District of Columbia, or Canadian province that is within two years of the expiration date.
		<input type="checkbox"/> A consular document issued by a state or national government.

PLEASE CHOOSE ONE (Appropriate Boxes MUST be checked**)**

Option 1 = One from Column A

Option 2 = Two from Column B

Option 3 = One from Column B and Two from Column C

NYS Request for Card Scan Services - Information Form

Instructions for applicant: Complete form and submit with two FBI (blue) fingerprint cards and the Board's Proof of Identification Form and Chart containing the list of acceptable forms of identification.

Please Print Clearly

ORI: NY921790Z

Contributor Agency: NYS Racing and Wagering Board

Job or License Type: _____
Choose one: (Racing License or National Racing Compact License)

Social Security Number: _____
Only list if you have a valid SSN

Agency ID Number: *Receipt number to be entered by RWB employee*

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Check one: New Submission Resubmission If resubmission, list TCN Number here: _____

Name of Applicant: Last _____ First _____ M.I. _____

Alias / Maiden Name: _____

Street Address: _____

City, State, & Zip: _____

Date of Birth: _____ Age: _____ Sex: Male Female

Race: _____ Ethnicity: Hispanic Non Hispanic Unknown

Height: _____ ft. _____ in. Weight: _____ lbs.

Skin Tone: _____ Eye Color: _____ Hair Color: _____

State / Country of Birth: _____ Country of Citizenship: _____

For Official Use Only:

L-1 Billing Account Number: _____