

LAS VEGAS METROPOLITAN POLICE DEPARTMENT
WORK CARD APPLICATION
 NON-GAMING (LAS VEGAS)
 FINGERPRINT BUREAU

Name of Business
Must Match City or Co. Business Name
 Address
Work Location Address
 Phone #
Valid Phone # to Business Owner or HR
 Position
Applicant's Title-Matching W/C Required
 Social Security #

ORIGINAL
 RENEWAL
 CO. LOCATION
 CITY LOCATION

400 S. MARTIN L. KING BLVD., BLDG. C
 LAS VEGAS, NV 89106
8AM - 5PM MON - FRI

INTERVIEWING TECH:
 Date:

QW: Neg
 PID Hit: Yes No

Place of Birth: City & State or Country if outside USA.

Immigration #
 Required if Not a US Citizen

Phone #

State

City

Zip

Birth Cert: Other:

Identification - Driver's Lic:
FOR OFFICE USE ONLY

Naturalization #
 Required if Naturalized US Citizen

Passport #

Apt. # or Space

Home Address

Relationship

Address (Number, Street, City, State, Zip)

Phone #

DO NOT WRITE IN THIS SPACE

ID#

PREV. OR ARREST

Qmatic #:

QW: Neg

PID Hit: Yes No

Place of Birth: City & State or Country if outside USA.

Immigration #
 Required if Not a US Citizen

Phone #

State

City

Zip

Birth Cert: Other:

Identification - Driver's Lic:
FOR OFFICE USE ONLY

Naturalization #
 Required if Naturalized US Citizen

Passport #

Apt. # or Space

Home Address

Relationship

Address (Number, Street, City, State, Zip)

Phone #



DO NOT WRITE IN THIS SPACE

Entered By:

Approval/Denial By:

Live Scan: Yes No

FBI: Yes No

Camera: Yes No

CD: Yes No

NOTE: COMPLETE PAGE 2 BEFORE SIGNING

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY ABILITY.

FALSE INFORMATION WILL CAUSE REVOCATION OR DENIAL OF THIS APPLICATION

SIGNATURE OF EMPLOYER

APPLICANT'S

DO NOT DUPLICATE

Print and sign AFTER Employee completes app.

APPLICANT'S

PRINTED NAME OF EMPLOYER SIGNING

CIVIL APPLICANT WAIVER

In consideration for processing my application, I, the undersigned, whose name and signature voluntarily appears below, do hereby and irrevocably agree to the following:

1. I hereby authorize Las Vegas Metropolitan Police Department to submit a set of my fingerprints to the Nevada Department of Public Safety, Records Bureau for the purpose of accessing and reviewing Nevada and National criminal history records that may pertain to me.
In giving this authorization, I expressly understand that the information may include information pertaining to notations of arrest, detentions, indictments, information or other charges for which the final court disposition is pending or is unknown to the above referenced agency. For records containing final court disposition information, I understand that the release may include information pertaining to dismissals, acquittals, convictions, sentences, correctional supervision information, and information concerning the status of y parole or probation when applicable. Further, I understand that the information may include similar information obtained from other local, state, or federal criminal justice agencies, and may include information pertaining to convicted person data, outstanding arrest warrants, missing persons.
2. In giving above authorization, I understand that all information provided to the submitting agency may be reviewed by the submitting agency or any other employee within the submitting agency's organization deemed necessary to make an informed decision. This information is confidential, as relating to a third party beyond that of the submitting agency's company and/or its subsidiary company(s) and of criminal justice agencies in the performance of their official duties, and may not be further disseminated.
(Please initial) _____

3. I understand that I may review and challenge the accuracy of any and all criminal history records which are returned to the submitting agency, and that the proper forms and procedures will be furnished to me by the Nevada Department of Public Safety Records Bureau upon request.

4. I hereby release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, its officer(s), agent(s) and/or employee(s) who conducted my criminal history records search and provided information to the submitting agency for any statement(s), omission(s), or infringement(s) upon my current legal rights. I further release and promise to hold harmless and covenant not to sue any persons, firms, institutions or agencies providing such information to the State of Nevada on the basis of their disclosures. I have signed this release voluntarily and of my own free will.

A reproduction of this authorization for release of information by photocopy, facsimile or similar process, shall for all intents and purposes be valid as the original.

Applicant's Name: _____ **Remind Applicants to sign the back of the application.**

Applicant's Signature: _____ Date: _____

CHILD SUPPORT INFORMATION

PLEASE MARK THE APPROPRIATE RESPONSE

FAILURE TO MARK ONE OF THE THREE MAY RESULT IN THE DENIAL OF THE APPLICATION.

- I am not subject to a court order for the support of a child.
- I am subject to a court order for the support of one or more children and am in compliance with the order or am in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order, or...
- I am subject to a court order for the support of one or more children and am not in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.

Signature of Applicant: **X** _____

READ THE FOLLOWING INSTRUCTIONS CAREFULLY.

1. Forms not accepted without signature of employer. Fill out forms in black ink only. Forms must be completely filled out prior to arrival.
2. Two (2) of the following forms of ID must be shown: State issued Driver's License or State ID, U.S. Passport, Military ID, Naturalization Certificate, Certified Birth Certificate, Social Security Card or INS authorized to work. Photocopies will not be accepted. One of the two ID's must include a photo.
3. Persons born outside of the U.S. or U.S. territory must show one of the following: Naturalization Certificate, U.S. Passport, U.S. Birth Certificate or INS authorization to work. This includes U.S. citizens born abroad. Photocopies will not be accepted.
4. **Persons 25 years of age and younger must show an original or certified copy of their birth certificate. No exceptions.**
5. Juveniles 17 years of age and younger must bring a work permit from Clark County Juvenile Justice Services, 601 N. Pecos, 455-5200.
6. Cards may not be issued to persons with felony convictions.
7. Cards may not be issued to persons who falsify application.
8. Call 828-3271 for information.

ALL CARDS - \$40.00 CASH ONLY NO CHECKS STATE AND FEDERAL BACKGROUND CHECK - \$37.50