THE REPUBLIC OF UGANDA

LOTTERIES AND GAMING ACT, 2016

APPLICATION TO LICENCE A PERSON EMPLOYED IN A CASINO OR GAMING FACILITY.

A-PARTICULARS OF THE APPLICANT

1.	Name:				
2.	Date of birth:				
3.	National Identification Number or passport number in case of foreigners				
4.	Occupation:				
5.	Qualification:				
	(attach the necessary certified documents)				
6.	Professional membership (if any):				
	(attach a certified proof of membership)				
7.	Address:				
	(i) telephone numbers:				
	(ii) email address:				
	(iii) postal address:				
B- F	PARTICURARS OF THE EMPLOYER				
8.	Name				
9.	Address				
10	Nationality				

11.	Country of residence or principal place of business						
12.	Age of applicant (where the applicant is an individual						
13.	National Identification Number or passport number in case of foreigners						
14.	Where the applicant is a company shall provide the following details:						
Nan	ne of shareholder	Nationality	Age	Address (Physical or Postal)			
C- P	related to casino of Yes If so, state — (a) name of the	CONDUCT licant has been engaged in any activity or employment or gaming facility No ne activity or employer ty in the applicant was engaged					
14.	Have you or any of the person named in this application or any person employed or connected with your business ever been arrested or convicted for any offense or crime, even though subject of a pardon amnesty, or other similar action.						
	Yes	No		_			
15.	If yes, give partic	ulars:			_		
					_		

Yes	No		
If so, give	particulars		
_			
Date at	this	day of	20

+where the application is made for and on behalf of a partnership or a body corporate it must be signed by a partner or a person authorised to sign for the body corporate, as the case may be.

(Signature)

^{*}Delete as necessary