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| This form is used by the Licensee to notify the Director of Gaming Control of the employment commencement of an existing Northern Territory casino operative licence holder in accordance with Regulation 4(2)(a) of the Gaming Control (Licensing) Regulations 1995.  Please note: the licence holder will be required to complete a variation application if they are changing their duties or classifications.  See the [casino employee licence](https://nt.gov.au/industry/gambling/licences/apply-for-a-casino-employee-licence) webpage further information on applicant requirements. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Applicant details** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Licence number: | | | | |  | | | | | | | | | | | | | Expiry date: | | | |  | | | | |
| Surname: | | | | |  | | | | | | | | | | | | | | | Date of birth: | | | |  | | |
| Given name/s: | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| Phone number: | | | | |  | | | | | | | | | | | Mobile number: | | | | |  | | | | | |
| Email address: | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| **Employment details** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Licensed employer name: | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Commencement date: | | | | | | | | | | | | |  | | | | | | | | | | | | | |
| **Employer declaration** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I, (full name): | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Holding the position of: | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| Solemnly and sincerely declare that the applicant:   * Has been tested in the duties of the intended position, and I am satisfied that they have sufficient competence to carry out the duties for which they will be licensed; and * Has attained the age of 18 years; and * Is of good repute having regard to character, integrity, honesty and responsibility; and * Has an adequate command of the English language for the purpose of performing the duties he or she proposes to perform; and * That I have viewed the original government issued licence or permit, and I can confirm the applicant’s identity. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If the applicant is successful, they will be employed in the capacity of: | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Key | Yes / No | | | | | | | | | | Standard | | | | Yes / No | | | | | | | | Trainee | | Yes / No | |
| With licence duties (select applicable): | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Administration | | Yes / No | | | | | | | | Cashier | | | | | | | Yes / No | | | | Gaming\* | | | | Yes / No | |
| Security | | Yes / No | | | | | | | | Surveillance | | | | | | | Yes / No | | | | | | | | | |
| This person will be employed in the position of: | | | | | | | | | | | | | |  | | | | | | | | | | | | |
| This declaration was made at (location): | | | | | | | | | | | |  | | | | | | | | | | | On (date): | |  | |
| Employer signature: | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **Note:** Under the *Oaths, Affidavits and Declarations Act 2010* a person wilfully making a false statement or altering a statement, in a statutory declaration is guilty of a crime and is liable to a penalty or imprisonment, or both. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Checklist** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Complete and signed employer declaration | | | | | | | | | | | | | | | | | | | | | | | | | | Yes / No |
| **All duties** - RSG certificate attached – current unit of competency ‘SITHGAM001 Provide Responsible Gambling Services’. | | | | | | | | | | | | | | | | | | | | | | | | | | Yes / No |
| **Gaming and Security duties** - RSA certificate attached – current unit of competency ‘SITHFAB002 Responsible Service of Alcohol’ (RSA). | | | | | | | | | | | | | | | | | | | | | | | | | | Yes / No |
| **Privacy statement** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| The Northern Territory Government complies with the Information Privacy Principals scheduled by the *Information Act 2002*. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Disclaimer** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| The Northern Territory Government respects and is committed to safeguarding the confidentiality and privacy of the information that it collects and handles, in accordance with the *Northern Territory Information Act 2002*.  You have been asked to provide personal information necessary for us to meet your application requirements. You do not have to provide your personal information but if you choose not to, this application will be incomplete and we will be unable to process it.  The information you provide will be accessible to Racing and Gaming and will only be used to provide a department service or program. We will not disclose your personal information to third parties unless, authorised or required by law to do so you have given us consent to share your personal information for a specific purpose.  You may request access to the personal information we hold about you. If you want more information about the Northern Territory’s privacy laws, please refer to the *Northern Territory Information Act 2002*, or the [Office of the Information Commissioner NT](https://infocomm.nt.gov.au/). | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Lodgement** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Complete notifications can be lodged in person, email or via post: | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Darwin: | | | | NAB House, Level 3, 71 Smith Street | | | | | | | | | | | | | | | | | | | | | | |
| Alice Springs: | | | | First floor, The Green Well Building, 50 Bath Street | | | | | | | | | | | | | | | | | | | | | | |
| 08 8999 1800 | | | | | | | | [GamingControlAct.DITT@nt.gov.au](mailto:GamingControlAct.DITT@nt.gov.au) | | | | | | | | | | | GPO Box 1154 Darwin NT 0801 | | | | | | | |