

	APPLICATION FOR REGISTRATION TRAINING FACILITIES WITH GAMING EQUIPMENT AND PARAPHERNALIA	Page No.	Page 1 of 2
		Form No.	GLDD - 1023
		Revision No.	3
		Effectivity	September 25, 2024

GENERAL INSTRUCTIONS

1. Please type or print legibly. Use black pen/ink only.
2. A complete application includes:
 - ☐ *Duly Accomplished Application Form*
 - ☐ *Certified Board resolution on the facility as a venue for gaming and casino-related skills training programs;*
 - ☐ *Names and Positions of officials who will supervise the operations of the training facility*
 - ☐ *Certified inventory of the gaming equipment and paraphernalia and their serial/reference numbers (classified according to location/training venue)*
 - ☐ *Copy of the training facility floor plan with CCTV layout*
3. All submitted documents must be compiled in a folder with proper indexes and labeling.
4. Application with incomplete requirements shall not be accepted.

COMPLETE NAME OF APPLICANT/COMPANY

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GENERAL INFORMATION

NAME OF COMPANY/LICENSED			
COMPLETE ADDRESS			
TELEPHONE NUMBER		FAX NUMBER	E-MAIL ADDRESS
NAME OF COMPANY HEAD		POSITION/DESIGNATION	
LIST OF OTHER VENUES/ADDRESSES AT WHICH TRAINING SHALL BE CONDUCTED			
Venue/Address 1		Venue/Address 2	
Venue/Address 3		Venue/Address 4	
NUMBER OF APPROVED GAMING TABLES		NUMBER OF APPROVED SLOT MACHINE UNITS (EGM and SM)	
IS TRAINING PROVIDED BY A 3 rd PARTY? YES ☐ NO ☐		IF YES, CHECK THE BUSINESS RELATIONSHIP OF THE TRAINING PROVIDER WITH THE LICENSED CASINO. PARENT COMPANY ☐ AFFILIATE COMPANY ☐ SUPPLIER ☐	
COMPANY NAME OF THE TRAINING PROVIDER			
COMPLETE ADDRESS OF THE TRAINING PROVIDER			
TELEPHONE NUMBER		FAX NUMBER	E-MAIL ADDRESS
NAME OF COMPANY HEAD		POSITION DESIGNATION	