



APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

M/F/H/V

Corporate Office:
600 Long Wharf Drive, New Haven, CT 06511 (203) 946-3100

This application form is intended for use in evaluating your qualifications for employment. It is not an employment contract. Please answer all questions completely and legibly. All qualified applicants will receive consideration without discrimination because of sex, marital status, race, age, religion, national origin, citizenship, disabilities, or any other status protected under state, federal or local law. Sportech, Inc. will make a reasonable accommodation to known physical or mental limitations of an otherwise qualified applicant or employee with a disability unless the accommodation would impose an undue hardship on the operation of our business. All applicants offered employment will be required to submit to a drug screening examination and annual criminal background reviews. Employment with Sportech, Inc. is subject to satisfactory results.

PERSONAL DATA

| | | | |
|--------------------|--------------------|--------------------|-------------------------|
| NAME: | | | Social Security Number: |
| (First Name) | (Middle Name) | (Last Name) | |
| PRESENT ADDRESS: | | (City) | (State and Zip Code) |
| MAILING ADDRESS: | | (City) | (State and Zip Code) |
| PRESENT TELEPHONE: | (Area Code/Number) | MESSAGE TELEPHONE: | (Area Code/Number) |

- Yes No Are you under 18 years of age?
- Yes No Can you, after employment, verify that you are a U.S. Citizen or that you have a legal right to work in the U.S.?
- Yes No Are you capable of performing the essential functions of the job for which you are applying?

POSITION DESIRED

Type of Work Desired:

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| When could you be available to begin work? | Salary Desired: |
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The following conditions may be required at some point in a job assignment. Are you able to satisfy the following work schedules?

- a. Shift Work? Yes No
- b. Overtime Work? Yes No
- c. Rotational Work Schedules? Yes No
- d. Work Schedules that include Saturdays and Sundays? Yes No
- e. Overnight Travel? Yes No

Check the appropriate box for the type of employment you seek:

- Regular, full-time
- Regular, part-time
- Temporary
- Summer

GENERAL INFORMATION

To assist us in the processing of your application for employment; please complete the following questions regarding your contact with Sportech, Inc.

- Yes No I have previously applied for a position with Sportech, Inc.. If yes, please indicate the date of your previous Application for Emploment: _____
- Yes No I have previously been employed by Sportech, Inc. or Scientific Games. If yes, please indicate the dates of your previous service with Sportech, Inc. or Scientific Games.
From _____ To _____

What prompted you to apply for a position with Sportech, Inc.? Please identify the source of referral.

- Employment Advertisement (indicate the name of the publication) _____
- Employment Agency (indicate the name of the agency) _____
- State Employment Agency _____
- College of School Placement Office (Indicate the School) _____
- Other (please specify) _____

EMPLOYMENT HISTORY

Please list your employment history for the past 10 years (or at least 5 employers). Start with your present status and note any periods in which you were not employed.

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| Employer: | Dates of Employment: From: To: | Salary/Wage: Start: Final: |
| (include Street, City, State and Zip Code) | | Telephone Number: |
| Address: | | |
| Job Title: | Reason for Leaving: | |
| Basic Duties and Responsibilities: | Immediate Supervisor: | |
| | May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No | |

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| Address: | | |
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| Basic Duties and Responsibilities: | Immediate Supervisor: | |

EDUCATION AND TRAINING

Please indicate the highest education level you have achieved by circling one of the following:

Elementary/Primary
1 2 3 4 5 6 7 8

High School
9 10 11 12 GED

College or University
1 2 3 4

Graduate School
1 2 3 4

Please identify the name and address of the high school (the last one attended) and all colleges/universities.

Name of School

Address of School (City/State)

Major/Field of Study

Type of Degree

High School

1.

2.

3.

Please indicate any other training (including military training, vocational schools, formal apprenticeship, and technical institutes) which is pertinent to your application for employment.

Academic Achievements and Activities:

Please list academic honors, scholarships or fellowships; memberships in academic honorary societies; or participation in or offices held in extracurricular activities you consider significant. (You may exclude all information indicative of age, sex, race, religion, color, national origin, and disability.)

Clerical Skills:

Please indicate the type of skill and proficiency level you have attained.

Typing _____ wpm

Shorthand/Speedwriting _____ wpm

Transcribing Machine

Adding Machine

Personal Computer

Computer Programming

Other Skills/Machines (Please identify) _____

SECURITY

Yes No

Do you have any information relative to a change of name, use of an assumed name or nickname necessary to enable us to check on your work and educational record? If yes, please explain.

Yes No

Do you have any relatives working for Sportech, Inc.? If yes, please list those persons by name and relationship.

Yes No

I have lived at my present address for less than 5 years. If yes, please list the addresses of your residences for the last 5 years.

**If you have any concerns regarding the employment consideration you receive
from Sportech, Inc., you are welcome to direct those inquiries to the Human
Resources Department**

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY; THEY CONSTITUTE THE CONDITIONS FOR EMPLOYMENT WITH SPORTECH, INC.

I understand and agree that:

- The information on this application for employment (and accompanying resume, if any) is true and complete to the best of my knowledge.
- Any material misrepresentations or significant omissions will be justification for refusal of employment, or if employed, termination from Sportech, Inc. employment.
- If employed, I agree to submit to periodic testing for illegal drugs and other controlled substances, and to execute such authorizations as may be requested to provide for the release of all test results to Sportech, Inc. If the results of these tests indicate a positive reaction, I understand that I will be subject to the established disciplinary procedure (which may include termination).
- Although management makes every effort to accommodate individual preferences, business needs may at times make the following conditions mandatory: overtime, shift work, a rotating work schedule, or a work schedule that includes Saturday and Sunday, or overnight travel. I understand and accept these conditions of my continuing employment.
- If employed, I will sign the Sportech, Inc. EMPLOYEE CONDUCT AND CONFIDENTIALITY AGREEMENT in which I will agree to protect Sportech, Inc.'s confidential information, not to compete against Sportech, Inc., and other matters relating to my status as an employee. (I understand that I may obtain now, or at any time or after my employment, copies of this agreement.)
- If employed, I agree to abide by such policies and procedures as Sportech, Inc. publishes for employees.
- I understand that any job offer which may be made is contingent on the completion of a background investigation, security check, and/or job related medical examination. The results of these activities must be satisfactory to the employer. Should the results not be satisfactory to the employer, employment will be denied, or if employed, the employment relationship will be terminated.
- My employment is on an at-will basis for no definite period of time, and both the Company and I may terminate it at any time without any previous notice or reason.
- The foregoing constitutes the entire agreement regarding the conditions of my employment with Sportech, Inc. and supersedes all other agreements, whether oral or written, concerning such employment. I understand that none of these conditions of employment, particularly with respect to at-will employment, may be changed except as authorized in writing by Human Resources.

Signature of Applicant

Date



PRINT CHARACTERS LIKE THIS
ABCDE 98765

CORRECT INCORRECT
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Consent to Request Consumer Report & Investigative Consumer Report Information

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Applicant's First Name or Initial Last Name

I understand that **Sportech, Inc. dba Autotote Eneterprises, Inc.** ("COMPANY") will use **Sterling InfoSystems Inc., 249 West 17th Street, New York, NY 10011, (800) 899-2272** to obtain a consumer report and/or investigative consumer report ("Report") as part of the hiring process. I also understand that if hired, to the extent permitted by law, COMPANY may obtain further Reports from STERLING so as to update, renew or extend my employment.

I understand **Sterling InfoSystems Inc.'s** ("STERLING") investigation may include obtaining information regarding my credit background, bankruptcies, lawsuits, judgments, paid tax liens, unlawful detainer actions, failure to pay spousal or child support, accounts placed for collection, character, general reputation, personal characteristics and standard of living, driving record and criminal record, subject to any limitations imposed by applicable federal and state law. I understand such information may be obtained through direct or indirect contact with former employers, schools, financial institutions, landlords and public agencies or other persons who may have such knowledge. If an investigative consumer report is being requested, I understand such information may be obtained through any means, including but not limited to personal interviews with my acquaintances and/or associates or with others whom I am acquainted.

I understand that I have the right to receive notice about the nature and scope of any investigative consumer report requested within five days after the COMPANY receives my request or five days after the investigative consumer report was requested, whichever is later.

By checking the box, I indicate that I wish to receive further disclosure about the nature and scope of any COMPANY request for an investigative consumer report

I acknowledge receipt of the attached summary of my rights under the Fair Credit Reporting Act and, as required by law, any related State summary of rights (collectively "Summaries of Rights").

This consent will not affect my ability to question or dispute the accuracy of any information contained in a Report. I understand if COMPANY makes a conditional decision to disqualify me based all or in part on my Report, I will be provided with a copy of the Report and another copy of the Summaries of Rights, and if I disagree with the accuracy of the purported disqualifying information in the Report, I must notify COMPANY within five business days of my receipt of the Report that I am challenging the accuracy of such information with STERLING.

I hereby consent to this investigation and authorize COMPANY to procure a Report on my background.

In order to verify my identity for the purposes of Report preparation, I am voluntarily releasing my date of birth, social security number and the other information and fully understand that all employment decisions are based on legitimate non-discriminatory reasons.

Massachusetts, Minnesota, New Jersey & Oklahoma Applicants Only: I have the right to request a copy of any Report obtained by COMPANY from STERLING by checking the box. STERLING will mail the Report directly to me. (Check only if you wish to receive a copy)

Maine Applicants Only: By checking the box, I indicate that I wish to receive the name, address and telephone number of the nearest unit of the consumer reporting agency designated to handle inquiries regarding the investigative consumer report as well as a copy of any Report obtained by COMPANY from STERLING.

Washington State and Oregon Applicants Only (AS APPLICABLE): I further understand that COMPANY will not obtain information about my credit history, credit worthiness, credit standing, or credit capacity unless: (i) the information is required by law, (ii) the information is substantially job related, and the reasons for using the information are disclosed to me in writing, (If this option is checked, complete the question below) or (iii) I am seeking employment as a covered police or peace officer or with a federally insured bank or credit union (Oregon only).

Reasons why COMPANY considers credit information substantially job related (complete if this is the sole basis for obtaining credit information):

NY Applicants Only: I also acknowledge that I have received the attached copy of Article 23A of New York's Correction Law. I further understand that I may request a copy of any investigative consumer report by contacting STERLING. I further understand that I will be advised if any further checks are requested and provided the name and address of the consumer reporting agency.

Signature:



Today's Date:



Para informacion en espanol, visite <http://www.ftc.gov/credit> o escribe a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to <http://www.ftc.gov/credit> or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identify theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See <http://www.ftc.gov/credit> for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See <http://www.ftc.gov/credit> for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer-reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.ftc.gov/credit.

You may limit “prescreened” offers of credit and insurance you get based on information in your credit report. Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.ftc.gov/credit.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

FOR QUESTIONS OR CONCERNS REGARDING

PLEASE CONTACT

| | |
|---|---|
| Consumer reporting agencies, creditors and others not listed below | Federal Trade Commission Consumer Response Center- FCRA Washington, DC 20580 - 877-382-4357 |
| National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name) | Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 - 800-613-6743 |
| Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks) | Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 - 202-452-3693 |
| Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name) | Office of Thrift Supervision Consumer Programs Washington D.C. 20552 - 800- 842-6929 |
| Federal credit unions (words "Federal Credit Union" appear in institution's name) | National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 - 703-519-4600 |
| State-chartered banks that are not members of the Federal Reserve System | Federal Deposit Insurance Corporation Division of Compliance & Consumer Affairs Washington, DC 20429 - 877-275-3342 |
| Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission | Department of Transportation Office of Financial Management Washington, DC 20590 - 202-366-1306 |
| Activities subject to the Packers and Stockyards Act, 1921 | Department of Agriculture Office of Deputy Administrator-GIPSA Washington, DC 20250 - 202-720-7051 |