

**Mississippi Gaming Commission**  
“Notice of Position/Employment Change” Finding of Suitability  
File within 30 days of status change

**Termination**

**Effective Date:** \_\_\_\_\_

**Resignation**

**Transfer**

**Promotion**

**New Hire**

I.

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Position Title/Description \_\_\_\_\_

Work Permit # \_\_\_\_\_

If transfer, Casino transferred from \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Home Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip Code \_\_\_\_\_

Contact Phone (include area code) \_\_\_\_\_ - \_\_\_\_\_

Compliance or Human Resource Agent Responsible for Notification

II.

Company/Casino \_\_\_\_\_

Contact Name \_\_\_\_\_

Contact Email \_\_\_\_\_

Contact Phone (area code) \_\_\_\_\_ - \_\_\_\_\_

Mail to: Mississippi Gaming Commission

Attn: Investigations

P.O. Box 23577

Jackson, MS 39225-3577

Street: 620 North Street, Suite 200 Jackson, MS 39202

E-mail: Rmanagement@mgc.state.ms.us

Contact: Tmikula@mgc.state.ms.us

Phone: 601-576-3884