



CITY OF CARLIN
POLICE DEPARTMENT
P.O. BOX 969
CARLIN, NEVADA 89822
Bus: 775-754-2222 Fax: 775-754-2483
EMERGENCY: 911

SPECIAL EMPLOYMENT APPLICATION

1. Date		2. Firm Applying At			3. Position Applying For	
PERSONAL INFORMATION						
4. Name (last, first, middle)				5. Nicknames, aliases, etc.		6. Age
7. Sex		8. Date of Birth		9. Place of Birth		10. Social Security Number
11. Home Phone					12. Present Residence Address	
13. How Long?					14. Present Business Address	
15. How Long?					16. Eye Color	
17. Hair Color		18. Height		19. Weight		20. Scars, tattoos, etc.
CITIZENSHIP STATUS						
21. U.S. Citizen		22. Registration/Certificate Number		23. Date		24. Place
Naturalized						25. Court
Alien						
MARITAL STATUS						
26. Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Engaged						
27. Spouse's Full Name			28. Address		29. Home Phone Number	
30. Date of Birth			31. Place of Birth		32. Social Security Number	
33. Employer's Name			34. Employer's Address		35. Business Phone Number	
36. Occupation			37. Length of Employment			
APPLICANT'S PREVIOUS EMPLOYMENT						
38.	Employer		Address		Phone	
	From/To	Position	Duties		Reason For Leaving	
39.	Employer		Address		Phone	
	From/To	Position	Duties		Reason For Leaving	
40.	Employer		Address		Phone	
	From/To	Position	Duties		Reason For Leaving	

PREVIOUS RESIDENCES				
41. From / To	Street Address	City	State	Zip
42. From / To	Street Address	City	State	Zip
43. From / To	Street Address	City	State	Zip

PREVIOUS WORK CARD INFORMATION

44. Have you ever held a work card, work permit, registration card, or similar license or permit to work, in any capacity, in a licensed Nevada house of prostitution? Yes No

45. If the answer to Question 44 is yes, please fill out the following:

Date	Where	Name of Issuing Authority

46. Have you ever been denied or had a work card permit or other license revoked? Yes No

47. If the answer to Question 46 is yes, please fill out the following:

Date	Where	Name of Issuing Authority

ARRESTS, DETENTIONS

48. Have you ever been arrested, detained, charged, indicted, or summoned to answer for any criminal offense or violation for any reason whatsoever, regardless of the disposition? Yes No

49. If the answer to Question 48 is yes, please fill out the following:

Date of Arrest	Age	Charge	Location	Arresting Agency	Disposition

EMERGENCY CONTACT

50.	Name	Relationship		Phone
	Street Address	City	State	Zip
	Name	Relationship		Phone
	Street Address	City	State	Zip

CERTIFICATION AND AUTHORIZATION

The undersigned applicant certifies that the foregoing information is true and correct to the best of his/her knowledge and belief, and further that such certification is made with the full knowledge that any failure to disclose, misstate, or other attempt to mislead may be considered sufficient cause for denial or revocation of work permit to be employed in the requested capacity.

I authorize you to furnish the Carlin Police Department with any and all information that you have concerning myself, my work records, my reputation, my medical records, and my arrest records.

_____ Date

_____ Signature

DO NOT WRITE BELOW THIS LINE

- | | | | |
|---|-----------------------------------|----------------------------------|--------------------------------------|
| 1. Type of Application | <input type="checkbox"/> Original | <input type="checkbox"/> Renewal | <input type="checkbox"/> Replacement |
| 2. Medical Slip Obtained | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Date: _____ |
| 3. Photocopy of photo ID obtained | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Date: _____ |
| 4. Applicant signed copy of Regulations | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Date: _____ |
| 5. Fingerprint cards and photo obtained | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Date: _____ |
| 6. NCIC check done | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Date: _____ |

_____ Issuing Officer

_____ Date

COMMENTS

REGULATIONS FOR PROSTITUTES

1. All new prostitutes, prior to applying for a work card, shall obtain a vaginal culture and blood test. Proof of these tests must be shown at the time of application for the work card. All prostitutes must present a valid tax id number from the Nevada Department of Taxation before obtaining a work card.
2. An annual non-refundable fee of \$75.00 will be assessed for each work card or employment card. A \$30.00 fee will be charged to replace a lost or stolen work cards. Cards are good for one year from date of issue. Work cards will automatically expire if a leave of absence exceeds thirty (30) days unless good cause is shown.
3. Prostitutes are required to have weekly vaginal cultures and monthly blood tests administered. Doctor slips will be checked once each week and those for vaginal cultures shall be no more than seven (7) days old.
4. Applicants for work/employment cards must furnish proof of age, social security number, a photo identification card, complete work history, arrest records, and addresses must be filled out completely.
5. Falsifications or omissions on applications shall be grounds for denial or revocation of a work/employment card. While true names must be used on applications, prostitutes may use nicknames or other fictitious names with customers. Such nicknames or fictitious names are required to be listed on the application.
6. Prostitutes are permitted to dine in restaurants and to conduct personal business and shopping in Carlin between the hours of 7:00 a.m. and 7:00 p.m. Prostitutes will be appropriately attired in public. Under no circumstances will a prostitute approach or allow herself to be approached by a potential customer when out of the house. Prostitutes shall not be absent from their place of employment between 7:00 p.m. and 7:00 a.m.
7. Prostitutes are prohibited from exhibiting themselves to passersby in attempts to entice such persons into the house.
8. Prostitutes on vacation are not permitted to loiter about Carlin, and if traveling to another destination, must use the most expeditious transport out of Carlin.
9. Prostitutes will be permitted to obtain a bartenders employment card on approval by the Carlin Chief of Police.
10. No brothel shall employ any male person, except for the position of bartender.
11. Licensed individuals and firms offering repair, maintenance and similar services to the general public need not obtain an employment card to provide that same service to a brothel.
12. Prostitutes that choose to sever their employment from the brothel may reside in the community. Violations are punishable under both State law and City Ordinance and will be actively enforced.

13. Licensees, employees, and prostitutes are reminded that “out dates” from the brothel constitutes a violation of State law.
14. Prostitutes leaving the employment of any brothel in Carlin shall not be allowed to work at another brothel in Carlin in any capacity for a period of 30 days from the date of their termination.
15. These rules shall be posted in a conspicuous place accessible by all employees.

Certification:

The below-signed applicant certifies that the above rules and regulations have been read and fully understood, and that she has been furnished a copy of said rules and regulations.

The applicant further understands that failure to abide by these regulations or any other applicable laws or ordinances shall be grounds for the revocation of the employee’s work card and/or revocation of the Licensee’s Business license.

Applicant’s Signature

Date