## COMPLETED FORM MUST BE RETURNED IN PERSON TO HUMAN RESOURCES WITH PHOTO IDENTIFICATION



## TOWN OF NORTH ATTLEBOROUGH John Woodcock Administration Building **6 Morse Street**

North Attleborough, MA 02760

ORG. ID = TOWMA12-00417(MA Municipality - Employment Volunteers/Interns, Council on Aging, Program for children under 18)

## **CORI/SORI REQUEST FORM** EMPLOYEE/APPLICANT/VOLUNTEER

The Town of North Attleborough is registered under the provisions of M.G.L. c. 6 Sec. 172 to receive CORI for the purposes of screening current and otherwise qualified prospective employees, subcontractors and volunteers. As a prospective or current employee, subcontractor or volunteer, I understand that a CORI check will be submitted for my personal information to the Department of Criminal Justice Information Systems (DCJIS). I hereby acknowledge and provide permission to submit a CORI check for my information to the DCJIS. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing written notice of my intent to withdraw consent to a CORI check.

The Town of North Attleborough may conduct subsequent CORI checks within one year of the date this form was signed by me provided, however, that they must first provide me with written notice of this check. By signing below, I provide my consent to a CORI check and acknowledge that the information provided below is true an accurate. Additionally, I understand that the Town will request and receive sexual offender record information (SORI) from the Massachusetts Sex Offender Registry Board (SORB).

Employee/Applicant/Volunteer Signature			Date	
COM	PLETE THE FOLL	OWING INFORMATION	(PLEASE PRINT)	
			XXX	
LAST NAME	FIRST NAME	MIDDLE NAME	SOCIAL SECURITY # (last six digits required)	
MAIDEN NAME OR ALIAS	(IF APPLICABLE)	FATHER'S FULL NAME	MOTHER'S MAIDEN NAME	
DATE OF BIRTH		PLACE OF BIRTH		
CURRENT ADDRESS:		HOME PHONE#		
FORMER ADDRESS:CELL PHONE #			ELL PHONE #	
SEX:HEIGHT:_	ftin.	EYE COLOR:		
	please provide another	r form of government issued <u>pho</u> .Y be accepted if a photographic	otographic ID. Non-photographic ID (social ID is not provided.	
POSITION HELD OR APPL	IED FOR	DEPARTMENT:	DATE OF HIRE	
IF VOLUNTEER CHECK HI	ERE			
	BELOW TO B	SE COMPLETED BY EMPI	LOYER	
THE ABOVE INFORMA		ED BY REVIEWING THE FO HIC ID or NON-PHOTOGRAP	LLOWING GOVERNMENT ISSUED PHIC ID	
Government Issued II	)	Reviewed by		
CORI REQUESTED BY	<b></b>			
	Signature o	of CORI Authorized Employee	Revised: 12/2017	