



CRIMINAL OFFENDER RECORD INFORMATION (CORI) ACKNOWLEDGEMENT FORM

Reason for CORI

SUBJECT INFORMATION (An asterisk (\*) denotes a required field)

\*Name Last Name First Name Middle Initial Suffix

\*Former Last Names

\*Date of Birth Last 6 digits of Social Security # Gender M F Race

Father's Full Name Last Name First Name

Mother's Full Name Last Name First Name Maiden Name

Driver's License or ID # State of Issue Place of Birth

Height ft in Eye Color Email Address

Current Address Number & Street City/Town State Zip

Former Address Number & Street City/Town State Zip

Fairhaven Public Schools is registered under the provisions of M.G.L. c.6, § 172 to receive CORI for the purpose of screening current and otherwise qualified prospective employees, subcontractors, volunteers, license applicants, current licensees, and applicants for the rental or lease of housing.

As a prospective or current employee, subcontractor, volunteer, license applicant, current licensee, or applicant for the rental or lease of housing, I understand that a CORI check will be submitted for my personal information to the DCJIS. I hereby acknowledge and provide permission to Fairhaven Public Schools 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 Fairhaven Public Schools with written notice of my intent to withdraw consent to a CORI check.

FOR EMPLOYMENT, VOLUNTEER, AND LICENSING PURPOSES ONLY:

Fairhaven Public Schools may conduct subsequent CORI checks within one year of the date this Form was signed by me provided, however, that Fairhaven Public Schools must first provide me with written notice of this check.

By signing below, I provide my consent to a CORI check and affirm that the information provided above is true and accurate.

Signature of CORI Subject

Date

FOR OFFICE USE ONLY

The above information was verified by reviewing the following form of government-issued identification:

\_\_\_\_\_

Verified By Name of Authorized CORI Representative

Signature of Authorized CORI Representative

Date

The Fairhaven Public Schools, in partnership with families and the community, will ensure high-level learning for all children in a safe environment, so each can become independent, productive, and successful.