

**CRIMINAL OFFENDER RECORD INFORMATION (CORI)
ACKNOWLEDGEMENT FORM**

TO BE USED BY ORGANIZATIONS CONDUCTING CORI CHECKS FOR EMPLOYMENT, VOLUNTEER, SUBCONTRACTOR, LICENSING, AND HOUSING PURPOSES.

HADLEY 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 HADLEY 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 HADLEY PUBLIC SCHOOLS written notice of my intent to withdraw consent to a CORI check.

FOR EMPLOYMENT, VOLUNTEER, AND LICENSING PURPOSES ONLY:

the HADLEY PUBLIC SCHOOLS may conduct subsequent CORI checks within one year of the date this Form was signed by me provided, however, that HADLEY PUBLIC SCHOOLS 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 on Page 2 of this Acknowledgement Form is true and accurate.

SIGNATURE

DATE

SUBJECT INFORMATION:

Position applying for: Teacher/Staff _____ Volunteer _____ Sub. Teacher _____ Other _____

* Last Name	First Name	Middle Name	Suffix
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Maiden Name (or other name(s) by which you have been known)

*Date of Birth

Place of Birth

***Last Six Digits** of your Social Security Number: XXX - _____ - _____

Sex: _____ Height: _____ ft. _____ in. Eye Color: _____ Race: _____

*Driver's License or ID Number: _____ State of Issue: _____

Mother's First Name and Maiden Name

Father's First Name and Last Name

Current and Former Addresses:

Street Number & Name

City/Town

State

Zip

Street Number & Name

City/Town

State

Zip

The above information was verified by reviewing the following form(s) of government issued identification:

VERIFIED BY: _____
Name of Verifying Employee (Please Print)

Signature of Verifying Employee