

Child Evangelism Fellowship® of Massachusetts, Inc.

CORI REQUEST FORM

Child Evangelism Fellowship® of Massachusetts is requesting all the available criminal offender record information (CORI) on the following individual from the Criminal History Systems Board pursuant to Chapter 6 § 172H which mandates organizations primarily engaged in providing activities or programs to children 18 years of age or less that accepts volunteers, to obtain all CORI regarding staff and volunteers.

Applicant signature

APPLICANT INFORMATION (PLEASE PRINT OR TYPE)

LAST NAME FIRST NAME MIDDLE NAME

MAIDEN NAME OR ALIAS (IF APPLICABLE) PLACE OF BIRTH

DATE OF BIRTH SOCIAL SECURITY NUMBER ID Theft Index PIN *
(if applicable)

MOTHER'S MAIDEN NAME

CURRENT AND FORMER ADDRESSES:

SEX: ____ HEIGHT: ____ ft. ____ in. WEIGHT: ____ EYE COLOR: ____

STATE DRIVER'S LICENSE NUMBER: _____
(Include state of issue)

***THE ABOVE INFORMATION WAS VERIFIED BY REVIEWING THE FOLLOWING FORM OF GOVERNMENT ISSUED PHOTOGRAPHIC IDENTIFICATION: _____

REQUESTED BY: _____
SIGNATURE OF CORI AUTHORIZED EMPLOYEE



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