NEWTON PUBLIC SCHOOLS
Criminal Offender Record Information (CORI) Acknowledgement Form

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

City of Newton – Newton Public Schools (NPS) 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 **NPS** 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 **NPS** with written notice of my intent to withdraw consent to a CORI check.

FOR EMPLOYMENT, VOLUNTEER, AND LICENSING PURPOSES ONLY: The **NPS** may conduct subsequent CORI checks within one year of the date this Form was signed by me provided, however, that **NPS** 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 this Acknowledgement Form is true and accurate.

______________________________ ______________________________

SIGNATURE DATE

SUBJECT INFORMATION

*** Please be aware that if any information is incomplete this CORI can not be processed.**

School/Location: ______ Specify: Present or Desired Position with NPS ______ Volunteer (Yes or No) ______

Name: ______ First ______ Middle ______ Last ______ Suffix

Maiden Name (or other name(s) by which you have been known): ______

Date of Birth: ______ Place of Birth: ______ Social Security No. ______

Gender: ______ Race: ______ Eye Color ______ Height: ______ ft. ______ in.

Father's name: Last: ______ First: ______

Mother's Name: Last: ______ First: ______ Maiden: ______

Current Address: No. & Name, City/Town, State Zip: ______

Former Address: No. & Name, City/Town, State Zip: ______

Telephone # ______ Driver's License or ID Number: ______ State of Issue: ______

* *

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

VERIFIED BY: ______ Name of NPS Verifying Employee (Please Print) ______ Signature of Verifying Employee

9/11/13