

Town of Duxbury, Massachusetts

Form revised 04-27-18

Note: Please include a copy of your Driver's License, Passport or other government-issued photographic identification with this completed form.



DUXLL

CORI REQUEST FORM

The Town of Duxbury has been certified by the Criminal History Systems Board to conduct criminal records checks (CORI) for the purpose of screening employees, subcontractors, volunteers, interns, and licensing applicants.

As a below-described applicant, I understand that a criminal record check, which may include Sexual Offender Registry Information ("SORI"), will be conducted on me and that the results of same will not necessarily disqualify me. The information I provide below is correct to the best of my knowledge.

Applicant Signature

(date)

APPLICANT INFORMATION (PLEASE PRINT)

Last Name

First Name

Middle Name

Maiden Name or Alias (if applicable)

Place of Birth

Date of Birth

Last six digits of
Social Security Number

ID Theft Index PIN
(If applicable)*

Mother's Maiden Name: _____

Current Address: _____

Prior Address: _____

SEX: _____ HEIGHT: _____ WEIGHT: _____ EYE COLOR: _____

STATE DRIVERS' 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)

**The CHSB Identity Theft Index PIN Number is to be completed by those applicants that have been issued an Identity Theft Index PIN Number by the CHSB. (Certified agencies are required to provide all applicants the opportunity to include this information to ensure the accuracy of the CORI request process. All CORI request forms that include this field are required to be submitted to the CHSB via mail or by fax to 617-660-4614.*