

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

Stoneham Youth Softball Association is registered under the provision 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. Stoneham Youth Softball has authorized Edward Riley to submit CORI checks to the Massachusetts Department of Criminal Justice Information Service (DCJIS) on its behalf.

As a prospective or current employee, subcontractor, volunteer, license applicants, current licensees, and applicants 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 Stoneham Youth Softball Association 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 Stoneham Youth Softball Association with written notice of my intent to withdraw consent to a CORI check. I also understand that this form is a CORI acknowledgement form and I am entitled to additional consumer reporting disclosure forms under the Fair Credit Reporting Act.

FOR EMPLOYMENT, VOLUNTEER, AND LICENSING PURPOSES ONLY

Stoneham Youth Softball Association may conduct subsequent CORI checks within one year of the date this form was signed by me provided, however, that Stoneham Youth Softball Association 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 OF INFORMATION:

*Last Name: *First Name: Middle Name: Suffix:

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: _____ - _____

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

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

Mother's Full Maiden Name: Father's Full Name: _____

Current and Former Addresses:

Street Number & Name: City/Town: State: Zip:

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 (Please Print)