CRANBERRY CAPITAL
OF THE WORLD

Phone: 508-946-2405
Fax: 508-946-0058

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Town of Middleborough

Massachusetts

CORI REQUEST FORM

Town of Middleborough Board of Selectmen's Office has been certified by the Criminal History Systems Board for access to conviction and pending criminal case data. As an applicant/employee for _____, I understand that a criminal record check will be conducted for conviction and pending criminal case information only and that it will not necessarily disqualify me. The information below is correct to the best of my knowledge.

_____
Applicant/Employee Signature

APPLICANT/EMPLOYEE INFORMATION (PLEASE PRINT)

LAST NAME _____ FIRST NAME _____ MIDDLE NAME _____

MAIDEN NAME OR ALIAS (IF APPLICABLE) _____ PLACE OF BIRTH _____

DATE OF BIRTH _____ SOCIAL SECURITY NUMBER ___-___-___ (Requested, not required) 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

*The CHSB Identify 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.