

Town of Groton

GROTN

173 Main Street Groton, Massachusetts 01450 Tel: (978) 448-1145 Fax: (978) 448-1115

CORI REQUEST FORM

Town of Groton 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		
APPLICA	NT/EMPLOYEE INFORM	IATION (PLEASE P	RINT)	
LAST NAME	FIRST NAME	MIDDLE N	DLE NAME	
MAIDEN NAME OR ALIAS (IF APPLICABLE) PLAC		PLACE OF	E OF BIRTH	
DATE OF BIRTH: SOCIAL SECURITY #		ECURITY#	*ID Theft Index PIN (if applicable)	
MOTHER'S MAIDEN NAME	ana			
CURRENT AND FORMER ADDRES	SES:			
SEX: HEIGHT:ft.		EYE COLOR:		
STATE DRIVER'S LICENSE NUMBER: (Include State of Issue)				
***THE INFORMATION WAS VERI GOVERNMENT ISSUED PHOTOGR				
REQUESTED BY:SIGNATUR	RE CORI AUTHORIZED EMPLO	 YEE		

*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.