

Lexington Public Schools

146 Maple Street & Lexington, Massachusetts 02420

CRIMINAL OFFENDER RECORD INFORMATION (CORI) ACKNOWLEDGEMENT FORM

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

Lexington Public Schools is registered under the provisions of M.G.L. c.6, § 172 to receive CORI's 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 Department of Criminal Justice Information Services (DCJIS). I hereby acknowledge and provide permission to Lexington Public Schools 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 Lexington Public Schools with written notice of my intent to withdraw consent to a CORI check.

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

	Alleron Marketine	
Name Printed		
Signature	Date	



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CORI REQUEST FORM	I	Location/School		
ApplicantEmployee	e Volunteer	Student Intern	Other:	
Contract Service/Company	Name:			
Print: Last Name Fin		Jame	Middle Name	Suffix
Maiden Name (or other name(s) by which you ha	ve been known.)		
Date of Birth	Place of Birth			
Last six digits of your social se	curity number (RF	EQUIRED): XXX-		
Sex:fl	in. Eye	Color:	Race (optional):	
Mother's Full Maiden Name		Father's Full Name		
Current Street Number and Nar	me	City/Town	State	Zip
Former Street Number and Nan	ne	City/Town	State	Zip
The above information was ver	ified by reviewing	the following form(s) of government issued	d identification:
Driver's License or ID Number			State of Issue:	
f No Drivers License - Other F	orm of Photo ID:			
		yee Signature:		Date:
Level 3 SORI Record Found	YN			5/2012