

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

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

Amesbury Independent Jets is registered under the provisions 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.

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 DCJIS. I hereby acknowledge and provide permission to the Amesbury Independent Jets
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 **Amesbury Independent
Jets** written notice of my intent to withdraw consent to a CORI check.

FOR EMPLOYMENT, VOLUNTEER, AND LICENSING PURPOSES ONLY:

the Amesbury Independent Jets may conduct subsequent CORI checks within one year of the date this
Form was signed by me provided, however, that 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

SUBJECT INFORMATION: (A red asterisk (*) denotes a required field)

*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

*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

The above information was verified by reviewing the following form(s) of government-issued identification:

* _____

* _____

VERIFIED BY: * _____
Verifying Employee (Please Print)

* _____
Signature of Verifying Employee