C.O.R.I. REQUEST FORM

The Somerville Public Schools has been certified by the Criminal History Systems Board for access to all conviction, non-conviction data, and pending court activity for school-based personnel.

INSTRUCTIONS:

To be completed by prospective employee, tutor, volunteer, or student teacher. PRINT CLEARLY.

Position for which you are be	ing considered:(i.e.: Math	Teacher, Volunteer, S	tudent Teacher, etc.)	
LAST NAME	FIRST NAME	MIDDLE NAME	MAIDEN NAME/ALIAS (IF APPLICABLE)	
PLACE OF BIRTH	<u>I</u> DATE OF BIRT		SOCIAL SECURITY NUMBER (OPTIONAL)	
I.D. THEFT INDEX PIN * (IF APPLICABLE)	MOTHER'S MAIDEN NAMI	E		
SEX: HEIGHT:	FT IN. WEIGHT:	EYE COLOR:		
CURRENT ADDRESS:				
FORMER ADDRESS:				
(IF RESIDED IN CURRENT	ADDRESS LESS THAN 2 YEA	RS)		
never been convicted of a crit sexual misconduct or moral to be considered sufficient cause	nation supplied by me in support of minal offense. Further, I certify tha urpitude. I understand that if empl e for dismissal. I hereby release and at me from any liability, which may	t I have never been arre oyed, falsified statemen d hold harmless the Sor	ested for any offense involving nts, as part of my application shall	
Signature of Applicant		Date		
Theft Index PIN Number by include this information to e	the CHSB. Certified agencies are	required to provide all equest process. All CO	s that have been issued an identity l applicants the opportunity to RI Request forms that include this	
	ASE NOTE THAT A COPY OF A DTOGRAPHIC ID <u>MUST</u> BE SUP			
TO BE CO	MPLETED BY THE SCHOOL	DEPARTMENT DES	IGNEE ONLY:	
	E WAS VERIFIED BY REVIEWING OTOGRAPHIC IDENTIFICATION:	THE FOLLOWING FO	RM OF U.S.	
	US PASSPORT OR	SOCIAL SECURITY C	ARD 🛛 BIRTH CERTIFICATE	
REQUESTED BY:				
Central Ac	This form can be downloa Iministration Intranet webpage >		Payroll Forms	