

**Blackstone Valley Regional Vocational Technical High School**

65 Pleasant Street · Upton, MA 01568

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

Blackstone Valley Regional Vocational Technical High School is registered under the provisions of M.G.L. Chapter 6, Section 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: Blackstone Valley Regional Vocational Technical High School 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 Blackstone Valley Regional Vocational Technical High School with written notice of my intent to withdraw consent to a CORI check. For Employment, Volunteer and Licensing purposes only: Blackstone Valley Regional Vocational Technical High School may conduct subsequent CORI checks within one year of the date this form was signed by me provided, however, Blackstone Valley Regional Vocational Technical High School 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 this Acknowledgment Form is true and accurate.

**Applicant/Employee Signature (please be sure to sign above)**

*PLEASE PRINT LEGIBLY – all fields REQUIRED to process CORI*

**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**

**Last Six Digits of Your Social Security Number** \_\_\_ - \_\_\_ - \_\_\_

**Sex:** \_\_\_ **Height:** \_\_\_ ft \_\_\_ in. **Eye Color:** \_\_\_\_\_ **Race:** \_\_\_\_\_

**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:** \_\_\_\_\_

**Name of Verifying Employee (Please Print) (BVT designated staff only)**

\_\_\_\_\_  
**Signature of Verifying Employee (BVT designated staff only)**

**Approved:** \_\_\_\_\_

**Assistant Superintendent-Director/Principal**