SSELS
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EOEA

CORI REQUEST FORM

South Shore Elder Services, Inc. has been certified by the Criminal History Systems Board for access to all the available criminal offender record information on the following individual from the Criminal History Systems Board pursuant to Chapter 6 § 172 C that mandates agencies which employ or accept as a volunteer or refer for employment any individual who will provide care, treatment, education, training, transportation, delivery of meals, instruction, counseling, supervision, recreation or other services in a home or in a community based setting for any elderly person or disabled person or who will have any direct or indirect contact with such elderly or disabled persons or access to such person's files shall obtain all available CORI from the Criminal History Systems Board prior to employing such individual, accepting such individual as a volunteer or referring such individual for employment.

APPLICANT/EMPLOYEE INFORMATION (PLEASE PRINT)

_____ _____ _____
LAST NAME FIRST NAME MIDDLE NAME

_____ _____
MAIDEN NAME OR ALIAS (IF APPLICABLE) PLACE OF BIRTH

_____ _____-_____-_____ _____
DATE OF BIRTH SOCIAL SECURITY NUMBER MOTHERS MAIDEN NAME
(last 6 digits required)

ADDRESS: _____

_____

FORMER ADDRESS:_____

_____

Sex:_____ Height :_____ft.___in. Weight: _____ Eye color: _____

STATE DRIVER'S LICENSE NUMBER: _____

**THE ABOVE INFORMATION WAS VERIFIED BY REVIEWING THE FOLLOWING FORM OF GOVERNMENT ISSUED PHOTOGRAPHIC IDENTIFICATION: _____

REQUESTED BY: _____

SIGNATURE OF CORI AUTHORIZED EMPLOYEE