Henry J. Mroz Central Administration Offices
Edith Nourse Rogers School
43 Highland Street
Lowell, Massachusetts 01852

LOWPS Ch 385 G

Michael Cassidy
Human Resource Director

LOWELL PUBLIC SCHOOLS
LOWELL, MASSACHUSETTS

Tel: (978) 674-2043
Email: mcassidy@lowell.k12.ma.us

CORI REQUEST FORM

Lowell Public Schools has been certified by the Criminal History Systems Board for access to all criminal case data including conviction, non-conviction and pending. As an applicant/employee for the position _____, I understand that a criminal record check is required and that its results may not necessarily disqualify me. The information below is correct to the best of my knowledge.

_____
Applicant/Employee Signature

*** Requesting School/ Department** _____

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 (Requested but not required)	**MOTHER'S MAIDEN NAME**	**ID Theft Index PIN** (if applicable)

CURRENT ADDRESS: _____
FORMER ADDRESSES: _____
_____

SEX: ____ **HEIGHT** ___ **ft.** ___ **in.** **WEIGHT:** _____ **EYE COLOR:** _____

STATE DRIVER'S LICENSE NUMBER: _____
(include state of issue)

REQUESTED BY: _____
SIGNATURE OF CORI AUTHORIZED EMPLOYEE

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

A **legible** copy of this ID must be sent to Personnel to be placed on file.

Copy ID Here

Revised 5/08

We Promote the Love of Learning