



Dartmouth Public Schools
 8 Bush Street, Dartmouth, MA 02748
 Phone: 508-997-3391 Fax: 508-991-4184
 Website: dartmouthps.schoolfusion.us

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

Please complete and sign the acknowledgement forms and submit, in person, along with your driver's license or other government issued identification.

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

DARTMOUTH PUBLIC SCHOOLS is registered under the provision 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 DARTMOUTH PUBLIC SCHOOLS 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 the DARTMOUTH PUBLIC SCHOOLS with written notice of my intent to withdraw consent to a CORI check.

FOR EMPLOYMENT, VOLUNTEER, AND LICENSING PURPOSES ONLY: The DARTMOUTH PUBLIC SCHOOLS may conduct subsequent CORI checks within one year of the date this Form was signed by me provided, however, that the DARTMOUTH PUBLIC SCHOOLS 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 Acknowledgment Form is true and accurate.

 Signature

 Date

REASON FOR CORI REQUEST

- Volunteer Chaperone Pre-Practicum Employment Position: _____
 Substitute (*Choose one: Teacher, TA, Nurse, Monitor, Custodian, Food Service*)

If applicable:

School: _____

Child's Name: _____

"Quality Education for All Learners"

The Dartmouth Public Schools, in partnership with parents and the community, will deliver challenging, standards-based instruction for all students that fosters academic, physical, social and emotional development. Utilizing data analysis to drive instruction, we will implement specific strategies to support every student to think critically, solve problems and become a responsible, contributing citizen. Our high school graduates will possess the required skills and knowledge necessary to thrive in their academic and vocational ambitions.



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 Last Name First Name Middle Name Suffix

 Maiden Name (or other names(s) by which you have been known)

 Date of Birth Place of Birth

 Primary Phone Number Email address

Last six (6) digits of your Social Security Number: XXX-

Sex: _____ Height: _____ ft. _____ in. Eye Color: _____ Race: _____

Driver's License or ID Number: _____

 Mother's Full Maiden Name Father's Full Name

Current Address:

 Street Number and Name City/Town State Zip

Former Address:

 Street Number and Name City/Town State Zip

OFFICE USE ONLY

GOVERNMENT ISSUED IDENTIFICATION USED TO VERIFY INFORMATION

- Valid Driver's License** _____ **Passport** **Government Issued Photo Identification Card**
 State

VERIFIED BY: _____

Name of Verifying Employee (Please Print)

 Signature of Verifying Employee

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