



# Town of Lexington, Massachusetts

## SELECT BOARD OFFICE

### CORI REQUEST FORM

The Lexington Select Board has been certified by the Criminal History Systems Board for access to conviction and pending criminal case data. As an applicant/employee for \_\_\_\_\_, I understand that a criminal record check will be conducted for conviction and pending criminal case information only and that it will not necessarily disqualify me. The information below is correct to the best of my knowledge.

\_\_\_\_\_  
Date Applicant/Employee Signature (unless preempted by law)

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#### APPLICANT/EMPLOYEE INFORMATION (please print)

_____ LAST NAME	_____ FIRST NAME	_____ MIDDLE NAME
_____ RACE	_____ DATE OF BIRTH	_____ SOCIAL SECURITY NO. (only last six digits required)
_____ MOTHER FIRST/LAST NAME	_____ MOTHER MAIDEN NAME	_____ FATHER FIRST/LAST 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)

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#### \*\*\*BELOW TO BE COMPLETED BY TOWN EMPLOYEE

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

REQUESTED BY: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF TOWN OF LEXINGTON CORI AUTHORIZED EMPLOYEE DATE

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\*The CHS Identify Theft Index Pin Number is to be completed by those applicants that have been issued an Identify Theft Index PIN Number by the CHSB. Certified agencies are required to provide all applicants the opportunity to include this information to ensure the accuracy of the CORI request process.