



The Commonwealth of
 Massachusetts
 Department of Public Safety
 One Ashburton Place, Room 1301
 Boston, Massachusetts 02108-1618
 Phone (617) 727-3200
 Fax (617) 727-5732

CORI REQUEST FORM

Massachusetts Department of Public Safety has been certified by the Criminal History Systems Board for access to conviction and pending criminal case data on owner/operators of amusement and/or traveling carnivals for licensing purposes. As an applicant 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.

 APPLICANT/EMPLOYMENT 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
 (Required)

 CURRENT ADDRESS

SEX: _____ HEIGHT: ___ft___ WEIGHT: _____, EYE COLOR: _____

STATE DRIVER'S LICENSE NUMBER: _____
 Include a copy of your driver's license or Government issued identification

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

 REQUESTED BY: _____
 SIGNATURE OF CORI AUTHORIZED EMPLOYEE