E. Bridgewater Youth Lacrosse League

Criminal Offender Record Information (CORI) Acknowledgement Form

The East Bridgewater Youth Lacrosse League, is registered under the provisions of M.G.L. c.6, § 172 to receive CORI for the purpose of screening current and otherwise qualified prospective employees and volunteers.
As a prospective volunteer/applicant for the position of
The East Bridgewater Youth Lacrosse League may conduct subsequent CORI checks within one year of the date this form was signed by me provided, however, that the EBLAX 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 Acknowledgement Form is true and accurate.
Signature Date

1 OF 2

SUBJECT INFORMATION: (An asterisk (*) denotes a required field)

*Last Name	*First Name		Middle Name		Suffix
Maiden Name or ot	her name(s) by which	you have been	known		
*Date of Birth	Place of Birth		-		
*Last 6 digits of yo	ur social security numb	oer:			
Sex: Heig	ht: Feet Inches	Eye (Color:	Race: _	
State Driver's Lice	nse Number:		(State of	f issue)	
Mother's Full Maio	len Name	Father's Full	Name		
Current & Forme	r Addresses:				
Street Number & N	fame City/1	City/Town		State	Zip
Street Number & N	ame City/1	Town		State	Zip

identification:			And the state of t		
			eccentrate to the specific term.		
VERIFIED BY:	Name of Verifying E	Employee (plea	se print)		
	Signature of Verifyir	ng Employee	Date		