



# OFFICE FOR HEALING AND PREVENTION

DIOCESE OF WORCESTER

**PLEASE RETURN THIS FORM TO:  
YOUR PARISH OR SCHOOL**

**RCDOW  
FE480**

## CORI REQUEST FORM

The Roman Catholic Diocese of Worcester has been certified by the Criminal History Systems Board for access and expanded access to conviction and pending criminal case data. As an applicant/ employee/ volunteer for the position of \_\_\_\_\_ 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/Employee/Volunteer Signature

**PARISH/SCHOOL:** \_\_\_\_\_

### APPLICANT/EMPLOYEE/VOLUNTEER INFORMATION (PLEASE PRINT)

\_\_\_\_\_  
LAST NAME

\_\_\_\_\_  
FIRST NAME

\_\_\_\_\_  
MIDDLE NAME

\_\_\_\_\_  
MAIDEN NAME OR ALIAS (IF APPLICABLE)

\_\_\_\_\_  
PLACE OF BIRTH

\_\_\_\_\_  
DATE OF BIRTH

\_\_\_\_\_  
SOCIAL SECURITY #  
(Requested but not required)

\_\_\_\_\_  
ID Theft Index Pin (if Applicable)

\_\_\_\_\_  
MOTHER'S MAIDEN NAME

\_\_\_\_\_  
MAILING ADDRESS:

SEX: \_\_\_\_\_ HEIGHT: \_\_\_\_\_ ft. \_\_\_\_\_ in. WEIGHT: \_\_\_\_\_ EYECOLOR: \_\_\_\_\_

\_\_\_\_\_  
STATE DRIVER'S LICENSE NUMBER:

**\*\*\*THE ABOVE INFORMATION WAS VERIFIED BY REVIEWING AND ATTACHING A COPY OF THE FOLLOWING FORM OF GOVERNMENT ISSUED PHOTOGRAPHIC IDENTIFICATION:** \_\_\_\_\_

Information verified by: \_\_\_\_\_

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

*Francis J. Nugent*  
\_\_\_\_\_  
SIGNATURE OF CORI AUTHORIZED EMPLOYEE  
Revised 05/10/2008