

**Winthrop Public Schools**  
Town Hall - One Metcalf Square  
Winthrop, Massachusetts 02152  
617-846-5500 x 7110 Fax 617-539-0891

**School Committee**  
Jennifer Powell, Chair  
Julie Barry, Vice Chair  
Jim Letterie, Town Council President  
Suzanne Leonard  
Gus Martucci  
Layne Petrie  
Suzanne Swope



**Lisa A. Howard, M.Ed.**  
Superintendent of Schools

WNTPS  
CH385  
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**CORI REQUEST FORM**

Winthrop Public Schools has been certified by the Criminal History Systems Board for access to all criminal case data including conviction, non-conviction and pending. As an applicant/employee for the position of \_\_\_\_\_, I understand that a criminal record check will be conducted for conviction, non-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 Signature

**APPLICANT/EMPLOYEE INFORMATION (PLEASE PRINT)**

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ MIDDLE NAME \_\_\_\_\_

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

DATE OF BIRTH: \_\_\_\_\_ \*SOCIAL SECURITY NUMBER: \_\_\_\_\_  
**\* LAST 6 DIGITS ARE REQUIRED**

MOTHER'S MAIDEN NAME \_\_\_\_\_ \*ID THEFT INDEX PIN (IF APPLICABLE) \_\_\_\_\_

CURRENT AND FORMER ADDRESSES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SEX: \_\_\_\_\_ HEIGHT: \_\_\_\_\_ FT \_\_\_\_\_ IN

EYE COLOR \_\_\_\_\_ STATE DRIVERS LICENSE NUMBER \_\_\_\_\_

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

*\*The CHSB Identify Theft Index Pin Number is to be completed by those applicants that have been issued an Identity 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*

REQUESTED BY: LISA A. HOWARD

\_\_\_\_\_  
SIGNATURE OF CORI AUTHORIZED EMPLOYEE