PO Box 3437, Nantucket, MA 02584 <u>ackmurraycamp@gmail.com</u> www.murraycampnantucket.com

# MURRAY CAMP CRIMINAL OFFENDER RECORD INFORMATION (CORI) ACKNOWLEDGEMENT FORM

TO BE USED BY ORGANIZATIONS USING CONSUMER REPORTING AGENCIES TO CONDUCT CORI CHECKS FOR EMPLOYMENT, VOLUNTEER, SUBCONTRACTOR, LICENSING, AND HOUSING PURPOSES.

MURRAY CAMP OF NANTUCKET ISLAND, INC. 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, subcontractors, volunteers, license applicants, current licensees, and applicants for the rental or lease of housing.

MARY T. MURRAY has authorization to submit CORI checks to the Massachusetts Department of Criminal Justice Information Services (DCJIS) on its behalf.

As a prospective or current employee, subcontractor, volunteer, license applicant, current licensee, or applicant for the rental or lease of housing, I understand that a CORI check will be submitted for my personal information to the DCJIS. I hereby acknowledge and provide permission to submit a CORI check for my information to the DCJIS. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing written notice of my intent to withdraw consent to a CORI check. I also understand that this form is a CORI acknowledgement form and I am entitled to additional consumer reporting disclosure forms under the Fair Credit Reporting Act. If I have not received those disclosures, I should contact to request this information.

FOR EMPLOYMENT, VOLUNTEER, AND LICENSING PURPOSES ONLY: Educational Psychologist Mary T. Murray, on behalf of Murray

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Camp of Nantucket Island, Inc. may conduct subsequent CORI checks within one year of the date this Form was signed by me provided, however, that 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.		
	_ Applicant Signature	
Parent/Legal Guardian (signature required if applicant is under age 18)		
	DATE	
SUBJECT INFORMATION: (A red asterisk (*) denotes a required field)		

\*Last Name \*First Name Middle Name Suffix

## PO Box 3437, Nantucket, MA 02584 <u>ackmurraycamp@gmail.com</u> www.murraycampnantucket.com

Maiden Name (or other name(s) by which you have been known)	
*Date of Birth Place of Birth*Last Six Digits of Your Social Security Number:	
Sex: Height:ft in Eye Color:	
Driver's License or ID Number:	
State of Issue:	
Mother's Full Maiden Name / Father's Full Name	
Current and Former Addresses:	
Street Number & Name, City/Town, State Zip	
Street Number & Name, City/Town, State Zip	
The above information was verified by reviewing the following form(s) of government-issued identification:	

PO Box 3437, Nantucket, MA 02584 <u>ackmu</u> www.murraycampnantucket.com	irraycamp( <i>a</i> )gmail.com
VERIFIED BY:	
Name of Verifying Employee (Please Print)	Date
Signature of Verifying Employee	 Date