

BLACKSTONE-MILLVILLE REGIONAL SCHOOL DISTRICT  
175 LINCOLN STREET  
BLACKSTONE, MASSACHUSETTS 01504  
(508) 883-4400 OPTION #9 (508) 883-9892 FAX LINE  
Website: www.bmrtd.net

**CORI ACKNOWLEDGMENT FORM**

BMRSD  
CH 385 – G / REV 2018

SCHOOL:  Blackstone-Millville Regional High School  A.F. Maloney Elementary School  
 F.W. Hartnett Middle School  Millville Elementary School  
 J.F. Kennedy Elementary School  District Wide

POSITION:  Employee  Substitute  Volunteer  Other

Blackstone-Millville Regional School District has been certified by the Criminal History Systems Board for access to conviction and pending criminal case data. As an employee, prospective employee, substitute or volunteer for the above position, 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 Signature Date

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

\_\_\_\_\_  
LAST NAME FIRST NAME MI SUFFIX (Jr., Sr., etc.)

FORMER LAST NAME 1: \_\_\_\_\_  
FORMER LAST NAME 2: \_\_\_\_\_  
FORMER LAST NAME 3: \_\_\_\_\_

\_\_\_\_\_  
DATE OF BIRTH SOCIAL SECURITY NUMBER PLACE OF BIRTH  
MM/DD/YYYY LAST SIX DIGITS

SEX: \_\_\_\_\_ HEIGHT: \_\_\_\_\_ ft. \_\_\_\_\_ in. EYE COLOR: \_\_\_\_\_ RACE: \_\_\_\_\_

DRIVER'S LICENSE OR ID NUMBER: \_\_\_\_\_ STATE OF ISSUE: \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_  
LAST FIRST

MOTHER'S NAME: \_\_\_\_\_  
LAST FIRST MAIDEN NAME

CURRENT ADDRESS: \_\_\_\_\_

FORMER ADDRESS: \_\_\_\_\_

The above information was verified by reviewing the following form of government issued identification  
\*\*\*COPY OF YOUR DRIVER'S LICENSE OR OTHER PICTURE I.D. IS REQUIRED\*\*\*

IDENTIFICATION TYPE: \_\_\_\_\_  
NAME/DEPARTMENT OF VERIFYING EMPLOYEE: \_\_\_\_\_