

## **CORI/SORI REQUEST FORM**

Northern Essex Community College has been certified by the Criminal History Systems Board for access to conviction and pending criminal case data. As an applicant, student, or employee, I understand that a record check will be conducted. The information below is correct to the best of my knowledge.

## APPLICANT/STUDENT/EMPLOYEE SIGNATURE

LAST NAME (PLEASE PRINT)		FIRST NAM	E	MIDDLE NAME
MAIDEN NAME O	R ALIAS (IF APPL)	ICABLE)	PLACE OF BIRTH	
		f your Social Security # is requested, not required. <sup>f</sup> you fail to provide your Social Security #, the college will be unable		
<b>CURRENT &amp; FOR</b>	MER ADDRESSES	S (past 10 years).		
From (Date) To (		o (pust 10 years).		
SEX: H	EIGHT: ft	_in. WEIGHT	EYE CO	DLOR:
STATE DRIVER'S	LICENSE NUMBEI	R:		
	FORMATION WA	S VERFIED BY	REVIEWING THE	FOLLOWING FORM OF
REQUESTED BY: _				
			IZED EMPLOYEE	