



# Town of Hull



BOARD OF SELECTMEN

**GHULLQ**

MUNICIPAL BUILDING  
HULL, MASSACHUSETTS 02045  
(617) 925-2000

## CORI REQUEST FORM

The Town of Hull has been certified by the Criminal History Systems Board for access to conviction data. As an applicant for

### APPLICANT/EMPLOYEE INFORMATION (PLEASE PRINT)

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 Signature

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

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

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

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

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

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

\_\_\_\_\_  
SOCIAL SECURITY NO

\_\_\_\_\_  
MOTHERS MAIDEN NAME

\_\_\_\_\_  
FORMER ADDRESSES:

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

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

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

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

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