



*City of Marlborough*  
*Council on Aging and Senior Center*

40 New Street  
Marlborough, Massachusetts 01752  
Telephone (508) 485-6492 Facsimile (508) 460-3726

**Chapter 6 & 172C CORI REQUEST FORM**

Marlborough Council on Aging is requesting all the available criminal offender record information on the following individual from the Criminal History Systems Board pursuant to Chapter 6 & 172C that mandates agencies which employ or accept as a volunteer or refer for employment any individual who will provide care, treatment, education, training, transportation, delivery of meals, instruction, counseling, supervision, recreation, or other services in a home or in a community based setting for any elderly person or disabled person or who will have an direct or indirect contact with such elderly or disable persons or access to such person's files shall obtain available CORI from the Criminal History System Board prior to employing such individual, accepting such individual as a volunteer or referring such individual to volunteer.

**Applicant signature:** \_\_\_\_\_  
(Unless otherwise preempted by law)

**VOLUNTEER INFORMATION (PLEASE PRINT)**

\_\_\_\_\_  
(Last Name) (First Name) (Middle Name)

\_\_\_\_\_  
MAIDEN NAME OR ALIAS (if applicable) PLACE OF BIRTH

\_\_\_\_\_  
Date of Birth XXX-\_\_-\_\_\_\_  
Social Security Number Mother's Maiden Name  
(last 6 digits required)

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

Requested by: \_\_\_\_\_  
Signature of CORI authorized employee