



# TOWN OF HATFIELD MASSACHUSETTS

MEMORIAL TOWN HALL  
59 Main Street  
Hatfield, MA 01038

## Consent Form to a CORI Check

A Criminal Offender Record Information (CORI) check shall be performed on individuals prior to employment. By signing in the space provided below, you are allowing the Town of Hatfield to conduct a CORI check.

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

Date \_\_\_\_\_

### Information Required for CORI Check:

Full Name (including middle name/initial) \_\_\_\_\_

Maiden Name or Alias  
(if applicable) \_\_\_\_\_

Date of Birth \_\_\_\_\_

Last 6 numbers of Social Security Number \_\_\_\_\_

Mother's Name \_\_\_\_\_

Father's Name \_\_\_\_\_

Sex:

- Male
- Female
- Unknown

Race:

- American Indian
- Asian
- Black
- White
- Unknown