



Girl Scouts of Central and Western Massachusetts, Inc.

800-462-9100 (in MA) or 413-584-2602 · gscwm.org

Worcester Service Center:

81 Gold Star Boulevard, Worcester, MA 01606-2813  
Fax 508-852-7674

Holyoke Service Center:

301 Kelly Way, Holyoke, MA 01040-9685  
Fax 413-536-1383

## CRIMINAL OFFENDER RECORD INFORMATION (CORI) ACKNOWLEDGEMENT FORM INSTRUCTIONS

### PLEASE READ CAREFULLY

Please follow the instructions below to ensure that your CORI form is complete and accurately submitted to GSCWM. Incomplete forms will not be processed. GSCWM is mandated by the Commonwealth of Massachusetts to do a Criminal History (CORI) check on all prospective and current volunteers who work directly with girls. CORI is used as a screening tool in the volunteer placement process. Volunteers are required to submit a CORI every 3 years.

### SIX STEPS TO ENSURING YOUR CORI IS COMPLETE

1. Obtain a current copy of the form from our website ([www.gscwm.org/pdfs/OL\\_VolunteerCORI.pdf](http://www.gscwm.org/pdfs/OL_VolunteerCORI.pdf)) or by contacting our customer service staff ([info@gscwm.org](mailto:info@gscwm.org) or 800-462-9100)
2. Sign and date the Criminal Offender Record Information (CORI) Acknowledgement Form (pg. 2 of 3).
3. Fill out the actual CORI form (pg. 3 of 3). When filling out the form be sure:
  - a. your full legal name is on the form and easy to read;
  - b. your birth date is complete with Month, Date, and Year;
  - c. any maiden or alias names are provided and easy to read;
  - d. to include the last **SIX (6)** digits of your social security number;
  - e. to put your current & former addresses on the form.
4. Attach a copy of the front of a government issued form of photo identification to your completed forms (driver's license, state ID, military ID or passport.). If your current address is not on the front of your ID, include a copy of the back of the ID with the new address on it. *This is not a requirement, but often helps to clarify spelling, dates, etc. and can eliminate processing delays.*
5. Have your completed CORI form signed by a "GSCWM Authorized CORI Signer":
  - 1) a GSCWM staff member
  - 2) a Service Unit Team member
  - 3) a Girl Scouting 102: Great Beginnings or any other Council Trainer
  - 4) a Notary of Public.

**SIGNERS MUST ALSO BE CURRENT GIRL SCOUT MEMBERS AND MUST HAVE A CURRENT, APPROVED CORI ON FILE WITH GSCWM. AUTHORIZED SIGNERS CAN ONLY SIGN IF THEY SEE BOTH YOU AND YOUR GOVERNMENT ISSUED PHOTO ID IN PERSON.** They are verifying that the person in front of them is likely the person listed on the ID and on the CORI form.
6. Submit the completed authorization, signed/notarized form and copy of your ID to GSCWM. GSCWM will contact you if there are any concerns regarding CORI results.

**Note:** *Alternatively, you may have your CORI form signed by an authorized Notary of Public. Once the Notary reviews your form and identification document and stamps your form, you may send the form to a GSCWM service center electronically, mail or in person. ELECTRONIC FORMS ARE ONLY ACCEPTED WHEN SIGNED BY A NOTARY OF PUBLIC.*

Questions: Call 800-462-9100 (toll free in MA) or 413-584-2602



Worcester Service Center:  
81 Gold Star Boulevard, Worcester, MA 01606  
Fax 508-852-7674

Holyoke Service Center:  
301 Kelly Way, Holyoke, MA 01040  
Fax 413-536-1383

**Criminal Offender Record Information (CORI) Acknowledgement Form**

TO BE USED BY ORGANIZATIONS CONDUCTING CORI CHECKS FOR EMPLOYMENT, VOLUNTEER,  
SUBCONTRACTOR, LICENSING, AND HOUSING PURPOSES

Girl Scouts of Central and Western Massachusetts is registered under the provisions of M.G.L. c. 6, § 172 to receive CORI for the purpose of screening current and otherwise qualified prospective employees, subcontractors, volunteers, license applicants, current licensees, and applicants for the rental or lease of housing.

As a prospective or current employee, subcontractor, volunteer, license applicant, current licensee, or applicant for the rental or lease of housing, I understand that a CORI check will be submitted for my personal information to the DCJIS (Department of Criminal Justice Information Services). I hereby acknowledge and provide permission to Girl Scouts of Central and Western Massachusetts to submit a CORI check for my information to the DCJIS. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing Girl Scouts of Central and Western Massachusetts with written notice of my intent to withdraw consent to a CORI check.

**FOR EMPLOYMENT, VOLUNTEER, AND LICENSING PURPOSES ONLY:**

The Girl Scouts of Central and Western Massachusetts may conduct subsequent CORI checks within one year of the date this Form was signed by me provided, however, that Girl Scouts of Central and Western Massachusetts must first provide me with written notice of this check.

By signing below, I provide my consent to a CORI check and acknowledge that the information provided on Page 2 of this Acknowledgement Form is true and accurate.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\*Please attach a photocopy of your government issued photo ID.

**SUBJECT INFORMATION** (please print):

\_\_\_\_\_  
Last Name                      First Name                      Middle Name                      Suffix

\_\_\_\_\_  
Maiden Name (or other name(s) by which you have been known)

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

Last Six Digits of Your Social Security Number: \_\_\_\_ - \_\_\_\_      Sex: \_\_\_\_      Height: \_\_\_\_ ft. \_\_\_\_ in.

Eye Color: \_\_\_\_                      Race: \_\_\_\_

Driver's License or ID Number: \_\_\_\_                      State of Issue: \_\_\_\_

\_\_\_\_\_  
Mother's Full Maiden Name                      Father's Full Name

Current (1) and Former (2) Addresses:

(1) \_\_\_\_\_  
Street Number & Name                      City/Town                      State                      Zip

(2) \_\_\_\_\_  
Street Number & Name                      City/Town                      State                      Zip

\_\_\_\_\_  
Phone Number                      E-mail Address

**Please complete the following if known/as applicable:**

Troop #: \_\_\_\_\_ Town you're volunteering in: \_\_\_\_\_ Service Unit: \_\_\_\_\_

Please identify your role with the troop, service unit or council:

\_\_\_ Leader/Assistant Leader/Advisor    \_\_\_ Parent    \_\_\_ Other: \_\_\_\_\_

\_\_\_ I am new to this role (i.e. new leader)    \_\_\_ I am returning to this role

The above information was verified by reviewing the following form(s) of government issued identification:

\_\_\_\_\_

VERIFIED BY: \_\_\_\_\_

\_\_\_\_\_  
Name of Verifying Employee or Volunteer (Please Print)

\_\_\_\_\_  
Signature of Verifying Employee or Volunteer