

EDUCATION

	Name of School	Course of Study	Years Completed	Diploma/Degree
High School		N/A		
College				

Describe any specialized training, skills and extra-curricular activities that you are involved in.

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

Employer	Dates Employed From To	WORK PERFORMED
Address		
Telephone Number	Hourly Rate/Salary	
Job Title Supervisor		
Reason for Leaving	May we contact them? YES NO	

Employer	Dates Employed From To	WORK PERFORMED
Address		
Telephone Number	Hourly Rate/Salary	
Job Title Supervisor		
Reason for Leaving	May we contact them? YES NO	

REFERENCES

(Please list three)

Name	Address	Phone #

Signature: _____

Date: _____



Town of Dartmouth

400 Slocum Road
Dartmouth, MA 02747
Ph# (508) 910-1812 Fax# (508) 910-1885
www.town.dartmouth.ma.us

Park Department

DMPRD
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Timothy J. Lancaster, Superintendent

CORI REQUEST FORM

Dartmouth Park & Recreation Department has been certified by the Criminal History Systems Board for access to conviction and pending criminal case data. As an applicant/employee for the Town of Dartmouth, 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/Employee Signature

Last Name

First Name

Middle Name

Maiden Name or Alias (if applicable)

Place of Birth

Date of Birth: _____

Social Security Number: _____ - _____ - _____
(requested but not required)

Mother's Maiden Name: _____

Current and Former Addresses: _____

Sex: _____ Height: _____ Weight: _____ Eye Color: _____

State Driver's License Number: _____

*The information was verified with the following form of government issued photographic identification:

Requested by: _____

Signature of CORI Authorized Employee