



Girl Scouts of Central and Western Massachusetts  
413-584-2602/508-365-0115 [info@gscwm.org](mailto:info@gscwm.org) [www.gscwm.org](http://www.gscwm.org)

UPDATED  
MARCH 2021

Worcester Leadership Center  
115 Century Drive  
Worcester, MA 01606-1244

Holyoke Leadership Center  
301 Kelly Way  
Holyoke, MA 01040-9685

---

## 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 Acknowledgement form every 3 years.

### SIX STEPS TO ENSURING YOUR CORI FORM IS COMPLETE

1. Obtain a current copy of the form from our website (<http://www.gscwm.org/en/resources/forms.html>) or by contacting our customer service staff ([info@gscwm.org](mailto:info@gscwm.org); 413-584-2602/508-365-0115).
2. Sign and date the Criminal Offender Record Information (CORI) Acknowledgement form.
3. Complete the Subject Information section. When filling out the form, be sure:
  - your full legal name is on the form and easy to read
  - your birth date is complete with Month, Date, and Year
  - any maiden or alias names are provided and easy to read
  - to include the last SIX (6) digits of your social security number (required for **ALL** U.S.A. Citizens)
  - you provide your current street address (not a PO Box)
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, 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 clarify spelling, dates, etc., and can eliminate processing delays.*
5. Have your completed CORI form verified by one of these CORI authorized signers:
  - GSCWM Staff Member
  - Service Unit Team Member
  - Girl Scout Council Trainer

**SIGNERS MUST ALSO BE CURRENT GIRL SCOUT MEMBERS AND HAVE A CURRENT APPROVED BACKGROUND CHECK ON FILE WITH GSCWM. AUTHORIZED SIGNERS CAN ONLY SIGN IF THEY SEE BOTH YOU AND YOUR GOVERNMENT-ISSUED PHOTO ID IN-PERSON.** Alternatively, you can have your completed form notarized by a Notary Public.
6. Submit the completed and verified or notarized acknowledgement form to GSCWM in person, by USPS, or secure email to [SecureForms@gscwm.org](mailto:SecureForms@gscwm.org) (instructions on how to send secure email are available on request or [click here](#)). Forms cannot be faxed. GSCWM will contact you if there are any concerns regarding CORI results.

Questions? Email [info@gscwm.org](mailto:info@gscwm.org); Call 413-584-2602/508-365-0115



Worcester Leadership Center  
115 Century Drive  
Worcester, MA 01606-1244

Holyoke Leadership Center  
301 Kelly Way  
Holyoke, MA 01040-9685

**CRIMINAL OFFENDER RECORD INFORMATION (CORI) ACKNOWLEDGEMENT FORM**  
*This form cannot be faxed and can only be emailed with encrypted secure email to [SecureForms@gscwm.org](mailto:SecureForms@gscwm.org).*

**TO BE USED BY ORGANIZATIONS CONDUCTING CORI CHECKS FOR EMPLOYMENT,  
VOLUNTEER, OR LICENSING 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.

I also understand that Girl Scouts of Central and Western Massachusetts may conduct subsequent CORI checks within one year of the date this Form was signed by me.

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 of CORI Subject*

\_\_\_\_\_  
*Date*

\*Please attach a photocopy of your government issued photo ID  
(helpful to clarify information but not required).

**SUBJECT INFORMATION (please print)**

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_ Suffix \_\_\_\_\_

Former Name(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of Birth (MM/DD/YYYY): \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Last **SIX** Digits of Social Security Number: \_\_\_\_ - - \_\_\_\_ - - \_\_\_\_ - -  No Social Security Number

Sex: \_\_\_\_\_ Height: \_\_\_\_\_ ft. \_\_\_\_\_ in. Eye Color: \_\_\_\_\_ Race: \_\_\_\_\_

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

Father's Full Name: \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_

Current Street Address: \_\_\_\_\_ Apt # or Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Volunteer Position:  Leader  Troop Supporter  Other \_\_\_\_\_

Are you:  New to the Position  Continuing in the Position

Troop # (if known): \_\_\_\_\_ Service Unit (if known): \_\_\_\_\_

Where are you volunteering? Town \_\_\_\_\_  Council-wide

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

\_\_\_\_\_

Verified by (*print name of verifying employee or volunteer*): \_\_\_\_\_

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

\_\_\_\_\_  
*Date*