



City of New Bedford
OFFICE OF THE LICENSING BOARD
CITY HALL, ROOM 206

JONATHAN F. MITCHELL
MAYOR

GNWBLL

RE: _____
Corporation/ Business Name

CORI REQUEST FORM

New Bedford Licensing Board has been certified by the Criminal History Systems Board for access to conviction and pending criminal case data. As an **applicant/employee** for the position of _____, I understand that a criminal record check will be conducted for conviction and pending criminal case information only and will not necessarily disqualify me. The information below is correct to the best of my knowledge.

Applicant/Employee Signature

APPLICANT/EMPLOYEE INFORMATION (PLEASE PRINT OR TYPE)

LAST NAME

FIRST NAME

MIDDLE NAME

MAIDEN NAME OR ALIAS (IF APPLICABLE)

PLACE OF BIRTH

DATE OF BIRTH: - -

SOCIAL SECURITY NUMBER: - -

---REQUIRED---

MOTHER'S MAIDEN NAME:

CURRENT ADDRESS:

FORMER ADDRESS:

SEX: HEIGHT: ft. in.

WEIGHT: EYE COLOR: _____

STATE DRIVER'S LICENSE NUMBER:

The above information was verified by reviewing the following form of GOVERNMENT ISSUED Photographic Identification (Please Attach Copy): _____

REQUESTED BY:

SIGNATURE OF CORI AUTHORIZED EMPLOYEE