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SANDWICH PUBLIC SCHOOLS

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CRIMINAL OFFENDER RECORD INFORMATION (CORI) AND SEXUAL OFFENDER REGISTRY INFORMATION (SORI) ACKNOWLEDGEMENT FORM

The Sandwich Public School District is registered under the provisions of M.G.L. c. 6, § 172 to receive CORI/SORI 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/SORI check will be submitted for my personal information to the Department of Criminal Information Justice Services (DCIJS). I hereby acknowledge and provide permission to the Sandwich Public Schools to submit a CORI/SORI check for my information to the DCIJS. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing the Sandwich Public Schools with written notice of my intent to withdraw consent to a CORI/SORI check.

FOR EMPLOYMENT, VOLUNTEER AND LICENSING PURPOSES ONLY:

The Sandwich Public Schools may conduct subsequent CORI/SORI checks within one year of the date this Form was signed by me provided, however, that the Sandwich Public Schools must first provide me with written notice of this check.

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

DATE

PLEASE COMPLETE THE ENTIRE APPLICATION LEGIBLY: **All information must be complete to process**

Volunteer _____ Forestdale/Oak Ridge Elementary Schools
Reason for Request (e.g. Volunteer, coach, employee) _____ School Building(s) or Location/Dept

Last Name First Name Middle Initial

Former Last Name 1 Former Last Name 2 Former Last Name 3

Date of Birth (MM-DD-YYYY) Last 6 digits of Social Security # Gender

Mother's Full Name Mother's Maiden Name Father's Full Name

Current Physical Address: _____
Street Address Town State Zip

*Mailing Address (If Different): _____
Street or PO Box Town State Zip

*If your CORI/SORI has findings, your report will be mailed to your address listed here.

Driver's License # & Issuing State Height Eye Color

Information below to be completed by the District or Supervising Contractor if not a District Employee The above information was verified by reviewing the following form of non-expired government issued photographic identification.

____ MA Driver's License _____ MA Identification _____ Passport _____ Other

Signature of Verifying Supervisor _____ Submitted to DCJIS by: _____

SANDWICH PUBLIC SCHOOLS IS AN EQUAL OPPORTUNITY EMPLOYER
The Sandwich Public Schools does not discriminate on the basis of race, color, sex, gender identity, religion, National origin, sexual orientation, disability, or homelessness.