

CRIMINAL RECORD

Note: With regard to questions contained in this section, under Massachusetts Law, you may answer "no record" if any of the following circumstances are applicable:

- (1) *You have never been arrested for violation of a criminal statute;*
- (2) *You have been arrested but have never been tried for a criminal offense;*
- (3) *You have been tried for a criminal offense but were not convicted;*
- (4) *You have a first conviction for any of the following misdemeanors:*

- | | | |
|------------------------------------|---------------------------|--------------------------------------|
| <i>(a) drunkenness</i> | <i>(b) simple assault</i> | <i>(c) speeding</i> |
| <i>(d) minor traffic violation</i> | <i>(e) affray or</i> | <i>(f) disturbance of the peace;</i> |

- (5) *You have not been convicted of a criminal offense within the five years before the date of this application and you have been convicted of misdemeanors where the date of conviction or the termination of incarceration, if any, occurred more than five years before the date of this application;*
- (6) *You have felony or misdemeanor convictions which have been sealed pursuant to Massachusetts Law; or*
- (7) *You have juvenile delinquency or child in need of services complaints which were not transferred to Superior Court for prosecution.*

- a. Have you ever been convicted of a felony? Yes [] No []
- b. Have you been convicted of a misdemeanor within the last 5 years other than the first conviction for drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace? Yes [] No []
- c. Were you convicted of a misdemeanor (other than first conviction for drunkenness, simple assault, speeding, minor traffic violations, affray, or disturbance of the peace) more than 5 years ago which resulted in a jail sentence from which you were released within the last 5 years?
Yes [] No []
- d. If your answer to any of the three preceding questions (a., b., or c.) is yes, please describe the offense involved, the date of the offense, the court in which you were convicted, and any mitigating circumstances. Please include the Docket Number:

Full Description of Offense	Date of Offense	Court & Docket No.	Disposition, (Finding, Sentence, & Probation) and any mitigating circumstances

h. Are you now under charge for any criminal offense on which you are awaiting trial or final disposition? Yes [] No [] If you have answered yes, please state the following.

Full Description of Offense	Date of Offense	Court & Docket No.	Disposition, (Finding, Sentence, & Probation) and any mitigating circumstances

i. Have you ever been or are you currently the subject of any petition for restraining order requested or issued pursuant to c. 209A or other abuse prevention statutes, of the Massachusetts General Laws or any other domestic violence, abuse prevention or "no contact" order in this or any other state? Yes [] No [] If you have answered yes, please explain when and where.

Date	Police/Department	Charge/Court/Disposition	Docket No.

j. Have you ever been, or are you now, a defendant in any civil court action? Yes [] No [] If yes, provide the nature of action, court, and docket number.

Nature of Action	Court	Docket No.



TOWN OF FAIRHAVEN

MASSACHUSETTS

FIRE DEPARTMENT / EMERGENCY MEDICAL SERVICE

146 Washington Street, Fairhaven, MA 02719

Phone: 508 994-1428 • Fax: 508 994-1515

Emergency # 911



GENERAL RELEASE

I, _____, born in _____
(first name, middle initial, last name) (City, State)

on _____, having filed an application for employment with the Fairhaven
(date of birth)

Fire Department (Fairhaven Fire & EMS), consent to have an investigation made as to my moral character, reputation and fitness for the position to which I have applied. I also agree that such information as may be received, reported to and reviewed by the appointing authority. I agree to give any further information which may be required in reference to my past record.

I also authorize and request every person, firm, company, corporation, governmental agency, court, association of institution having control of any documents, records and other information pertaining to me, to furnish to the Fairhaven Fire Department any such information, including documents, records, files, regarding charges or complaints filed against me, formal or informal, pending or closed, or any other pertinent data, and to permit the Fairhaven Police Department, the Fairhaven Fire Department or any of its agents or representatives to inspect and make copies of such documents, records and other information.

Specifically, in addition, I hereby authorize the release of the following data or records to the Fairhaven Fire Department: I, _____ hereby release, discharge and exonerate the Fairhaven Police Department, Fairhaven Fire Department, its agents and representatives and any person so furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records and other information or the investigations made by or on behalf of the Fairhaven Police Department and Fairhaven Fire Department.

I agree that, with the exception of an investigative consumer (credit) report, any information furnished may be declared "confidential" by the police department and need not be disclosed to me.

The authority shall continue for one year unless sooner revoked in writing by the undersigned.

Printed Name of Applicant

Printed name of Witness

Signature of Applicant

Signature of Witness

Street Address

City, State, Zip Code

Date



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CORI CHECK ACKNOWLEDGMENT

I, _____ residing at _____
(first name, middle initial, last name) (street address)

_____, acknowledge that a Criminal Offender Record
(city, state)

Information (CORI) check will be performed as part of the Fairhaven Fire Department's hiring process. I further acknowledge that a refusal to allow the CORI check to be performed will cause my application to no longer be considered for employment.

Date

Printed Name of Applicant

Signature of Applicant



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CORI REQUEST FORM

Fairhaven Fire Department has been certified by the Criminal History Systems Board for access to conviction and pending criminal case data. As a (prospective) employee/volunteer for the position of Firefighter / Call Firefighter, 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
(Unless otherwise preempted by law)

APPLICANT/EMPLOYEE INFORMATION (PLEASE PRINT)

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: ___ 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: _____

REQUESTED BY: _____
SIGNATURE OF CORI AUTHORIZED EMPLOYEE