

TOWN OF ORLEANS

CORI POLICY

This policy is applicable to the criminal history screening of prospective and current employees, subcontractors, volunteers and interns, professional licensing applicants, as those terms are defined in M.G.L. c. 268, §1.

Where Criminal Offender Record Information {CORI) and other criminal history checks may be part of a general background check for employment or volunteer work, the following practices and procedures will befollowed.

CONDU CTING CORI SCREENING

CORI checks will only be conducted as authorized by law and only after an authorization form has been completed. If a new CORI check is to be made on a subject within a year of his/her signing of the Acknowledgement Form, the subject shall be given seventy-two (72) hours' notice that a new CORI check will be conducted.

ACCESS TO CORI

All CORI obtained is confidential, and access to the information must be limited to those individuals who have a "need to know". This may include, but not be limited to, hiring managers, staff submitting the CORI requests, and staff charged with processing job applications. We shall maintain and keep a current list of each individual authorized to have access to, or view, CORI.

CORI TRAINING

An informed **review** of a criminal record requires training. Accordingly, all personnel authorized to conduct criminal history background checks and/or to review CORI information will review, and will be thoroughly familiar with, the educational and relevant training materials regarding CORI laws and regulations made available by the Mass. Department of Criminal Justice Information Service (DCJIS).

USE OF CRIMINAL HISTORY IN BACKGROUND SCREENING

CORI used for employment purposes shall only be accessed for applicants who are otherwise qualified for the position for which they have applied. Unless otherwise provided by law, a criminal record will not automatically disqualify an applicant. Rather, determinations of suitability based on background checks will be made consistent with this policy and any applicable law or regulations.

VERIFYING A SUBJECT'S IDENTITY

If a criminal record is received, the information is to be closely compared with the information on the Acknowledgement Form and any other identifying information provided by the applicant to ensure the record belongs to the applicant.

If the information in the CORI record provided does not exactly match the identification information provided by the applicant, a determination is to be made by an individual authorized to make such determinations based on a comparison of the CORI record and documents provided by the applicant.

INQUIRING ABOUT CRIMINAL HISTORY

In connection with any decision regarding employment or volunteer opportunities, the subject shall be provided with a copy of the criminal history record prior to questioning the subject about his or her criminal history. The source(s) of the criminal history record is also to be disclosed to the subject.

DETERMINING SUITABILITY

If a determination is made, based on the information as provided in The Criminal Background Check section of this policy, that the criminal record belongs to the subject, and the subject does not dispute the record's accuracy, then the determination of suitability for the position or license will be made. Unless otherwise provided by law, factors considered in determining suitability may include, but not be limited to, the following:

- (a) Relevance of the record to the position sought;
- (b) The nature of the work to be performed;
- (c) Time since the conviction;
- (d) Age of the candidate at the time of the offense;
- (e) Seriousness and specific circumstances of the offense;
- (f) The number of offenses;
- (g) Whether the applicant has pending charges;
- (h) Any relevant evidence of rehabilitation or lack thereof; and
- (i) Any other relevant information, including information submitted by the candidate or requested by the organization.

The applicant is to be notified of the decision and the basis for it in a timely manner.



THE COMMONWEALTH OF MASSACHUSETTS EXECUTIVE OFFICE OF PUBLIC SAFETY AND SECURITY Department of Criminal Justice Information Services 200 Arlington Street, Suite 2200, Chelsea, MA 02150 TEL: 617-660-4640 [TTY: 617-660-4606 | FAX: 617-660-5973 MASS.GOV/CJIS



Criminal Offender Record Information (CORI) Acknowledgement Form

To be used by orga	anizations conducting CORI ch	ecks for employment, vol purposes.	unteer, subcontractor, licer	sing, and housing
	TOWN OF (is reg	istered under the
	(Organiz			istered under the
provisions of M.G.L employees, subcon housing.	. c.6, § 172 to receive CORI fo tractors, volunteers, license a	r the purpose of screenir	ng current and otherwise que ees, and applicants for the	alified prospective rental or lease of
rental or lease of h	current employee, subcontra ousing, I understand that a CO e and provide permission to	ORI check will be submitt	ed for my personal informa	or applicant for the ation to the DCJIS. I
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	eck for my information to the hdraw this authorization at ar		is valid for one year from tl	
			(Organizatior)
with written notice	of my intent to withdraw con	sent to a CORI check.		
OR EMPLOYMENT	VOLUNTEER, AND LICENSING	PURPOSES ONLY:		
The	TOWN	OF ORLEANS	r	nay conduct
		nization)		
subsequent CORI cl	ecks within one year of the da	ate this Form was signed l	by me, provided, however,	that
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me with written notice	(Organiz of this check.	ration)		
Acknowledgement	provide my consent to a CORI Form is true and accurate. <i>in front of a Notary Public, if</i>			
	Signature of CORI Subject	Ŧ	Dat	e
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County of				
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Notary Public Signature

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Please complete this se The		e information of the l with an asterisk (*			requesting.
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* Last Name:			S	uffix (Jr., Sr.	., etc.):
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Former Last Name 2:					
Former Last Name 3:					
Former Last Name 4:					
* Date of Birth (MM/DD/YYYY):		Place of Bir	th:		
* Last SIX digits of Social Security N	lumber:		🛛 No Social	Security Nu	mber
Sex: Heigh	t:ft	in. Eye Color:		_ Race:	
Driver's License or ID Number:			Stat	e of Issue: _	
Father's Full Name:					
Mother's Full Name:	*** *** *** *******************				
		Current Addres			
* Street Address:	-				
Apt. # or Suite:	*City:		*State: _		*Zip:
	S	UBJECT VERIFICAT	ION		San aller
The above information was verified	I by reviewing t	the following form(s) of government	-issued ider	ntification:

Verified by:

Print Name of Verifying Employee

Signature of Verifying Employee

Date



TOWN OF ORLEANS

SORI POLICY

Where Sex Offender Record Information (SORI) checks are part of a general background check for employment, volunteer work or licensing purposes, the following practices and procedures will generally be followed.

- I. SORI checks will only be conducted as authorized by Sex Offender Registry Board (SORB). All applicants will be notified that a SORI check will be conducted. Applicants will be provided with a copy of the SORI policy.
- II. An informed review of a sex offender record requires adequate training. Accordingly, all personnel authorized to review SORI in the decision-making process will be thoroughly familiar with the educational materials made available by SORB.
- III. Unless otherwise provided by law, a sex offender criminal record will not automatically disqualify an applicant. Rather, determinations of suitability based on SORI checks will be made consistent with this policy and any applicable law or regulations.
- IV.If a sex offender record is received from SORB, the authorized individual will closely compare the record provided by SORB with the information on the SORI request form and any other identifying information provided by the applicant, to ensure the record relates to the applicant.
- V. If the Town of Orleans is inclined to make an adverse decision based on the results of the SORI check, the applicant will be notified immediately. The applicant shall be provided with a copy of the sex offender record and the organization's SORI policy, advised of the part(s) of the record that make the individual unsuitable for the position, and given an opportunity to dispute the accuracy and relevance of the SORI record.
- VI.Applicants challenging the accuracy of the policy shall be provided with the SORB contact information. If the SORI record provided does not exactly match the identification information provided by the applicant, the Town of Orleans will make a determination based on a comparison of the SORI record and documents provided by the applicant. The Town of Orleans may contact SORB and request a detailed search consistent with SORB policy.
- VII. If the Town of Orleans reasonably believes the record belongs to the applicant and is accurate, based on the information as provided in section IV on this policy, then consideration of employment will be made.
- VIII. The Town of Orleans will notify the applicant of the decision and the basis of the decision in a timely manner.

ADVERSE DECISIONS BASED ON CORI

If an authorized official is inclined to make an adverse decision based on the results of a criminal history background check, the applicant will be notified immediately. The subject shall be provided with a copy of the organization's CORI policy and a copy of the criminal history. The source(s) of the criminal history will also be revealed. The subject will then be provided with an opportunity to dispute the accuracy of the CORI record. Subjects shall also be provided a copy of DCJIS' *Information Concerning the Process for Correcting a Criminal Record*.

SECONDARY DISSEMINATION LOGS

All CORI obtained from the 001S is confidential and can only be disseminated as authorized by law and regulation. A central secondary dissemination log shall be used to record *any* dissemination of CORI outside this organization, including dissemination at the request of the subject.

Revised May 6, 2019



TOWN OF ORLEANS

Sex Offender Registry Information (SORI) Acknowledgment Form

The Town of Orleans conducts SORI checks for the purpose of screening current and otherwise qualified prospective employees and volunteers.

As a prospective or current employee or volunteer, I understand that a SORI check will be submitted for my personal information to the Commonwealth of Massachusetts Sex Offender Registry Board. I hereby acknowledge and provide permission to the Town of Orleans to submit a SORI check for my information to the Commonwealth of Massachusetts Sex Offender Registry Board. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing the Town of Orleans with written notice of my intent to withdraw consent to a SORI check.

FOR EMPLOYMENT AND VOLUNTEER PURPOSES ONLY: The Town of Orleans may conduct subsequent SORI checks within one year of the date this form was signed by me provided, however, that the Town of Orleans must first provide me with written notice of this check.

By signing below, I provide my consent to a SORI check and acknowledge that the information provided on page 2 of the Acknowledge Form is true and accurate.

Signature

Date

SORI Request

Town of Orleans

The Commonwealth of Massachusetts Sex Offender Registry Board will provide a report that includes the following information; whether the person identified is a sex offender with an obligation to register, the offense(s) for which the offender was convicted or adjudicated, and the date(s) of the conviction(s) or adjudication(s). Please be advised that the law only permits the public to receive information on sex offenders required to register and finally be classified by the Board as a level 2 (moderate risk) or level 3 (high risk) offender. Therefore, information is not available to the public if the identified individual is a level 1 (low-risk) offender or if he/she has not yet been classified by the Board. All requests shall be recorded and kept confidential, except to assist or defend in criminal prosecution.

The information below is correct to the best of my knowledge.

APPLICANT/EMPLOYEE/VOLUNTEER INFORMATION (Please Print Clearly)

LAST NAME	FIRST NAME	MIDDLE NAME				
MAIDEN NAME or OTHER NA	ME(s) by WHICH YOU HAVE BEEN KNOW					
DATE OF BIRTH:/ M DI	AGE SOCIA D YEAR - Please enter DOB as M/DD/Y	L SECURITY #: YYY Ex: 1/01/1970 not 01/01/1970				
ADDRESS:						
PERSONAL IDENTIFYING CHAI	RACTERISTICS					
SEX: RACE:	_ HEIGHT: WEIGHT: EYE C	OLOR: HAIR COLOR:				
OTHER INFORMATION (e.g. License plate number, parents' name, etc)						
identification:	vas verified by reviewing the followi					
VERIFIED BY:	rifying Employee (Please Print)					

Signature of Verifying Employee