

CONSENT FOR BACKGROUND RECORD CHECK OF EMPLOYEE / VOLUNTEER / INTERN

All current or perspective employees/regular volunteers/interns who work in the Department of Early Education and Care (EEC) licensed program and who have the potential for unsupervised contact with children (as defined in EEC regulations, 606 CMR 14.00) must complete and sign this Consent form.

To be complet	ted by applicant:				
Full Name	Last	First	Middle	Maiden or other Sur	names (list all)
Date of Birth (MM/DD/YY)	Place of Birth		Gender (M/F)	
Last six digits	of social security# (require	ed): XXX	If you	a have never been issued a SSN	# check here
Height	Weight	Eye Color		Mother's Maiden Name	
Dates and Plac	es of Residence for the Pas	st Seven Years:			
From /To	Number & Str	eet	City	State	ZIP
Please list othe	r states in which you have	resided:			
(CORI inform The reference of the entire of	check and a Department of ation for investigative purpos sults of the DCF and CORI of apployer/potential employer list retention/staffing decisions. apployer/potential employer wisible for the abuse or neglect sible for the abuse or neglect apployer/potential employer wisible for the abuse or neglect sible for the abuse or neglect apployer/potential employer wisouthful offender convictions,	Children and Families if you or your entecks will be shared sted on this applicated on this applicated if the of a child in a supplof a child has been ill be notified if you non-convictions and	ies (DCF) be apployer is the control of the control		r use this In this application. Geen found at you were s is pending. includes all
employer.	permission to complete a information above is corr			rovide the results to my employ edge.	er/potential
	Арр	olicant's Signature		Date	
Employer Cer	tification:				
The applicant i	s applying for a position on for any reason other than	r is currently emp	oloyed in a ose is unta	n EEC licensed program. I und wful.	erstand that the
The applicant's identity was verified by reviewing the following form of government issued photographic identification: (Please keep a photocopy of said identification in file with this application.)					
Please check o	one:				
Applicant is A	prospective employee	, current employe	ee, pr	rospective volunteer, curre	nt volunteer