

# Parish CORI Evaluation Acknowledgement Form

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New ☐ Renewal ☐ FY2026

Name of Parish \_\_\_\_\_

Town/City \_\_\_\_\_

Pastor \_\_\_\_\_

CORI Coordinator \_\_\_\_\_

Phone Number \_\_\_\_\_ Ext \_\_\_\_\_ Email \_\_\_\_\_

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Please check the type of CORI submitted in this batch: (*Submit one type of CORI per batch*)

Volunteer/Elderly ☐ Other Volunteers ☐ Paid Staff ☐ Contractors ☐

First Name in Batch: (first and last name) \_\_\_\_\_

Last Name in Batch: (first and last name) \_\_\_\_\_

Total number of CORI Submitted in this batch \_\_\_\_\_

Batch Submitted by \_\_\_\_\_ Date \_\_\_\_\_

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To be completed by the Office of Background Screening.

The CORI in this batch have been evaluated and cleared ☐

One or more of the CORI Results requires further action\*\* ☐

\*\*The Pastor will be notified of the results.

Evaluation Completed By \_\_\_\_\_ Date \_\_\_\_\_

***\*Important: If an individual's current residence is outside of Massachusetts, they must obtain a CORI from that state and submit the results to you.***

*This form must be completed each time you submit a batch. More than one batch of CORI may be included in a mailing. A copy of this form will be returned to you by FAX once the CORI has been evaluated.*

***Please keep a copy of all completed forms for your records.***

***Mailing Address: Office of Background Screening, 66 Brooks Drive, Braintree, MA 02184***