

BEDFORD RECREATION DEPARTMENT

Amy Hamilton, Director
Raeann Gembis, Program Coordinator

12 Mudge Way
Bedford, MA 01730
781-275-1392 Ph.
781-687-6156 Fax

Bedford Recreation has been certified by the Department of Criminal Justice Information Services for access to conviction and pending criminal case data. As a prospective employee/volunteer (***please circle***) for the position of _____, 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.

Prospective Employee/Volunteer Signature

Please note: if this check results in a finding, you will be notified. Information will be provided to enable you to correct your record should you believe that the information is incorrect or that your identity has been stolen or improperly used.

APPLICANT INFORMATION (PLEASE PRINT)

*Required Fields

Last Name* _____
First Name* (FULL NAME) _____
Middle Initial* _____

____ - ____ - ____ _____
Date of Birth* Social Security #*
(last 6 digits required)

Mother's Name _____
Father's Name _____
Maiden Name

Address*: _____

Sex: ____ Height: ____ ft ____ in. Weight ____ Eye Color _____

State Driver's License #: _____

The above information was verified by reviewing the following form of government issued photographic identification:

Identity Theft Index PIN (if applicable): _____

Requested by: _____
Signature of iCORI Authorized Employee