

Consumer Authorization

Authorization: By signing below, you authorize: (a) General Information Services, Inc. ("GIS") to request information about you from authorized public or private information sources; (b) anyone to provide information about you to GIS; (c) GIS to provide us (The YMCA of the North Shore) one or more reports based on that information; and (d) us to share those reports with others for legitimate business purposes related to your employment. GIS may investigate your address history, social security number validity, right to work, criminal record, sexual offender registry status, and driving record. You acknowledge that a fax, image, or copy of this authorization is as valid as the original. You make this authorization to be valid for one year from date assigned below.

By signing below, you acknowledge receipt of these documents.

Personal Information: Please print the information requested below to identify yourself for GIS.

Printed name:

First Middle (none) Last

Other names used: _____

Current and former addresses:

_____	current	_____	_____
from Mo/Year	to Mo/Year	Street	City, State & Zip
_____	_____	_____	_____
from Mo/Year	to Mo/Year	Street	City, State & Zip
_____	_____	_____	_____
from Mo/Year	to Mo/Year	Street	City, State & Zip

Some government agencies and other information sources require the following information when checking for records. GIS will not use it for any other purposes.

_____ Social security number

Date of birth

_____ Name as it appears on license

Driver's license number & state

_____ Date

Signature



Criminal Offender Record Information (CORI) Acknowledgement Form

To be used by organizations conducting CORI checks for employment, volunteer, subcontractor, licensing, and housing purposes.

_____ is registered under the
(Organization)
provisions of M.G.L. c.6, § 172 to receive CORI for the purpose of screening current and otherwise qualified prospective employees, subcontractors, volunteers, license applicants, current licensees, and applicants for the rental or lease of housing.

As a prospective or current employee, subcontractor, volunteer, license applicant, current licensee, or applicant for the rental or lease of housing, I understand that a CORI check will be submitted for my personal information to the DCJIS. I hereby acknowledge and provide permission to _____
(Organization)

to submit a CORI check for my information to the DCJIS. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing _____
(Organization)
with written notice of my intent to withdraw consent to a CORI check.

FOR EMPLOYMENT, VOLUNTEER, AND LICENSING PURPOSES ONLY:

The _____ may conduct
(Organization)
subsequent CORI checks within one year of the date this Form was signed by me, provided, however, that
_____, must first provide me
(Organization)
with written notice of this check.

By signing below, I provide my consent to a CORI check and affirm that the information provided on Page 2 of this Acknowledgement Form is true and accurate.

Signature of CORI Subject

Date

Consumer Disclosure

We (The YMCA of the North Shore) will obtain CORI, SORI, Social Security verification, and MVR reports for employment purposes.

We will obtain these reports through both the Massachusetts CORI system and a consumer reporting agency. Our consumer reporting agency is General Information Services, Inc. GIS's address is P.O. Box 353, Chapin, SC 29036. GIS's telephone number is (866) 265-4917. GIS's website is at www.geninfo.com, where you can find information about GIS's international privacy practices.

To prepare the reports, GIS may investigate your address history, social security number validity, right to work, criminal record, sexual offender registry status, and driving record,

You may obtain a copy of any report that GIS provides and GIS's files about you (in person, by mail, or by phone) by providing identification to GIS. If you do, GIS will provide you help to understand the files, including trained personnel and an explanation of any codes. Another person may accompany you by providing identification.

If GIS obtains any information by interview, you have the right to obtain a complete and accurate disclosure of the scope and nature of the investigation performed.

Please sign below to acknowledge your receipt of this disclosure.

Signature

Date

Printed Name

As part of the benefits package of the YMCA of the North Shore we offer a Y membership with national reciprocity at any YMCA throughout the United States. As part of your application for membership and routinely throughout your membership at the YMCA, we will obtain sex offender registry status. This information is for membership purposes only, and at no time will this information be utilized to make employment decisions.

We will obtain these reports from the YMCA National Membership database through a consumer reporting agency. The consumer reporting agency is Background Investigation Bureau, LLC. BIB's address is 9710 Northcross Center Court, Huntersville, N.C. 28078. BIB's phone number is (877) 439-3900. BIB's website is <https://bib.com>, where you can find information about BIB's privacy policy.

To prepare reports BIB may match your name, address and date of birth with sex offender registries. You may obtain a copy of any report that BIB provides through the YMCA National Membership database by contacting BIB and providing proper identification.

Please sign below to acknowledge your receipt of this disclosure

Signature

Date

Printed Name