



# The Commonwealth of Massachusetts

## Executive Office of Public Safety Criminal History Systems Board Criminal Justice Information System

200 Arlington Street, Suite 2200

Chelsea, Massachusetts 02150

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ARGEO PAUL CELLUCCI  
Governor

KATHLEEN M. O'TOOLE  
Secretary

KATHLEEN M. OTOOLE  
Chair

MAUREEN W. CHEW  
Executive Director

### PERSONAL CRIMINAL RECORD REQUEST FORM

If you want a copy of your own record, use this form and return it to the address above with a self-addressed, stamped envelope. You will receive a response by mail. **YOU MUST HAVE YOUR SIGNATURE NOTARIZED BY A NOTARY PUBLIC BEFORE YOUR REQUEST CAN BE PROCESSED. IF YOU ARE INCARCERATED AND A NOTARY PUBLIC IS NOT AVAILABLE, PLEASE HAVE AN OFFICIAL OF THE CORRECTIONAL FACILITY SIGN THE NOTARY SECTION IN HIS OR HER OFFICIAL CAPACITY.** No walk-in service is available. (PLEASE PRINT)

**\*\* Please check here if you need this for immigration/adoption purposes** \_\_\_\_\_

NAME: \_\_\_\_\_  
LAST FIRST MIDDLE

MAIDEN NAME / ALIAS: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ (MM/DD/YY)

SOCIAL SECURITY NUMBER: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
STREET TOWN STATE ZIP CODE

MOTHER'S MAIDEN NAME: \_\_\_\_\_

I swear that I am the above-named person under the pains and penalties of perjury, and further acknowledge that I am aware that Massachusetts law prohibits a person from requesting or requiring me to produce a copy of my own record, unless so authorized by the Criminal History Systems Board.

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

### AUTHENTICATION OF SIGNATURE BY NOTARY PUBLIC/CORRECTIONAL FACILITY

\_\_\_\_\_, ss.  
COUNTY

Then appeared before me the above-named, \_\_\_\_\_ and swore the statements made herein to be true.

DATED: \_\_\_\_\_ NOTARY PUBLIC: \_\_\_\_\_

MY COMMISSION EXPIRES: \_\_\_\_\_

CORRECTIONAL FACILITY OFFICIAL: \_\_\_\_\_

## **OBTAINING YOUR OWN CRIMINAL RECORD**

**For a copy of your own criminal record, this form must be notarized OR signed by a correctional facility official and mailed to our office with a self-addressed, stamped envelope.**

Please be advised that if you have requested a copy of your own criminal record for the purpose of employment, the most recent amendment to the C.O.R.I. law states that:

"...except as authorized by this chapter it shall be unlawful to request or require a person to provide a copy of his criminal offender record information (C.O.R.I)." (Massachusetts General Laws, Chapter 6, Section 172)

In order for any person, governmental agency or business to access a person's criminal record, they must make application to this agency, be certified by the Criminal History Systems Board and have your written approval. The general public may request a person's criminal record under the public access law. This law allows conviction information on persons who have recently been involved with the criminal justice system following a conviction. This information is available to anyone, including an employer, without the consent of the person whose record is being obtained.

**Your completed form should include a self-addressed, stamped envelope and be mailed to:**

CRIMINAL HISTORY SYSTEMS BOARD  
200 Arlington St.  
Suite 2200, Room 2111  
Chelsea, MA 02150