



## SORI REQUEST FORM

The Commonwealth of Massachusetts Sex Offender Registry Board will provide a report that includes the following information: whether the person identified is a sex offender with an obligation to register, the offense(s) for which the offender was convicted or adjudicated, and the date(s) of the conviction(s) or adjudication(s). Please be advised that the law only permits the public to receive information on sex offenders required to register and finally classified by the Board as a level 2 (moderate risk) or level 3 (high risk) offender. Therefore, information is not available to the public if the identified individual is a level 1 (low risk) offender or if he/she has not yet been finally classified by the Board. All requests shall be recorded and kept confidential, except to assist or defend in a criminal prosecution.

The information below is correct to the best of my knowledge.

APPLICANT/EMPLOYEE INFORMATION (Please Print CLEARLY)

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

MAIDEN NAME OR ALIAS (if applicable) \_\_\_\_\_

DATE OF BIRTH \_\_\_/\_\_\_/\_\_\_ SOCIAL SECURITY #: \_\_\_-\_\_\_-\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

Applicant/Employee Signature; \_\_\_\_\_

REQUESTED BY: \_\_\_\_\_

SIGNATURE OF SORI AUTHORIZED EMPLOYEE