THE COMMONWEALTH OF MASSACHUSETTS
EXECUTIVE OFFICE OF PUBLIC SAFETY AND SECURITY
Department of Criminal Justice Information Services
200 Arlington Street, Suite 2200, Chelsea, MA 02150
TEL: 617-660-4600 | TTY: 617-660-4606 | FAX: 617-660-4613
mass.gov/cjis

CRIMINAL OFFENDER RECORD INFORMATION (CORI)
FEE WAIVER REQUEST FORM

An organization may request a waiver of the CORI request fee. To qualify for a fee waiver, the organization must meet the criteria developed by the DCJIS and posted on our web site at http://mass.gov/cjis. Please note: Government agencies are fee waived; only non-government organizations should use this form.

To request a waiver of the CORI request fee, please complete all of the fields on this form. The answers you provide to the four qualifying questions will determine whether a fee waiver will be allowed. The completed form must be returned to the DCJIS at the address above, ATTN: Legal Department.

Organization Name: _____

Mailing Address: _____
Street Number & Name/P.O. Box Number Apt./Bldg/Unit

_____
City State Zip

Contact Name: _____

Contact Phone: _____

Contact E-Mail: _____

Fee Waiver Qualification Questions:

1. Is your organization certified as a 501C(3) entity? ☐ Yes ☐ No

2. Does your organization provide one or more programs or activities for children, for the elderly, and/or for the disabled? ☐ Yes ☐ No

3. What is the average annual percentage of volunteers in your organization? _____ %

4. What is the average program fee charged by your organization? _____

I swear, under the pains and penalties of perjury, that the information provided in this application is true and accurate to the best of my knowledge and understanding.

_____ _____
Signature Date