

CITY OF HAVERHILL

DATE \_\_\_\_\_

Under the provisions of M.G.L. chapter 41 section 91, I hereby respectfully request an appointment or election as

CONSTABLE

In and for the City of Haverhill, MA for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_  
APPLICANT'S NAME

\_\_\_\_\_  
FATHER'S NAME

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
TELEPHONE NUMBER

\_\_\_\_\_  
DATE OF BIRTH

\_\_\_\_\_  
SOCIAL SECURITY NUMBER

We the undersigned, reputable citizens of City/Town, believe that the above named applicant to be of good moral character and qualified to fulfill the duties of constable.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Attorney at Law

Upon request, I have investigated the reputation, character and fitness for said office and find him/her qualified.  
FOR OFFICE USE ONLY:

N.C.I.C. CHECK: \_\_\_\_\_

\_\_\_\_\_  
CHIEF OF POLICE

PROBATION CHECK: \_\_\_\_\_

\_\_\_\_\_ NO FEE City related employment. Pursuant to section 24.3 of Doc. 168 of 1992

\_\_\_\_\_ FEE PAID Private employment. Pursuant to section 24.4 of Doc. 168 of 1992

## RULES & REGULATIONS

To be appointed and to remain a Constable in the City of Haverhill the following conditions must be met and agreed to:

1. All constables shall post a minimum \$5,000.00 bond with the City of Haverhill;
2. Constable will carry city issued identification cards while performing their official duties;
3. No constable shall use or have in his possession any badge or any other indicia which may cause a member of the public to believe that a constable is an employee of the City of Haverhill or a police officer or has the duties of a police officer;
4. Constables shall submit to and pass a CORI;
5. No blue police or police like lights shall be utilized in the performance of constable duty;
6. No constables shall be allowed to bring any person to the jail or lock-up facility;
7. Constables shall not use force in serving any civil documents;
8. Constables shall submit a monthly report of services and on a monthly basis submit to the city treasurer any fees required to be paid to the city by law;
9. Constables shall not be required to carry insurance;
10. Constables at all times are to treat the citizens that they serve documents upon with dignity and respect;
11. Constables shall comply with the reporting requirements of Massachusetts General Laws c.46,s.95A as amended by Chapter 140 of the Acts of 2003.

The Mayor reserves the right to revoke the appointment of a constable at any time.



# Haverhill

Human Resources Department, Room 306  
Denise McClanahan, HR Director – [dmcclanahan@cityofhaverhill.com](mailto:dmcclanahan@cityofhaverhill.com)  
Sheila Pelczar, HR Technician – [spelczar@cityofhaverhill.com](mailto:spelczar@cityofhaverhill.com)  
HR: (978) 374-2357 - Benefits: (978) 374-2311 - Fax: (978) 374-2343

## CRIMINAL OFFENDER RECORD INFORMATION (CORI) ACKNOWLEDGEMENT FORM

TO BE USED BY ORGANIZATIONS CONDUCTING CORI CHECKS FOR EMPLOYMENT, VOLUNTEER, SUBCONTRACTOR, LICENSING, AND HOUSING PURPOSES

**The City of Haverhill** is recognized under the 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 the **CITY OF HAVERHILL** 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 the **CITY OF HAVERHILL** with written notice of my intent to withdraw consent to a CORI check.

FOR EMPLOYMENT, VOLUNTEER AND LICENSING PURPOSES ONLY: The **CITY OF HAVERHILL** may conduct subsequent CORI checks within one year of the date this form was signed by me provided, however, that the **CITY OF HAVERHILL** must first provide me with written notice of this check.

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



# Haverhill

Human Resources Department, Room 306  
Denise McClanahan, HR Director – [dmcclanahan@cityofhaverhill.com](mailto:dmcclanahan@cityofhaverhill.com)  
Sheila Pelczar, HR Technician – [spelczar@cityofhaverhill.com](mailto:spelczar@cityofhaverhill.com)  
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## SUBJECT INFORMATION:

\_\_\_\_\_  
LAST NAME                      FIRST NAME                      MIDDLE NAME                      SUFFIX

\_\_\_\_\_  
Maiden Name (or other name(s) by which you have been known)

\_\_\_\_\_  
DATE OF BIRTH                      PLACE OF BIRTH                      LAST SIX DIGITS OF SSN

SEX: \_\_\_\_\_ HEIGHT: \_\_\_\_\_ ft. \_\_\_\_\_ in. EYE COLOR: \_\_\_\_\_ RACE: \_\_\_\_\_

DRIVER'S LICENSE OR ID NUMBER: \_\_\_\_\_ STATE OF ISSUE: \_\_\_\_\_

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

\_\_\_\_\_  
FATHER'S FULL NAME

## CURRENT AND FORMER ADDRESSES:

\_\_\_\_\_  
STREET NUMBER & NAME                      CITY/TOWN                      STATE                      ZIP

\_\_\_\_\_  
STREET NUMBER & NAME                      CITY/TOWN                      STATE                      ZIP

\_\_\_\_\_  
STREET NUMBER & NAME                      CITY/TOWN                      STATE                      ZIP

The above information was verified by reviewing the following form(s) of government issued identification:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## VERIFIED BY:

\_\_\_\_\_  
Name of Verifying Employee (Please Print)

\_\_\_\_\_  
Signature of Verifying Employee

\_\_\_\_\_  
Department

CORI FORM – Applicant/Employee