**APPLICATION FOR ADMISION**

UNM TAOS

1157 County Rd 110
Ranchos de Taos, NM 87557

Telephone: (575) 737-6215
Fax: (575) 737-3684

taos.unm.edu

**Be sure to answer all questions completely. Questions left unanswered may delay your admission.** **USE INK ONLY**

**Application for** (select one): ❑ Fall ❑ Spring ❑ Summer Year: 20_____

## PERSONAL INFORMATION

**First Name** **Middle Name** **Last Name**

**Previous Names:** _____

If your educational records have been under another name, please include the name(s) under which transcripts will arrive.

**Date of Birth** *(MM/DD/YYYY)*: ____/____/____ **Gender:** ❑ Male ❑ Female ❑ Other: _____

*The Federal Privacy Act of 1974 requires that you be notified that disclosure of your SSN is mandatory based upon University regulation. Your SSN is used to ensure an accurate academic record and to provide full access to all services such as financial aid. Your SSN will not be used as your primary University Identification number. If you are unable to provide a SSN, the University will assign an alternate number to you. This will not impact the admission decision.*

**U.S. Social Security Number:** ___ ___ ___ - ___ ___ - ___ ___ ___ ___ ❑ Check this box if you do not have a U.S. SSN

Birth City _____ Birth State or Birth Country _____

*For Non-U.S. Citizens:*

Country of Birth:_____ Country of Citizenship:_____

Are you a permanent resident of the United States of America? ❑ Yes ❑ No

If you answered yes, please provide your Alien Registration Number:_____

Do you currently have a visa? ❑ Yes ❑ No

If yes, indicate visa type: ❑ Student (F-1) ❑ Other (specify):_____

Ethnicity

*The University of New Mexico is required by Federal Law to request this information for statistical reporting purposes. Your response is voluntary.*

Do you consider yourself to be Hispanic or Latino/a? ❑ Yes ❑ No

Select one or more of the following racial categories to describe yourself:

❑ American Indian or Alaska Native - - Principal Tribal Group: _____

❑ Asian ❑ Black or African American ❑ Native Hawaiian or Pacific Islander ❑ White

## CONTACT INFORMATION

**Mailing Address:** _____

Street Address / P.O. Box

_____ _____ _____

City State Zip Code

**Email Address:** _____

**Phone Number(s):** _____ _____

## MILITARY STATUS

Are you Active Duty in the U.S. Armed Forces, National Guard, or Reserves? ❑ Yes ❑ No

Are you a veteran of the U.S. Military? ❑ Yes ❑ No

Are you a spouse or dependent of an active-duty member in the U.S. Military? ❑ Yes ❑ No

Are you a spouse or dependent of a veteran of the U.S. Military? ❑ Yes ❑ No

## ACADEMICS

**High School** _____ _____ _____ ____/____

Name City State Graduation Date *(MM/YYYY)*

If not a high school graduate, have you earned a GED Certificate? ❑ Yes ❑ No Date:____/____

Did either of your parents or guardians graduate from a four-year college or university? ❑ Yes ❑ No

**Previous College(s)**

List all colleges or universities ever attended (or currently attending) in any status. Failure to provide complete information may result in delay of admissions, loss of transfer credit, and/or dismissal.

SUBMIT TRANSCRIPTS FROM EACH INSTITUTION ATTENDED IN ANY STATUS (INCLUDING JOINT SERVICE TRANSCRIPTS)

*- - UNM TRANSCRIPTS ALREADY ON FILE - -*

| Name of Institution | City and State | From *(MM/YYYY)* | To *(MM/YYYY)* | Degree Earned *(if any)* |
|---|---|---|---|---|
| | | / | / | |
| | | / | / | |
| | | / | / | |

**DEGREE PROGRAM**

- ❑ Non-Degree

**(Note: Non-Degree students do not need to submit transcripts and are ineligible for financial aid or scholarships.)**

**Associate of Arts**

- ❑ Early Childhood Education
- ❑ Film & Digital Media
- ❑ Fine Arts
- ❑ Liberal Arts
- ❑ Pre-Business Administration
- ❑ Secondary Teacher Education

**Associate of Science**

- ❑ Elementary Education
- ❑ Emergency Medical Services
- ❑ Pre-Science

**Associate of Applied Science**

- ❑ General Studies
- ❑ Nursing

**Certificate**

- ❑ 3D Printing (temporarily on pause 🐾)
- ❑ Applied Arts
- ❑ Commercial Driver's License
- ❑ Community Health
- ❑ Construction Technology
- ❑ Culinary Arts
- ❑ Early Childhood Education
- ❑ EMT Basic
- ❑ EMT Intermediate
- ❑ Entrepreneurship
- ❑ Film Technician
- ❑ Graphic Design
- ❑ Holistic Health and Healing Arts
- ❑ Human Services
- ❑ Massage Therapy
- ❑ Medical Assistant
- ❑ Nursing Assistant
- ❑ Phlebotomy
- ❑ Structural Integration
- ❑ Woodworking

**IN-STATE TUITION CLASSIFICATION**

A New Mexico resident is a person who has, or a dependent person whose parent or legal guardian has, established and maintained legal residency in New Mexico for at least the past twelve consecutive months. The following situations may qualify you for resident tuition. Contact Admissions at (505) 662-5919 if you are:

- A certified member of a nation, pueblo, or tribe located wholly or partially in New Mexico
- A member or dependent of a member of the U.S. Armed Forces or National Guard
- Relocated to New Mexico for employment or retirement

Are you under 23 years old? ❑ Yes ❑ No

**NOTE: If you are under 23 years old and not a member of the armed forces or married, please use your parent(s) or legal guardian(s) information to answer all residency questions including the Evidence of New Mexico Residency section.**

Do you regard New Mexico as your permanent residence? ❑ Yes ❑ No

Have you lived in New Mexico for at least the past twelve consecutive months? ❑ Yes ❑ No

If no, please provide a brief explanation:_____

**Evidence of New Mexico Residency. Check all that apply.**

- ❑ I have a New Mexico's driver's license or ID.
- ❑ My vehicle is registered in New Mexico.
- ❑ I am registered to vote in New Mexico.
- ❑ I filed previous year New Mexico state income taxes as a resident and my address as New Mexico.
- ❑ I pay utility bills at a New Mexico residence.
- ❑ I own residential property in New Mexico.
- ❑ I rent a home/apartment/condo within New Mexico.
- ❑ I am employed full time within the state of New Mexico.

I certify that all information given in this application is complete and accurate to the best of my knowledge. If I am accepted as a student at the University of New Mexico, I agree to conform and abide by the letter and spirit of all rules, regulations, and procedures of the University. Misrepresentations in any statement of the applicant or failure to abide by university academic regulations will be considered adequate grounds for denying admission, for cancellation of registration, or for suspension from the University.

| **Signature** | **Social Security Number** *(if applicable)* | **Date of Birth** *(MM/DD/YYYY)* | **Date** *(MM/DD/YYYY)* |
|---|---|---|---|

The University of New Mexico-Taos is an Affirmative Action/Equal Opportunity Institution. To comply with the ADA and the Rehabilitation Act of 1973, UNM provides this publication in alternative forms. If you have a special need and require auxiliary service, please let us know.