



UNDERAGE ADMISSION FORM

Please print all information. Use black or blue ink only.

1. Student ID Number _____ 2. Application for (1) Fall (2) Spring (3) Summer 20_____

3. PRINT full legal name _____
Last First Middle

4. Other names used _____
Last First Middle

5. Telephone number Home (_____) _____ - _____ Cell (_____) _____ - _____

6. Mailing Address _____ APT/SP# _____
City State Zip Code

7. Permanent Address (if different than above) _____ APT/SP# _____
cannot be a PO Box
City State Zip Code

8. Email Address _____ Personal Business

9. Social Security Number _____ - _____ - _____ 10. Gender* Male Female 11. Date of Birth* _____/_____/_____
Month Day Year

12. Ethnic origin* (1) American Indian/ Alaskan native (2) Asian American/Pacific Islander (3) Black, non-Hispanic
 (4) Hispanic (5) White, non-Hispanic (6) Other

13. Citizenship (check all that apply) United States citizen If no, give country of citizenship _____
 Nonimmigrant Visa Type _____ (Provide documentation) Other category
 Permanent Resident Applicant for Permanent Resident (Provide documentation)
A# _____ Expiration date _____

14. Enter your intended major(s) and concentration(s) (if applicable). Available majors can be found in our [current catalog](#).
(a) Major _____ Certificate Associate Degree Concentration(s) (if applicable) A. _____ B. _____

15. What is your educational goal at CNM? (Check primary reason) (1) Certificate (2) Associate Degree (3) Personal development
 (4) Skill upgrade/development (5) Transfer credits to another college

16. Admission Classification Middle School (grades 6-8)
 Home School – not high school level
 Other – not high school level

17. Name of School _____ State _____ Anticipated High School Graduation Date _____/_____/_____
Month Year

18. List all technical schools, colleges and universities you attended. **Include enrollment at CNM in credit courses/programs.**

Full Name of School	City and State	Years Attended	Type of Certificate or Degree Awarded

19. Marital Status* Unmarried Married Separated 20. Is English your primary language?* Yes No

21. Did either of your parents graduate from a 2-year college or 4-year college or university?* Yes No

For Office Use Only			
Eligible for College & Career Bound	<input type="checkbox"/> Yes <input type="checkbox"/> No	Appeal Approved	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of Approval: _____		STARS ID (if available): _____	
DNE: _____	DNE Date: _____	Old ID #: _____	Other Name: _____
Admitted by: _____	Date: _____	Keyed by: _____	Date: _____

You must complete questions 22-29 in order to be considered for in-state tuition classification. Failure to do so will result in an automatic non-resident tuition classification.

22. State of Legal Residence State: _____

Check either Yes or No on all questions (Required):

23. Have you lived in New Mexico for the past 12 consecutive months? Yes No

If no, please explain _____

24. Have your parents/legal guardians lived in New Mexico for the past 12 consecutive months? Yes No

If no, please explain _____

25. Are your parents/legal guardians registered to vote? Yes No State _____

26. Do your parents/legal guardians have a current driver's license or state-issued ID card? Yes No If yes, State: _____

27. Do your parents/legal guardians have a vehicle registered? Yes No If yes, State: _____

28. Did your parents/legal guardians file a New Mexico personal income tax report for the immediate preceding year? Yes No

29. Is at least one of your parents/legal guardians employed within the state of New Mexico? Yes No

Additional Information:

31. Are you a dependent of a member of the armed forces or National Guard, on active duty, stationed in New Mexico? Yes No
(An Active Duty Military Tuition Residency Form may be required)

32. Are you an enrolled member of an American Indian nation, tribe or pueblo located wholly or partially within the State of New Mexico? Yes No
List nation, tribe or pueblo _____ (Proof of membership may be required)

I certify that the information on this admission form is complete and correct. I understand that information submitted herein will be used in determining my status for admission and residency eligibility. I authorize CNM to verify the information I have provided. I understand that nondisclosure or misrepresentation in filling out the admission form will be considered grounds for denial of admission, cancellation of registration or suspension. I agree to notify the Admission and Records Office of any changes in the information provided and to conform and abide by the letter and spirit of all rules, regulations and procedures of CNM as stated in the CNM Catalog and Schedule of Classes.

APPLICANT'S SIGNATURE

DATE

PARENT/LEGAL GUARDIAN NAME (PRINTED)

PARENT/LEGAL GUARDIAN SIGNATURE

DATE

*Voluntary information used to comply with federal, state, and/or institutional reporting has no effect upon admission to CNM. It is the policy of CNM not to discriminate on the basis of gender, race, color, national origin, religion, age, disability, sexual orientation, marital status or ancestry in any of its practices or procedures.

Albuquerque, New Mexico
525 Buena Vista SE, 87106

Information Line
(505) 224-3000

1-888-453-1304 (outside Albuquerque calling area)