



The University of New Mexico

V A L E N C I A
OFFICE OF THE REGISTRAR

_____ DATE _____
HIGH SCHOOL OR INSTITUTION

ADDRESS OF INSTITUTION

_____ CITY STATE ZIP

To Whom It May Concern:

I am enrolling at the UNM-Valencia Campus in Los Lunas, New Mexico. In order to complete my admissions process an official transcript is needed from your institution.

Please send an official copy of my transcripts to:

UNM-VALENCIA CAMPUS
ATTN: REGISTRAR
280 LA ENTRADA
LOS LUNAS, NM 87031

Please print:

_____ LAST FIRST MI MAIDEN NAME

Social Security Number _____ Date of Birth _____

I last attended your institution during the year(s) _____. If there is a fee for this transcript please bill be at the address shown below:

ADDRESS

_____ CITY STATE ZIP

SIGNATURE

Documents must be sent from institution to institution to be considered official.

The University of New Mexico-Valencia Campus
280 La Entrada, Los Lunas, NM 87031
(505) 925-8580
Fax: (505) 925-8563