

## STATE OF NEW MEXICO PUBLIC EDUCATION DEPARTMENT 300 DON GASPAR SANTA FE, NEW MEXICO 87501-2786 Telephone (505) 827-5800

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MARIANA D. PADILLA SECRETARY DESIGNATE OF PUBLIC EDUCATION Michelle Lujan Grisham Governor

## NOTARIZED STATEMENT FOR NO EXAMS REQUIRED FOR LICENSURE

I	, declare that I was not required to, nor did I take any exams in the
(Print Name)	
state/country of1	for the license that I am requesting reciprocation for in New Mexico. I swear or
affirm under penalty of perjury that all the info	ormation listed above is true and correct to the best of my knowledge.
Signature of Applicant	Date
THE STATE OF	
COUNTY OF	
On this day of	, .
Month	Year
Before me, the undersigned notary public, personal	Ily appeared
	Name of Person(s) Acknowledging
Proved to me, through satisfactory evidence of ider	ntification, which was
, , ,	Type of Identification
To be the person(s) whose name(s) is/are signed or for its stated purpose(s).	the preceding or attached document and acknowledge to me that he/she/they signed it voluntarily

Signature of Notary Public