Applicant Informat	ion		Date	z	
		E-mail:			
A 1.1					
Address:		City	Sta	ate Z	Zip Code
Home Phone: (_)	Business Ph	none: ()		
Which certification a	re you applying for? Please	check only o	one.		
Date you wish to	amination (\$20.00) <i>Only curre</i> take the exam at the New Mexes examination (\$10.00) (Please	kico State Lib	rary:		
Grade II, with ex Date you wish to	amination (\$20.00) (Ficuse take the exam at the New Mext examination (\$10.00) (Please	<i>ent public libi</i> xico State Lib	rary directors may	v apply to take	the exam
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Schools Attended	Name & Location	Years	Total Credit Hours	Degree	
College					
Library School					
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Library Science Courses	Name of Course	School		Years	Credit Hrs
Complete this					
section <i>only</i> if you don't have a					
Master's in Library					
Science					

Library Experience

Name & Location of Library	Position	Dates of Employment

____ Check here if you require auxiliary aids or alternative formats in order to participate in this program.

Make check or money order out to *Department of Cultural Affairs* (DCA), complete the application and return it, together with the required fee, to:

New Mexico State Library Library Development Services Attention: Certification 1209 Camino Carlos Rey Santa Fe, New Mexico 87507

For NMSL Use Only								
Name:	Grade I	Grade II	Prof	Temp				
Status of Application								
Approved Rejected	Date:		_					
Certification Exam Score% Portfolio Score								
Remarks:								