New Mexico Board *of* Bar Examiners
An Agency of the Supreme Court of New Mexico

STATEMENT OF SOCIAL-SECURITY NUMBER
Or other Individual Taxpayer-Identification Number (ITIN)

Name of Applicant: _____

Check the appropriate box and, if applicable, provide the required information.

☐ Applicant has a Social-Security Number and it is: _____

☐ Applicant does not have a Social-Security Number but has an Individual
Taxpayer-Identification Number (ITIN), and it is: _____

☐ Applicant does not have either a Social-Security Number or an Individual
Taxpayer-Identification Number (ITIN).

I declare under penalty of perjury that the foregoing is true and correct.

_____   _____

Signature of Applicant   Date