



United States District Court
District of New Mexico

Notice of Interest to Provide Psychiatric/Psychological Services
(please type or print)

Name: _____ NM License No. _____

Mailing Address: _____

Email: _____

Phone: Primary: _____ Other (Optional): _____

Fax: _____

Preferred Method of Communication?: [] Phone [] Fax [] Email

What languages, other than English, do you speak? [] Spanish [] Other (specify): _____

Most evaluations must be performed at the detention facilities. Please mark the facilities you are willing to travel to in order to conduct the evaluations.

- [] CCA Estancia (Torrence County Detention Center), Estancia, NM
[] Sandoval County Jail, Bernalillo, NM
[] Santa Fe Juvenile Center, Santa Fe, NM
[] San Juan County Detention Center, Farmington, NM
[] Dona Ana County Detention Denter, Las Cruces, NM
[] Lea County Detention Center, Lovington, NM
[] Lincoln County Detention Center, Carrizozo, NM
[] Luna County Detention Center, Deming, NM
[] Otero County Detention Center, Chapparal, NM

The Court will require the evaluation reports to be completed and returned within thirty (30) days. Will you be able to meet this requirement? [] Yes [] No

[] By checking this box and returning this Notice of Interest, you agree to allow the US District Court for the District of New Mexico to contact you for purposes of scheduling a psychiatric/psychological evaluations.

Date

Submit completed form via email to: psychlistadmin@nmcourt.fed.us or mail to: U.S. District Court, District of New Mexico Clerk's Office Attention: Psychiatrist/Psychologist List Administrator 100 N. Church St., Las Cruces, 88001