



**Application  
Equal Access Services  
(Please Print)**

Semester (s) \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
*(If information changes between semesters, a new application must be completed)*

Name \_\_\_\_\_ M \_\_\_ F \_\_\_

Student ID# \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

**Education History**

High School Graduation \_\_\_\_\_ or GED \_\_\_\_\_ Year \_\_\_\_\_

When you were in school, were you ever tested for or diagnosed as having any type of disability? Yes \_\_\_ No \_\_\_

If yes, Year \_\_\_\_\_

What was the diagnosis? \_\_\_\_\_

Do you have documentation of your disability? Yes \_\_\_ No \_\_\_

Does the UNM-Valencia Equal Access office have this documentation?  
Yes \_\_\_ No \_\_\_

Did you receive special education services in high school? Yes \_\_\_ No \_\_\_

If yes, explain. \_\_\_\_\_

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Have you attended other schools since leaving high school? Yes \_\_\_ No \_\_\_

If you earned degrees or certificates, please list.

School	Degree/certificate	Date
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Did you receive special accommodations while attending these schools?

Yes\_\_\_\_No\_\_\_\_

If yes, explain. \_\_\_\_\_

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**Current Education Information**

What is your current grade point average? \_\_\_\_\_

What is your major? \_\_\_\_\_ Minor? \_\_\_\_\_

Why are you applying for equal access services? \_\_\_\_\_

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Explain any other difficulties you are having in school other than those listed above:

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\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Return this application to:

Hank Vigil or Cheryl Dilger  
Equal Access Services Coordinator  
UNM-Valencia Campus  
280 La Entrada  
Los Lunas, NM 87031  
(505) 925-8910