



**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): \_\_\_\_\_

Some evaluations need to 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 Center, 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 signing 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.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Submit form to: [psychlistadmin@nmd.uscourts.gov](mailto:psychlistadmin@nmd.uscourts.gov)

An electronic (fillable) version of this form is  
available on our website at [www.nmd.uscourts.gov](http://www.nmd.uscourts.gov)