

**HIGH SCHOOL TRANSCRIPT
REQUEST FORM**

DATE: _____

TO: _____

RE: **REQUEST FOR OFFICIAL HIGH SCHOOL TRANSCRIPT**

Deadline: 1st Thursday in November at 5:00pm (MST). Official transcript in a sealed envelope must be postmarked by this deadline. Find more program details at :
<https://hsc.unm.edu/school-of-medicine/education/md/bamd/index.html>

I am applying for admission to the University of New Mexico School of Medicine Combined BA/MD Degree Program. Please send my official high school transcript with courses in progress directly to:

**UNM Combined BA/MD Degree Program
Attn: Admissions Coordinator
MSC09 5231
1 University of New Mexico
Albuquerque NM 87131-001**

Transcript must include:

- ✓ GPA
- ✓ GPA Scale
- ✓ Class Rank
- ✓ Class Size
- ✓ Graduation Date
- ✓ ALL ACT and/or SAT Test Scores

Student Name (printed) _____

Date of High School Graduation: _____

Date of Birth: ____/____/____

Student Signature: _____

NOTE:

IN ORDER TO BE ACCEPTED, DOCUMENTS MUST BE SENT DIRECTLY TO THE UNM BA/MD PROGRAM OFFICE IN A SEALED, OFFICIAL SCHOOL ENVELOPE.