

State of New Mexico Office of Superintendent of Insurance
PO Box 1689, Santa Fe, NM 87504
Telephone 505-827-4601 Fax 505-827-4373

BAIL BONDSMEN
PRE-LICENSING ON-THE JOB TRAINING RECORD AND CERTIFICATION FORM

Provider Name _____ Provider Id No. _____

Provider Address _____

Telephone No. _____ Email Address _____

Class Location: _____
Street City State Zip Code

Class Date(s): _____

PROVIDER CERTIFICATION

NMSA 59A-51-4.1.B

Instead of the education requirement in Subsection A of this section, an applicant may become eligible to take the examination required to be licensed as a bail bondsman by apprenticing for a minimum of six months with a sponsoring bail bondsman. The sponsoring bail bondsman shall certify in writing that he has taught the applicant the subjects pertinent to the duties and responsibilities of a bail bondsman, including ethics and all laws and rules related to the bail bond business, and that the applicant is prepared to take the examination. The scope of the examination shall be as broad as the bail bond business.

This is to certify that in order to take the examination required to be licensed as a bail bondsman,

Applicant Name _____

Social Security Number _____

Address _____

Has apprenticed for a minimum of six months with a sponsoring bail bondsman in accordance with NMSA 59A-51-4.1.B. I also certify that the person named above was present at this training during the times and days indicated and has successfully completed the training.

Signature of Sponsoring Bail Bondsman _____ Date _____

APPLICANT CERTIFICATION

I CERTIFY UNDER PENALTY OF PERJURY, THAT THESE ARE MY TRUE AND CORRECT APPRENTICE TRAINING DATES.

Applicant Signature _____ Date _____