

New Mexico Regulation and Licensing Department BOARDS AND COMMISSIONS DIVISION New Mexico Nursing Home Administrators Board Toney Anaya Building • P.O Box25101 • Santa Fe, New Mexico 87504 (505) 476-4622 • Fax (505) 476-4665 • www.rld.state.nm.us/boards

STATEMENT OF NON-CONVICTION

NOTARY REQUIREMENT

When applying for a New Mexico Nursing Home Administrator's License, applicants are required to sign the following forms in the presence of a notary: STATEMENT OF NON-CONVICTION, DPS RELEASE OF INFORMATION and NATIONAL RELEASE OF INFORMATION FORM.

If the applicant signs and dates the document on one day and the notary public notarizes the document on another day, the act of legal witnessing has not occurred. The applicant must sign and date the document(s) in his or her own handwriting in the presence of the notary on the same date the notary witnesses the signature of the applicant. The applicant's signature may not be typed in or written in by the notary. If an error is made in the signature and/or date, a new form must be executed (witnessed by the notary). Do not try to correct the error by crossing out or using correction fluid. Documents that appear altered will be rejected!

A notary public's written declaration *purportedly* signed by the declarant (applicant) in the presence of a notary, but in fact signed by the notary in the absence of the declarant, is a violation of statute, rendering such an act a misdemeanor.

AUTHORIZATION FOR RELEASE OF INFORMATION FOR CRIMINAL BACKGROUND CHECK Important The applicant shall submit by mail the following items to the New Mexico Department of Public Safety (DPS) at P.O. Box 1628, Santa Fe, NM 87504-1628:

- 1. The original, notarized AUTHORIZATION FOR RELEASE OF INFORMATION form, typed or printed legibly in black ink (no pencil, no blue ink, no illegible writing). The applicant's signature must be written in the presence of the notary.
- 2. A cashier's check or money order made out to **Department of Public Safety** in the amount of \$15 for processing
- 3. A stamped envelope addressed to the Nursing Home Administrators Board so that DPS can mail the background check report directly back to the Board

Note: Failure to submit the items in the manner specified will cause DPS to reject the AUTHORIZATION FOR **RELEASE OF INFORMATION** request and delay your application for licensure process with the Board.

GROUNDS FOR DENIAL, SUSPENSION, REVOCATION OF LICENSE

Pursuant to the Nursing Home Administrators Act, § 61-13-3, "CRIMINAL OFFENDER'S CHARACTER EVALUATION," and § 61-13-13, "REFUSAL, SUSPENSION OR REVOCATION OF LICENSE," a license may be denied, suspended, or revoked if the applicant has been convicted of any felony, or any misdemeanor involving "moral corruption" or which substantially relates to the practice of nursing home administration.

"Moral corruption" applies to any applicant or licensee who has been convicted of charges for acts involving any intentional dishonesty for purposes of personal gain. Examples include, but are not limited to, crimes involving extortion, fraud, bribery, embezzlement, theft, robbery, receiving or possession of stolen property, shoplifting forgery, perjury, swindling, and/or conspiracy to commit an offense involving moral corruption.

Any individual who signs the **STATEMENT OF NON-CONVICTION** after having been convicted of any felony, or misdemeanor involving moral corruption or misdemeanor which substantially relates to the practice of nursing home administration, or who gives false or dishonest answers on the application, may not be eligible for license, may be subject to disciplinary action by the board, and may also be subject to criminal prosecution for perjury.

I have read, understand, and shall retain a copy of this document for my records.

Applicant's signature

New Mexico Nursing Home Administrators Board **STATEMENT OF NON-CONVICTION**

Instructions to NHA license Applicant: Complete and mail with application to P.O Box 25101, Santa Fe, NM 87504

One of the requirements for licensure is satisfactory evidence that the applicant is of good moral character as provided in Section 61-13-8.A (1) of the New Mexico Nursing Home Administrators Act.

I,			2		-
Type or pint CLEARLY:	Last name	First name	M.I	Social S	Security No.
having been born on	_//	, and curren	atly residing at th	e following add	ress:
Street Address		City		State	Zip Code

under penalty of perjury, hereby depose and state that I have never been convicted of any felony. I also depose and state that I have never been convicted of a misdemeanor involving moral corruption or that substantially relates to the practice of nursing home administration. This statement is made by me to secure a license under NMSA 1978, § 61-13-1 through § 61-13-17, known as the New Mexico Nursing Home Administrators Act.

I recognize that if the board receives an unsatisfactory report from DPS, I may be subject to disciplinary action by the Board. I recognize that I may also be subject to criminal prosecution.

This document must be signed in the presence of a Notary Public.

I have read and understand the foregoing, and shall retain a copy of this document for my records.

Signed: Date: _/ /

Attention Notary: You must ensure that this document is signed in your presence and that the name, social security number, and date of birth information is verified with a valid form of identification.

Subscribed and sworn to before me t	hisday of		, 2	<u> </u>	
State of)		My Commission Expires:	/	/	
County of)					
		Notary Public			

Seal