



Be Pro Be Proud New Mexico Student Registration

To register



BE PRO BE PROUD
New Mexico Department of Health



Enter your name, email, phone number, Date of Birth, Address, Gender, and Race.

Dr. Don De David - In the Moment

Phone Number * Date of Birth (mm/dd/yyyy) *

City * State * ZIP Code *

Indigenous Person
 Tribal Member.....
 Person with Disabilities
 Non-English and Limited English Proficient



BE PRO BE PROUD
BEING AN EDUCATOR IS THE PROUD CHOICE



Answer the following questions.

Select **P** **L** **P** under **L**

Select **L** under **L** **L**

Select **P** **g** **L** under **L** **L**

Select the name of your school under **P** **L** **L** **L** **L**

Enter the **L** provided to you by school staf.

What school did you attend?

What is your grade level?

What is your preferred language?

I am interested in

Yes - Publisher (no relevant codes required)

No

All needed (Publisher)

473 QUANTUM BLVD
RIO RANCHO, NM

