



NEW MEXICO CORRECTIONS DEPARTMENT

Media Inmate Request Form (Internal Use Only)

- Date: _____
- Name of Reporter: _____
- Organization Representing: _____
- Name and NMCD number of Inmate to be interviewed: _____

• Facility where inmate is housed:

- | | |
|--|---|
| <input type="checkbox"/> Penitentiary of New Mexico | <input type="checkbox"/> Otero County Prison Facility |
| <input type="checkbox"/> Central New Mexico Correctional Facility | <input type="checkbox"/> Guadalupe County Correctional Facility |
| <input type="checkbox"/> Western New Mexico Correctional Facility | <input type="checkbox"/> Lea County Correctional Facility |
| <input type="checkbox"/> Southern New Mexico Correctional Facility | <input type="checkbox"/> Northeastern New Mexico Detention Facility |
| <input type="checkbox"/> Roswell Correctional Center | <input type="checkbox"/> New Mexico Women's Correctional Facility |
| <input type="checkbox"/> Springer Correctional Center | |

- Date and length of proposed interview:
- Equipment to be brought in to a facility for interview:

Video Camera and recording accessories

Still Camera and accessories

Audio Recorder and accessories

Other—please list:

Please attach a letter explaining to the inmate what the purpose of the interview will be, length and subject matter. The attachment will be presented to the inmate.

By signing this document I consent to have a background/NCIC check performed by the New Mexico Corrections Department.

Name _____

Name _____

Address _____

Address _____

City, State, Zip Code _____

City, State, Zip Code _____

Date of Birth _____

Date of Birth _____

Social Security Number _____

Social Security Number _____

Phone _____

Phone _____

Date _____

Date _____

Signature _____

Signature _____

