Please fill in below to make the production of the certificates for your students as efficient as possible.
Thank you for your efforts on behalf of your students and for your participation in this program.
Mail this form to: Representative Don Tripp, PO Box 1369, Socorro, NM 87801 or fax it to 575-835-2848.

-Please Print or Type

Teachers Name_____ ***Contact Telephone Number*** _____

Name of School_____ ***Date*** _____

Delivery information for Certificates: ***Mail to*** _____
-If you would like Representative Tripp to present the certificates please call 800-256-1569 for scheduling.

Date for Delivery or Presentation _____ **-(Make additional copies of this form if necessary)-**

Academic Excellence:
Name(s):_____

'A' Honor Roll:
Name(s):_____

'B' Honor Roll:
Name(s):_____

Excellence in_____:
Name(s):_____

Perfect Attendance:
Name(s):_____

Citizenship:
Name(s):_____

Achieviement in_____:
Name(s):_____

Participation in_____:
Name(s):_____