

College Credit Enrollment Form



0 7 2 2 1 9 7 6 484-90-4726 SOCIAL SECURITY NUMBER Andrew Pals FIRST NAME LAST NAME OTHER FIRST NAMES USED OTHER LAST NAMES USED West Des Moines 50266 740 80th Stree IA COUNTY ZIP CODE STATE STREET ADDRESS CITY apals@waukeeschools.org andrewpals@hotmail.com PERSONAL EMAIL ADDRESS **United States** Winterset ETHNICITY: Hispanic Non-Hispanic RACE: (Select one or more.) STATE BIRTHPLACE: American Indian/Alaskan Native Missouri Resident? Yes No If yes, since when? ☐ Asian Gender: Male ☐ Female U.S. Citizen? Yes No ☐ Black/African American Professional Development Degree ☐ Native Hawaiian/Pacific Islander Course is for Certification Are you currently working toward a master's degree at Northwest? Yes No White Are you currently working toward a specialist degree at Northwest? Tes No If you plan to pursue a master's/specialist degree at Northwest, you will need to seek regular admission through the Graduate Office. Previous Degrees Completed: Indianola IA May 1999 Simpson College **Graduation Date** ■ Bachelor of Arts OR □ Bachelor of Science State Institution Name May 2008 IA Iowa State University Ames ■ Master of Arts OR ☐ Master of Science Graduation Date State Institution Name Trimester Applying For: Fall Spring ☐ Summer Undergraduate Level Coursework INSTRUCTOR TITLE CR HRS SECTION DEPT/COURSE CRN W. Simmons 3 3D Coaching 80 22-510 I certify that I have not evaded any questions or misrepresented any information on this application. I further authorize Northwest Missouri State University to verify any diplomas or degrees that I have received. I understand that by signing this form I am enrolling in the above

course(s) for credit and making an academic and financial commitment to Northwest. I also agree to accept all academic and financial

set forth by this institution

11/14/2020