



# College Credit Enrollment Form



505-27-5702  
SOCIAL SECURITY NUMBER

BIRTHDATE: 01 03 1990  
MONTH DAY YEAR

Land  
LAST NAME

Jourdan  
FIRST NAME

R  
M.I.

OTHER LAST NAMES USED

440 5th St. Gering  
STREET ADDRESS CITY

OTHER FIRST NAMES USED

NE 69341 Scotts Bluff  
STATE ZIP CODE COUNTY

( )  
HOME PHONE

(308) 635-6262  
WORK PHONE

(308) 631-5037  
CELL PHONE

jourdanland@gmail.com  
PERSONAL EMAIL ADDRESS

jland@sbps.net  
WORK EMAIL ADDRESS

Scottsbluff NE United States  
BIRTHPLACE: CITY STATE COUNTRY

ETHNICITY: ☐ Hispanic ☒ Non-Hispanic  
RACE: (Select one or more.)  
☐ American Indian/Alaskan Native  
☐ Asian  
☐ Black/African American  
☐ Native Hawaiian/Pacific Islander  
☒ White

Missouri Resident? ☐ Yes ☒ No If yes, since when?

U.S. Citizen? ☒ Yes ☐ No Gender: ☐ Male ☒ Female

Course is for ☐ Certification ☐ Degree ☒ Professional Development

Are you currently working toward a master's degree at Northwest? ☐ Yes ☒ No

Are you currently working toward a specialist degree at Northwest? ☐ Yes ☒ 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:

☐ Bachelor of Arts OR ☒ Bachelor of Science Chadron State Chadron NE Dec. 2012  
Institution Name City State Graduation Date  
☐ Master of Arts OR ☐ Master of Science University of Nebraska-Kearney Kearney NE May 2019  
Institution Name City State Graduation Date

Trimester Applying For: ☒ Fall ☐ Spring ☐ Summer Year 2020

Enrolling in: ☒ Graduate Level Coursework ☐ Undergraduate Level Coursework

CRN	DEPT/COURSE	SECTION	CR HRS	TITLE	INSTRUCTOR
	22-510	80	3	3D Coaching	W. Simmons

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 policies set forth by this institution.

Jourdan Land  
STUDENT SIGNATURE

11/2/2020  
DATE