California Lutheran
UNIVERSITY

p|t|s
PACIFIC LUTHERAN THEOLOGICAL SEMINARY

PLTS Selectives Completion Form

Name: _____

Student ID: _____

Selective Completed

_____ Race-Class-Gender Earth

_____ Faith Traditions

Course taken to Complete the Requirement

Course Code	Course Title	Term

Rationale

Student _____   _____
(Signature)   (Date)

Advisor _____   _____
(Signature)   (Date)