



## Endorsement Interview Scheduling Confirmation

Name	
Cell Phone Number	
PLTS Email Address	

### Endorsement Interview Information

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Room Requested: \_\_\_\_\_ Format:  In Person  Zoom

Advisor: \_\_\_\_\_

Synod: \_\_\_\_\_

Please return completed confirmation to Student Services at [studentinformation@plts.edu](mailto:studentinformation@plts.edu).

*The student is responsible for providing the CPE evaluation, endorsement essay, transcript, and any other materials to their advisor and to their synod. The student is responsible for keeping track of endorsement requirements and deadlines.*