



APPENDIX E: Pre-Endorsement Checklist for Candidates at Non-ELCA Seminaries

Candidate's Name: _____ L _____
First Name Last Name Middle Name Leader Key

Address: _____ City: _____ State: _____ - ZIP: _____

Phone: _____ Email: _____

Seminary of attendance: _____

ELCA Seminary of affiliation: _____

Degree received from: _____

ACADEMIC PLAN:

1. When are your plans for completing your seminary degree requirements? When do you expect to graduate?

2. How are you progressing with your plans and timeline for completing the Lutheran learning and formation requirement?

3. How has your identity as a Lutheran Christian been strengthened or challenged as you have studied at a non-ELCA seminary? In what ways has it been a blessing?

4. Have you completed your CPE requirement?

a. Date of completion:

b. Place:

c. Supervisor:

d. Was a copy of the supervisor's report sent to your Candidacy Committee? Yes No

e. Date sent:

Candidate Signature:

ELCA Seminary representative:

Synod candidacy representative:

Date form completed: