KNIGHTS OF COLUMBUS
STATE COUNCIL
SERVICE PROGRAM AWARDS
ENTRY FORM FOR OUTSTANDING ACTIVITY

This reporting form must be completed by each council and forwarded to the State Council. (Make copies of this blank form as needed. A separate reporting form must be completed for each program category)

Who Benefits? _____

Category (Mark One) Church _____ Family _____
Community _____ Youth _____
Council _____

From: Council Name: _____ Council #: _____

Location: _____

Grand Knight: _____ Telephone #: _____

Activity Title: _____

Date Activity Conducted: _____
Annual Event: Yes___No___ Previous Award: Yes___No___ (1st ___ 2nd ___ 3rd ___ Year _____)
Primary Purpose of Activity:

_____

_____

_____

_____

_____

_____

_____

Number of council members participating in the activity: _____

Percentage of council members participating in the activity: _____

Number of Man-hours expended in activity: _____

Chairman's Name: _____

Telephone Number: _____

Mailing Address: _____

EACH COUNCIL MAY ENTER ONE ACTIVITY FOR EACH OF THE FIVE AREAS (CHURCH, FAMILY, YOUTH COUNCIL, AND COMMUNITY) FOR THE FRATERNAL YEAR

(Activity is judged on participation, project results, manpower hours and documentation)

CONTINUED ON NEXT PAGE

Describe activity in detail. Use additional paper if necessary. Supplementary material may be submitted along with the nomination. Accompany materials can include letters, testimonials, news clippings, photographs, pamphlets, etc.. Do not submit tapes, video cassettes, display materials, films, etc., as they will not be considered in judging the nomination.

Signed:_____ _____

(Grand Knight) (State Deputy)

THIS ENTRY MUST BE RECEIVED AT THE STATE COUNCIL
BY **FEBRUARY 28, 2008** TO BE ELIGIBLE FOR COMPETITION.

UPON COMPLETION SEND ONE COPY TO STATE PROGRAM DIRECTOR
JOHN LIMOGES, 29521 463RD AVE, CENTERVILLE, SD 57014
ALSO KEEP A COPY FOR YOUR COUNCIL FILES.