Dentinger Lifetime Achievement Award

Submitter's Name: _____ Date: _____

Council Role _____ Council Number: _____

Email: _____

MEMBER INFORMATION:

Knight to be recognized: _____ Member Number: _____

Council Number: _____ Years of continuous service _____ Years In this council: _____

Positions Held? (Write N/A if none) _____

_____

Mailing Address: _____

Email: _____ Phone Number: _____

AWARD SUBMISSION:

1. In 250 words or less, please state how this member has served the Knights of Columbus in an exemplary manner and should be considered for this award:

_____

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GRAND KNIGHT ATTESTATION:

Grand Knight Signature: _____

Knights of Columbus®
Kentucky
State Council