



Montana State Council Knights of Columbus
Founded in Faith / Faith in Action
Chaplain/Priest of the Year Entry Form

Chaplain/Priest of the Year Name: _____

Address: _____ City: _____ Zip: _____

Telephone Number: _____

District: # _____ Council: # _____ City: _____

How has this chaplain/priest engaged with the Knights of Columbus? How has he encouraged Knights to become visible and engaged in the parish?

How has this chaplain/priest inspired the faith development in the council? In the parish? In the larger community?

How has this chaplain/priest promoted Knights of Columbus initiatives? What is he doing to increase vocations?

Grand Knight Name: _____

Grand Knight Signature: _____ Telephone # _____

Email completed form to: stateawards@montanaknights.org

Must be received by March 1