



KNIGHTS OF COLUMBUS  
LOUISIANA STATE COUNCIL  
Catholic Youth Leadership Award  
Nomination Form - 2019-2020

**Nominating Council**  
\_\_\_\_\_

Please check the proper category  
\_\_\_\_\_ Sr. Girl Division  
\_\_\_\_\_ Sr. Boy Division

**STUDENT INFORMATION**

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_ MOTHER'S: \_\_\_\_\_

CHURCH PARISH: \_\_\_\_\_

HIGH SCHOOL: \_\_\_\_\_

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**RULES AND INSTRUCTIONS – PLEASE READ CAREFULLY**

1. Only High School Seniors who are Practical Catholics are eligible.
2. If one or both parents are deceased, please indicate name of guardian or foster parent(s).
3. Every information area must be answered. Use the space provided on this form first and, if space is insufficient, you may attach one separate sheet, only. (It can be single spaced, one-inch margins, 12-point font, and front and back is allowed.)
4. Information to be entered on the form should be from the nominee's Junior and Senior years only. List the grade point average for **each year** called for.
5. Nomination form **must** be signed by the nominee's **Principal or High School Counselor, Pastor** and the **Grand Knight** of the Council submitting the nomination.
6. IT IS PREFERABLE THAT YOU USE THE ONLINE INTERACTIVE FORM FOUND AT **www.louisianakc.org**. CLICK ON THE CYLA MENU LINK TO OPEN THE FORM. YOU CAN FILL ALL SPACES AND THEN PRINT A HARD COPY. IT WILL BE NEATER, AND ALLOW YOU TO INPUT MAXIMUM INFORMATION. IF YOU MUST FILL OUT A PAPER FORM, THEN PLEASE PRINT OR TYPE. LEGIBILITY IS VERY IMPORTANT. THE GRAND KNIGHT OF YOUR COUNCIL CAN ASSIST YOU.
7. NO DUPLICATION OF THE COMPLETED FORM IS ACCEPTED – TURN IN THE ORIGINAL ONLY WITH ALL **REQUIRED ORIGINAL SIGNATURES ON PAGE 6 COMPLETED**.

**I. SPIRITUAL ACTIVITY**

**A. CHURCH PARISH ACTIVITY:**

Describe participation in spiritual life of the Church Parish, such as Altar Server, Lector, Eucharistic Minister, Usher, Choir, Columbian Squires, Knights of Columbus, Catholic Daughters, Squirettes, etc. Give length of service and office held.

**Junior Year**

ORGANIZATION	OFFICE HELD	AWARDS/ HONORS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Senior Year**

ORGANIZATION	OFFICE HELD	AWARDS/ HONORS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**B. OTHER SPIRITUAL ACTIVITIES:** School - related ministries, special Events, retreats attended, bible school, etc.

**Junior Year**

ORGANIZATION	OFFICE HELD	AWARDS/ HONORS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Senior Year**

ORGANIZATION	OFFICE HELD	AWARDS/ HONORS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**II. SCHOLASTIC ACHIEVEMENT**

- A. Please list **grade point average** for nominee as a:  
**Freshman:** \_\_\_\_\_ **Sophomore:** \_\_\_\_\_ **Junior:** \_\_\_\_\_ **Senior:** \_\_\_\_\_
- B. List scholastic groups or honors awarded and any office held, such as Honor Society, BETA Club, Band, Debate Team, Year Book Staff, Awards, etc.

**Junior Year**

ORGANIZATION	OFFICE HELD	AWARDS/HONORS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Senior Year**

ORGANIZATION	OFFICE HELD	AWARDS/HONORS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**III. CIVIC-COMMUNITY/CULTURAL ORGANIZATIONS**

List organizations and service related clubs, honors, awards, and offices that you have held.

**Junior Year**

ORGANIZATION	OFFICE HELD	AWARDS/HONORS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Senior Year**

ORGANIZATION	OFFICE HELD	AWARDS/ HONORS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

#### IV. ATHLETIC ACTIVITY

##### Junior Year

ACTIVITY	ELECTED POSITION	AWARDS/ HONORS

##### Senior Year

ACTIVITY	ELECTED POSITION	AWARDS/ HONORS

#### **We are Knights of Columbus.**

Formed in 1882, the Knights of Columbus is the world's largest Catholic fraternal organization.

Membership is open to practical Catholic men who are 18 years old or older.

Knights support and serve the Church, their community, their family, the youth and those in need. We are men of faith and men of action.

Knights (and family of knights) also receive exclusive access to certain college scholarships and exclusive access to top rated life insurance and retirement products.

Become a Knight. Support the Knights.

Websites: [www.KofC.org](http://www.KofC.org)     [www.louisianakc.org](http://www.louisianakc.org)

Email: [membership@louisianakc.org](mailto:membership@louisianakc.org)

**V. SOCIAL ACTIVITY**

**A. SCHOOL BASED ACTIVITIES**

**Junior Year**

ACTIVITY	ELECTED POSITION	AWARDS/ HONORS

**Senior Year**

ACTIVITY	ELECTED POSITION	AWARDS/ HONORS

**V. SOCIAL ACTIVITY**

**B. SOCIAL ACTIVITIES NON-SCHOOL RELATED**

**Junior Year**

ACTIVITY	ELECTED POSITION	AWARDS/ HONORS

**Senior Year**

ACTIVITY	ELECTED POSITION	AWARDS/HONORS

**VI. GENERAL INFORMATION**

A. Please indicate nominee plans after high school graduation, college planning to attend, subject major, as well as any other present plans.

**REQUIRED SIGNATURES:**

*My signature below states that I have been truthful completed this application.*

\_\_\_\_\_  
STUDENT SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
Student's Church Parish

\_\_\_\_\_  
Signature of Pastor or Associate Pastor

\_\_\_\_\_  
Signature of Grand Knight of Nominating Council

\_\_\_\_\_  
Signature of School Principal or Counselor

\_\_\_\_\_  
Nominating Council's Church Parish

Nominated by Council # : \_\_\_\_\_

\_\_\_\_\_  
Signature of Grand Knight of Council Serving the Student's Church Parish (if different from nominating Council's church parish) Council Number : \_\_\_\_\_

**(Send to DIOCESAN ADMINISTRATOR)**  
**Before mailing this nomination form, please check the following items:**  
**1. Review entire form to see that ALL sections are completed.**  
**2. Make sure that all required signatures are on nomination form.**  
**3. Make sure the nominating KC Council Number is listed on the form.**  
**4. BE SURE THAT ALL PAGES ARE INCLUDED.**