



Knights Of Columbus Minnesota State Council

EXEMPLIFICATION REQUEST

DATE OF REQUEST _____ DISTRICT NUMBER _____ DIOCESE _____

HOST DISTRICT DEPUTY _____ PHONE _____

REQUESTED DATE OF EXEMPLIFICATION _____ (Provide at least 90 days notice)

LOCATION OF EXEMPLIFICATION – BUILDING, ADDRESS, DIRECTIONS

DEGREES SCHEDULED	START TIME	STAFF REQUESTED
FIRST DEGREE		
SECOND DEGREE		
THIRD DEGREE		

Allow at least 1 ½ hours between the start times of each degree

Host DD is responsible for:

- Advertizing the degree
- Providing First degree team (if scheduled) and degree kits
- Ordering sufficient Third degree Medallions for the expected Candidate count
- Verifying with CO and second degree Captain at least 1 week prior to the scheduled date
- Second degree staff travel expenses – have a check available prior to the start of the degree

I have read and agree to comply with these requirements _____ DD (sign)

**ALL REQUESTS MUST BE APPROVED BY THE STATE DEPUTY
AND ONCE APPROVED CAN ONLY BE CANCELLED BY HIM**

STATE DEPUTY

DATE