

# VOCATIONS GRANT REQUEST FORM (2007-2008)

Knights of Columbus, Virginia State Council

(Guidelines for completing form on back page)

Date \_\_\_\_\_

Name \_\_\_\_\_ Postulant or Seminarian \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone Number (\_\_\_\_) \_\_\_\_\_ Current Diocese \_\_\_\_\_

Name/Address/Phone Number of your Vocations Director, Seminary or Motherhouse.

\_\_\_\_\_  
\_\_\_\_\_

Member of Knights of Columbus: Yes \_\_\_ No \_\_\_ Council # \_\_\_\_\_ Council Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Grant request amount: \_\_\_\_\_

Reason/Time Frame for grant request. (Attach additional information as required)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant Signature \_\_\_\_\_ Print Name \_\_\_\_\_

Sponsoring Council # \_\_\_\_\_ Council Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Council Action: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Grand Knight Phone/Email: \_\_\_\_\_

## GUIDELINES FOR COMPLETING VOCATIONS GRANT REQUEST FORM

Please type, or print in black ink.

Applicant must make an application for vocation grant through a sponsoring Council or the Virginia State Council.

Applicant must show current Diocese or future slated Diocese.

Reason for grant request, the time frame required; the availability of other funds for the purpose required; statement of current resources, and other sources of financial support must be detailed. Attach additional information as required.

Request may be accompanied by a letter listing any extenuating circumstances that may help the Vocations Committee approve the request.

Council should state what the Council is doing for the support or reason for lack of support of this application.

Mail the request to:

David J. Todd, PGK, DD, PFN  
VA State Vocations Chairman  
3137 Plantation Pkwy.  
Fairfax, VA 22030-2117  
703-352-2724  
datodd@verizon.net