DEGREE EXEMPLIFICATION REPORT FORM

Jurisdiction:		District Number:			
Degree Date:		Host Council Number:			
Submitted by:					
Title: Membership #:					
	Or	nly submit one r	eport per Deg	gree.	
	DO NOT	report multiple	Degrees on a	single form.	
	•	Unity and Fraternit	y I Chamber	☐ Other	
		eam Council:			
		Team Name:			
		Conferring Officer			
Total Number	of Candidates:				
Length of Deg	ree:				
New Member		(for Exemplifications:Online I	·	·	
Participating Councils – New Members Only					
Council Number	New Members	Council Number	New Members	Council Number	New Members
General Obser	vations:				

Send To: ceremonials@kofc.org

cc: State Deputy

State Ceremonial Chairmen