

Squire of the Year Award, Ohio State Circle

Worthy State Chief Squire:

Our Circle: _____

Name of Circle, Number, Diocese

submits the following name as its Circle Nominee for the Squire of the Year Award

First, Middle, Last Name

Date of Birth _____, Age _____, Parents Names _____

Church/Parish _____ School _____

Address _____ City _____

Telephone Number (_____) _____ - _____

Scholastic Achievements: _____

Circle Involvement /Leadership: _____

Community /Church Involvement: _____

Athletic Involvement and Other Comments: _____

Mail to the Chief Squire by May 10th. Feel free to use multiple pages.

***** Make copy of PROGRAM BOOK original *****