

Utah Knights of Columbus - Membership/Program Plan for Council #:

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(statement of what you'd like to achieve for your council in regards to Membership) **Fraternal Year:**

Membership Mission Statement/Goal:	
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Membership Plan: *(how are you going to achieve the goal mentioned above - What are 3 specific things you can do? What can you do different from the past?)*

Action item:	
Action item:	
Action item:	
Action item:	
What are you going to do different:	
What are you going to do different:	
What are you going to do different:	

Membership Team Members:	Goals	Annual Goal	Q1 Goal	Q2 Goal	Q3 Goal	Q4 Goal
Membership Director:	Intake*:					
Grand Knight:	Planned Loss**:					
Retention Chair:	Deaths***:		<i>*Intake (Net goal + Planned losses)</i>			
Program Director / Other:	<i>**Deaths don't count against quota</i>		<i>**Planned loss is 3% of membership, Deaths is 1%</i>			Insurance Goal
Online Membership Chair / Other:	Number of Members as of 7/1	Target % growth	Annual Net Goal	Online Mbr Goal	<i>Host min of 2 benefit seminars</i>	
Other:	Enter # here:	5%				

(statement of what you'd like to achieve with your programs, action items to achieve the goal, and how the programs can assist recruitment)

Program Mission Statement/Goal:	
Action item:	
Action item:	
How can the council use it's programs to recruit?	

Program Categories:	Faith	Family	Community	Life
<i>*Check if program is recruitment opportunity</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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| Star Council Award requirements
- McGivney Award (meet membership goal)
- Founders Award (meet insurance goal)
- Columbian Award (programs) | - Submit Program Personnel Report (Form 365)
- Submit Fraternal Survey of Activity (Form 1728)
- Safe Environment Compliant |
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