APPLICATION TO EXPERIENCE A CURSILLO

Cursillo is an experience of Christian community, which celebrates the Gospel message in today's world. As the community forms, the focus is on you and your relationship to Christ and to others. It can be a demanding and rewarding experience. Cursillo is not intended to provide treatment for personal problems or marital difficulties. Those who may be experiencing emotional crises should not attend a Cursillo until difficulties are resolved.

INSTRUCTIONS TO PROSPECTIVE CANDIDATE			INSTRUCTIO	INSTRUCTIONS TO SPONSORS				
 Fill out part 1 of application and print. Sign and date application. Return it to your sponsor. If you have any questions, ask your sponsor. Attach a separate sheet, if needed. Sponsor's Name Sponsor's Phone 		 Fill out part 2 of application. Ask candidate's clergy person to fill out and sign part 3. Contact the secretariat if you have any questions. Attach separate sheets if needed. It is mandatory to attend a Sponsors Workshop prior to sponsoring a candidate. Be prepared to attend a Team Sponsor's Meeting. If you are co sponsoring, each sponsor must fulfill the Sponsorship Workshop requirement. 						
PART 1 - APPLICANT INFORMATION								
Name	Nickname			Today's Date				
Address		City		Zip Code				
Phone (HM)	(WK)		Ext	Age	Birthdate	(MM/DD)		
Mobile	E-Mail Add	ress						
Marital Status (check or Married Do you have	Seperated/Divorced		lowed S ges of Childre	Single n?	How Long?			
Preferred dates of Curst	illo (number priority)	Winter	(Jan/Feb)	Spring	(Apr/May)	Fall (Sep/Oct)		
Religious Affiliation		Do you att	tend church?	hurch? Have you been baptized?				
Parish/Church Name								
Address								
City/State Please describe: Why are you a Christ	ian?				Zip			
Church/Community I	nvolvement							
Why you want to exp	erience Cursillo							
Any special medical,	physical or dietary ne	eds						

Signature of applicant _

Your sponsor will be sent a letter of acceptance when your application is approved, or you will be notified of any reasons for non-approval

Part 2 - SPONSOR'S RECOMMENDATION FOR CANDIDACY

Sponsor's Name		Phone: (Home)	(Work)						
Address	City		Zip Code						
Date & place of your Cursillo?									
Have you attended a sponsorship workshop?	If yes, whe	en?							
How will you support your candidate?									
How long have you known your candidate?	In v	In what capacity?							
To what post-cursillo community will your candidate return?									
Has your candidate's spouse experienced Curs	illo? If	If not, does she/he intend to?							
Please use this space to describe your candidate; especially any circumstances in his/her life that you think would be helpful for the team to know about.									
		<i>.</i>							
After prayerful consideration, I recommend:		(candidate's name) for Cursillo.							
Sponsor's Signature			Date						
Part 3 - <u>AFFIRMATION BY CANDIDATE'S PRIEST/PASTOR/MINISTER</u>									
Clergy Name		Phone							
Address	City		Zip Code						
Parish/Church Name	Addr								
v i	ved on a team?	•	he Cursillo Movement?						
Are there:Active Cursillistas in your parish?Regular Fourth Day Activities?									
How long have you known your candidate?In what capacity?									
Will this candidate be returning to your parish?									
Please add any observations that you feel are relevant.									
Do you feel that this person can accept the demands and responsibilities of Cursillo at this time?									
May we assume that by signing this form you support the candidacy of this person?									
Clergy Signature		Your title							
Would you like to know more about Cursillo?									
MAIL FORM TO: SF/SM CURSILLO SECRETARIAT P. O. BOX 280972 SAN FRANCISCO, CA 94128-0972									