

# Oakland Diocese Cursillo Community

## CANDIDATE APPLICATION

Send **signed** forms to: Secretariat Oakland Cursillo

P.O.Box 2608, Dublin, CA 94568 *and email*

[Oak.Cursillo.Registrar@gmail.com](mailto:Oak.Cursillo.Registrar@gmail.com) Catherine Romero (510) 915-8355

**PLEASE PRINT LEGIBLY AND INCLUDE EMAIL ADDRESS**

DATE: \_\_\_\_\_ CANDIDATE NAME: \_\_\_\_\_

Preferred Name \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ YEAR OF BIRTH: \_\_\_\_\_

RELIGIOUS DENOMINATION: \_\_\_\_\_ BAPTIZED: Yes \_\_\_ No \_\_\_

PARISH or CHURCH NAME: \_\_\_\_\_ CITY: \_\_\_\_\_

(If applicable) **IS YOUR SPOUSE PLANNING TO MAKE A CURSILLO WEEKEND?** Yes \_\_\_ No \_\_\_

**ALLERGIES** (Food, Flowers, Perfumes, etc.): \_\_\_\_\_

**MEDICAL & DIETARY NEEDS:** \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_

EMERGENCY NUMBER: \_\_\_\_\_

\_\_\_\_\_  
**Signature of CANDIDATE**

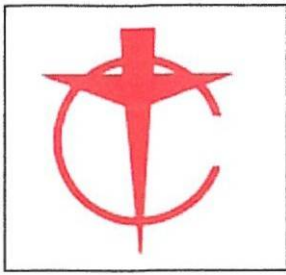
\_\_\_\_\_  
**NAME of Sponsor**

\_\_\_\_\_  
**Signature of SPONSOR**

\_\_\_\_\_  
**NAME of Clergy**

\_\_\_\_\_  
**Signature of CLERGY**

**FOR PRE-CURSILLO WEEKEND COMMITTEE:** Date Received \_\_\_\_\_ Date Approved \_\_\_\_\_



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## SPONSOR FORM

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### PLEASE PRINT LEGIBLY AND INCLUDE EMAIL ADDRESS

SPONSOR NAME: \_\_\_\_\_ NAME OF YOUR CANDIDATE \_\_\_\_\_

YOUR ADDRESS: \_\_\_\_\_ CELL #: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

Where do you attend church? \_\_\_\_\_ Where and when did you make your Cursillo weekend?: \_\_\_\_\_

Are you active in a Group Reunion? Y\_\_\_ N\_\_\_

How long have you known this candidate? \_\_\_\_\_ Relationship: \_\_\_\_\_

Why is this person a good candidate and why do you recommend them? \_\_\_\_\_

How have you planned to introduce your candidate to the Cursillo community? \_\_\_\_\_

Have you discussed medical, dietary and physical needs with your candidate? Y\_\_\_ N\_\_\_

Does candidate have physical impairment or require special arrangements? Y\_\_\_ N\_\_\_ If "yes" explain \_\_\_\_\_

**As a sponsor, you are required to attend a sponsor workshop. You will be contacted of when and how this 15 minute meeting will be conducted.**

How will your candidate get to the Cursillo weekend? \_\_\_\_\_

I have informed this candidate about what to expect during and after the Cursillo weekend and they are willing to participate in the activities. I have made provisions for their introduction to their local Cursillo community. I will provide transportation to and from the Cursillo weekend and will support their spouse and family during their absence. I have informed my applicant of the cost of the weekend. **Please initial** \_\_\_\_\_

### **CLERGY FORM:**

A Cursillo weekend involves individual reflection on the relationship between Christian faith and daily life. As a result, we want to be sensitive to on-going pastoral issues. How long have you known the candidate? \_\_\_\_\_ Is there anything happening in this person's life that would be helpful for the Spiritual Advisor(s) of the weekend to know about? Y\_\_\_ N\_\_\_ If "yes" explain \_\_\_\_\_

Have you attended a Cursillo weekend? Y\_\_\_ N\_\_\_ Where? \_\_\_\_\_ When? \_\_\_\_\_ Worked a weekend? Y\_\_\_ N\_\_\_ Been a Spiritual Advisor? Y\_\_\_ N\_\_\_ Is there an active Cursillo community in your parish? Y\_\_\_ N\_\_\_ Does your parish have a Cursillo Rep? Y\_\_\_ N\_\_\_ If so, please provide us their

NAME \_\_\_\_\_ and email: \_\_\_\_\_

Do you recommend this candidate for a Cursillo Weekend? Y\_\_\_ N\_\_\_

CLERGY NAME: \_\_\_\_\_ PARISH: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ **Signature of CLERGY**

**FOR PRE-CURSILLO WEEKEND COMMITTEE:** Date Received: \_\_\_\_\_ Date Approved: \_\_\_\_\_ 20220327