



# Instructions for Completing the Cursillo Application

1. Make sure you are in constant contact with your sponsor.
2. If you do not have a sponsor, please contact us using the methods listed below.
3. If you are not sure about any part of the application, or application process contact your sponsor. If your sponsor is not available, then contact the Cursillo Leadership. Via email: [albancursilloweb@yahoo.com](mailto:albancursilloweb@yahoo.com), via mail Cursillo c/o St. Gabriel's Parish, 3040 Hamburg St., Schenectady, NY 12303.
4. Make sure all the information on the application is complete and legible.
5. **Do not** send any deposits until you are notified to do so. This notification will come once the weekend has been established. At that time, a deposit will be required.
6. If possible, please use email. Email allows us to communicate more efficiently and with less cost than using the United States Postal Service.
7. If you have, any questions...ask!

Cursillo  
c/o St. Gabriel's Parish  
3040 Hamburg Street  
Schenectady, NY 12303



# Candidate Application

(PLEASE PRINT OR TYPE FILL OUT ALL SECTIONS)

(I understand that my sponsor will keep me informed about all aspects of the weekend and should keep in touch with them)

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

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

Nick-name (if used) \_\_\_\_\_ Spouse's Name \_\_\_\_\_

Age \_\_\_\_\_ Marital Status \_\_\_\_\_ Date of Spouses' Cursillo weekend \_\_\_\_/\_\_\_\_/\_\_\_\_

Parish Name/Location \_\_\_\_\_

If Priest or Religious, Diocese or Community \_\_\_\_\_

Business/Occupation \_\_\_\_\_

Level of Education Completed: \_\_\_\_\_

Other Specialized Training or School \_\_\_\_\_

Are you a member of any Professional or Civic Organizations? (List) \_\_\_\_\_

Church Organizations or Movements in which you are active (List) \_\_\_\_\_

Why do you feel you would like to attend Cursillo? \_\_\_\_\_  
(if necessary use back of form)

What is your understanding of our follow-up program (group Reunion and Ultreya)? \_\_\_\_\_  
(your sponsor is responsible to inform you of these items)

Do you have any health problems or other needs which we should be advised of (i.e. special diet, etc.)? \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature of Sponsor: \_\_\_\_\_ Print Name \_\_\_\_\_

Sponsor's Phone \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Registration Fee \$25.00 required upon notification of the date of the weekend, the deposit is non-refundable.**  
Send this application to: **Cursillo c/o St. Gabriel's Parish 3040 Hamburg St., Schenectady, NY 12303**

\_\_\_\_/\_\_\_\_/\_\_\_\_    \$ \_\_\_\_\_    \_\_\_\_/\_\_\_\_/\_\_\_\_    \$ \_\_\_\_\_    \_\_\_\_/\_\_\_\_/\_\_\_\_    \$ \_\_\_\_\_    \_\_\_\_/\_\_\_\_/\_\_\_\_  
Date Rec'd    Deposit    Date Deposit Rec'd    Additional Payment    Date Rec'd    Additional Payment    Date Rec'd



Sponsor's Recommendation for Cursillo Candidate

Before filling out this application please read the sponsor information. A sponsor informative booklet is available. Contact person at bottom of page for assistance. If you are not able to meet these responsibilities, perhaps you are not ready for sponsorship. Please give this prayerful and careful consideration..

(Please Print or Type)

Date: \_\_\_/\_\_\_/\_\_\_

Print Name \_\_\_\_\_

Phone \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address: \_\_\_\_\_

Candidate Information

Candidate Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

1) What is your association with the candidate? \_\_\_\_\_

\_\_\_\_\_

2) Why have you encouraged your candidate to attend a Cursillo weekend? \_\_\_\_\_

\_\_\_\_\_

5) Does your candidate require any special health-related considerations regarding diet, rest, sleeping accommodations, etc?

\_\_\_\_\_

6) Do you attend Ultreya regularly? Yes \_\_\_\_\_ No \_\_\_\_\_, if yes.....which one(s) \_\_\_\_\_

7) Are you in a Group Reunion? Yes \_\_\_\_\_ No \_\_\_\_\_ if no, are you looking? Can we help? Y\_\_N\_\_

8) Additional Comments: \_\_\_\_\_

\_\_\_\_\_

The Pre-Cursillo Committee will remain in touch with you and inform you of any developments of which you should be aware (dates, etc.). A sponsor should notify the Pre-Cursillo Committee of any changes in the candidate's ability to attend the Weekend. I accept my responsibilities as a sponsor

\_\_\_\_\_  
Sponsor's Signature

\_\_\_/\_\_\_/\_\_\_  
Date

**CURSILLO IN CHRISTIAN LIVING  
DIOCESE OF ALBANY**



**Parish Administrator's Report**

(Please Print or Type)

Pastor's Name \_\_\_\_\_ Phone \_\_\_\_\_

Parish Name \_\_\_\_\_

Parish Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\_\_\_\_\_ has submitted an application to a three-day Cursillo weekend.  
(Candidate's Name)

This report is a requirement for each Cursillo Applicant.

The primary purposes of the movement are:

1. To develop in adult Christians a consciousness of the power and mission to become leaders in the work of Christian renewal.
2. To sustain them as they participate in diocesan and parish programs, and as they provide a Christian leaven in civic, social, and economic life.

The Cursillo is a course in Christian living, designed to train people to become effective lay apostles in the world. Candidates for the Cursillo should be active in apostolic work or have the potential too apostolic in the parish or in the life of the world. Each person should also be physically and emotionally sound.

Anyone with a very serious personal or family problem or anyone who is extremely nervous or emotional should not attend.

[  ] I do recommend the candidate listed above.

[  ] I do not recommend the candidate listed above.

Please explain your reasons.

---

---

---

---

\_\_\_\_\_  
Signature of Parish Administrator

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date