



Cursillos in Christianity®

Diocese of Springfield-Cape Girardeau

Southern Missouri Cursillo, PO Box 1105, Cape Girardeau, MO 63702-1105

Candidate Application

- Men's Cursillo, Carthage: October 20-23, 2022
 Women's Cursillo, Fredericktown: November 17-20, 2022
 Men's Cursillo, Fredericktown: December 1-4, 2022

The Catholic Cursillo is open to baptized Catholics. The person should be physically well, emotionally stable and able to receive the Sacraments of the Church, **especially the Eucharist**. The Cursillo is a method of giving those who have a potential for influencing others, a personal encounter with self, Christ, and others.

Name:		Parish:	
Address:		Phone:	
City, St:	Zip:	Birth date:	
E-Mail:		Occupation:	
Highest Education Level Completed: <input type="checkbox"/> Elementary <input type="checkbox"/> High School <input type="checkbox"/> College <input type="checkbox"/> Graduate +			
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed			
Married in the Catholic Church? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Spouse's Name:		Is spouse Catholic? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Has spouse made Cursillo? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Why do you wish to make a Cursillo?			
Are there any situations that would require special attention such as health, diet, disabilities, allergies, problems with stairs, etc.? <input type="checkbox"/> No <input type="checkbox"/> Yes/Explain			
Activities you are currently involved in such as parish ministries, civic, professional, hobbies, etc.			
Emergency Contact: Name:		Phone:	
Do you have any questions about Cursillo that your sponsor has not been able to answer?			
Has the follow-up program of Group Reunion and Ultreya been explained to you? <input type="checkbox"/> Yes <input type="checkbox"/> No		Have you read and understood the "Cursillo, What Is It" booklet? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Sponsor's Name		Sponsor's phone number	



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I have provided all the necessary information and answered all the questions.

Signature: _____

Date: _____

A \$10 non-refundable registration fee is requested at the time of registration.
Make checks payable to Diocese of Springfield-Cape Girardeau Cursillo.

Sponsor's Form

Speak to God about the person before speaking to the person about God.

To be a Sponsor is a privilege, and as such, carries a serious Christian responsibility. Sponsoring a friend for the Cursillo is not a haphazard circumstance. It should be a deliberate act to bring Jesus Christ into the world. Therefore, you must know your candidate very well and consider the important items noted below.

Mail both forms to: **Southern Missouri Cursillo, PO Box 1105, Cape Girardeau, MO 63702-1105**

Candidate's Name:		
Sponsor's Name:		Parish:
Address:		Phone:
City:	State:	Zip:
E-Mail:		
Are you active in Group Reunion ? Yes No		
Are you active in Ultreya ? Yes No Are you active in School of Leaders Yes No		
How long and how well do you know your candidate?		
How long have you been discussing Cursillo with your candidate?		
Is your candidate free to receive the Sacraments, particularly Eucharist?		
Has the candidate's spouse made the Cursillo? Yes No If no, is spouse interested in the Cursillo? Yes No If no, state the reason why, if known.		
Has he/she experienced a death of a loved one, trauma, divorce, or severe crisis within the past year? Yes No *If yes, contact a Secretariat member.		
Are you aware of any physical, psychological, emotional problems he/she may have? *If yes, please contact a member of the Secretariat (confidential).		
In your own words describe the candidate's personality/nature (leader, follower, quiet, etc.)		
Have you read and understood the Sponsor's Booklet? Yes No		
What other information or observations can you share with the Precursillo Chairperson about the candidate? Why do you recommend this candidate for Cursillo?		
Sponsor's Signature:		Date:

Candidate's Pastor

Candidate's Name:	
Pastor's Name:	Parish:



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Address:		E-Mail:
City & State:	Zip:	Phone:
Do you recommend this person for Cursillo? Yes No		
Pastor's Signature:		Date:

OFFICE USE ONLY: Reg fee recvd - Ck# _____ Date: _____