

SPONSOR'S APPLICATION
PLEASE PRINT AND COMPLETE ALL INFORMATION

SPONSOR'S NAME: _____
First Last Nickname (if any)

ADDRESS: _____
Street City State Zip

TELEPHONE, HOME: _____ CELL/WORK: _____ PARISH _____
(Please circle)

E-MAIL ADDRESS: _____

CANDIDATE NAME: _____

CANDIDTE IS: ____M ____F. IS YOUR CANDIDATE A CATHOLIC? ____ IF NO, PLEASE EXPLAIN: _____

HOW LONG HAVE YOU KNOWN YOUR CANDIDATE? _____ HOW LONG HAVE YOU DISCUSSED CURSILLO? _____

DATE AND LOCATION OF YOUR CURSILLO: _____

DO YOU PARTICIPATE IN A REGULAR GROUP REUNION? _____ HOW OFTEN? _____

DO YOU PARTICIPATE IN AN ENVIRONMENTAL GROUP? _____ HOW OFTEN? _____

DO YOU PARTICIPATE IN ULTREYA / WHERE? _____ HOW OFTEN? _____

INTO WHICH OF THESE COMMUNITIES DO YOU PLAN TO INCORPORATE YOUR CANDIDATE? _____

DOES YOUR CANDIDATE HAVE, OR HAS HAD, EMOTIONAL, PHYSICAL, DRUG OR ALCOHOL PROBLEMS OR ANYTHING THAT WOULD AFFECT HIS/HER FULL PARTICIPATION ON THE WEEKEND? IF YES, PLEASE EXPLAIN: _____

WHAT CAN YOU SHARE ABOUT YOUR CANDIDATE THAT WOULD BE HELPFUL TO THE LEADERS OF HIS/HER TABLE? _____

HAVE YOU PREPARED YOUR CANDIDATE IN A MANNER WHICH HE/SHE CAN PARTICIPATE FULLY IN THE WEEKEND & THE FOURTH DAY? _____

IF THE CANDIDATE IS MARRIED, HAVE YOU PREPARED BOTH SPOUSES? (IF NO, EXPLAIN FULLY) _____

IS THE SPOUSE'S APPLICATION ACCOMPANYING THIS ONE? (IF NO, EXPLAIN FULLY) _____

WHAT HAVE YOU EXPLAINED TO THE CANDIDATE ABOUT THE FOURTH DAY (i.e. GROUP REUNION, ULTREYA, ETC.)? _____

WHAT INVOLVEMENT DOES YOUR CANDIDATE HAVE IN HIS/HER PARISH AND CHURCH RELATED GROUPS? _____

WHY IN YOUR OPINION SHOULD THIS CANDIDATE BE CONSIDERED FOR A CURSILLO? _____

SPONSOR'S SIGNATURE: _____ DATE: _____

ULTREYA LEADER'S SIGNATURE (from candidate church) _____ DATE: _____