

TO BE FILLED OUT BY SPONSOR

Sponsor Name:		Candidate Name:	
Address:		City:	State: Zip:
E-Mail:			
Home Phone:		Business Phone:	
Month, Year of Your Cursillo:		Cursillo Number:	Place:
Church Now Attending:		City:	
D YES D NO	Are you in a Cursillo Reunion Group?		
D YES D NO	Do you feel your candidate has the physical and mental health needed for a Cursillo weekend?		
D YES D NO	Does your candidate have any special dietary needs?		
D YES D NO	If yes, will you help provide those dietary needs?		
D YES D NO	If your candidate is not Roman Catholic, have you explained the Catholic practices of piety at Cursillo?		
D YES D NO	If your candidate is not Roman Catholic, have you explained that there is no intercommunion?		
D YES D NO	If your candidate is married, have you discussed Cursillo with the candidate's spouse?		
D YES D NO	Will you bring your candidate to Registration?		
D YES D NO	Will you attend the Sponsor's Hour?		
D YES D NO	Will you attend the Apostolic Hour?		
D YES D NO	Will you attend the Clausura?		
D YES D NO	Have you discussed the post-Cursillo meeting with your candidate and explained its purpose?		
D YES D NO	Are you able and willing to assist your candidate to get into a Cursillo Reunion Group?		
D YES D NO	Are you able and willing to accompany your candidate to several Ultreyas?		
D YES D NO	Are you doing palanca for your candidate?		
D YES D NO	Are you aware of the importance of minimal contact with your candidate during the Cursillo weekend, even if the candidate is your spouse?		
What is your relationship, if any, to the candidate?			
How long have you known your candidate?			
Why do you feel this person would be a good candidate?			
Comments:			
Sponsor's Signature:		Date:	