

CANDIDATE APPLICATION

Cursillo Movement of the Diocese of Erie

Instructions for Candidates to make Cursillo in the Erie Diocese:

1. Complete this form in its entirety. Forms can be completed manually or in Microsoft Word.
2. Give this completed application to your sponsor for processing either in person, by mail or via email.

Instructions for Sponsors:

1. Review completed application for completeness.
2. Forward the completed application to:

Cursillo Movement of the Diocese of Erie
429 East Grandview Blvd.
P.O. Box 10397
Erie, PA 16514-0397
Email: Office@ErieCursillo.org
Fax: 814-824-1128

**Questions can be directed to the Cursillo Office or to any of the Area Coordinators listed below:

Crawford County

Jim & Wendy Hess
814-333-6586

jimandwendyhess@zoominternet.net

Clarion/Venango County

Rodney and Rita Hartle
814-354-2200

rhartle@zoominternet.net

Mercer County

Frank Smeraglia
724-347-5050

ramsfms@aol.com

Elk/Cameron County

Paul and Mary Tettis
814-772-0202 (H), 814-594-7360 (C)

tettisph@windstream.net

Bill and Gina Smith
814-594-7587

mount_n_man2000@yahoo.com

Jefferson/Clearfield County

Jim & Darlene Davidson
814-765-5353

jpd808@yahoo.com

J & Sue Angelo
814-236-3517

ioesangelo@yahoo.com

Please proceed to application on Page 2.

CANDIDATE APPLICATION
Cursillo Movement of the Diocese of Erie

APPLICANT INFORMATION										
Full Name										
Nickname					Maiden Name					
Street Address										
City		State			ZIP					
Phone		Home			Cell					
Parish		Parish City			Age					
Email address					Sex		Male <input type="checkbox"/>		Female <input type="checkbox"/>	
Marital Status		Single <input type="checkbox"/>	Married <input type="checkbox"/>		Widowed <input type="checkbox"/>		Separated <input type="checkbox"/>		Divorced <input type="checkbox"/>	
If Convert, Date of Conversion						Number of Children (If any)				
Religious Denomination of Spouse										
Education		Occupation								
<p>Although Cursillo is primarily a religious experience, it is also physically and emotionally very demanding. Please let our spiritual directors know if you have any special needs.</p> <p>a) Are on any medication for a mental health condition or undergoing intensive counseling? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>b) Do you have any medical concerns such as diabetes, pregnancy, disability, arthritis, or special dietary needs? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>c) Cots are provided for all candidates. Do you need a special bed and mattress? Yes <input type="checkbox"/> No <input type="checkbox"/></p>										
Please Specify										
<p>In what way do you participate in parish, diocesan or community activities (list specifically below)?</p>										
Has the Cursillo Movement been explained to your satisfaction?		Yes <input type="checkbox"/>								No <input type="checkbox"/>
Do you play a musical instrument?		Yes <input type="checkbox"/>			No <input type="checkbox"/>		If yes, which one?			
Do you require a special diet?		Yes <input type="checkbox"/>			No <input type="checkbox"/>		Explain			
SPONSOR INFORMATION										
Name										
Street Address										
City		State			Zip					
Phone		Home			Cell		Work			
Applicant Signature							Date			