Thank you for applying to make the Spiritual Exercises.

The full experience of the Spiritual Exercises is 34 days long and includes room and board, theological preparation days, daily meeting with your spiritual directory, daily Eucharist, and subsequent reflection after the retreat.

Cancellation Policy:

* 90 days or more prior to start – 100% refund
* 60 days or more prior to start – 50% refund
* 30 days or more prior to start – 25% refund

Your experience begins with 2 days of preparation and concludes with a day of reflection. During the retreat, you will pray four to five times per day, meet with your spiritual director each day, and participate in daily Eucharist.

Normally, an applicant has made at least one 8-day silent directed retreat or made the 19th Annotation Retreat as well as being in ongoing spiritual direction.

After you have sent your application and made an application deposit to The Jesuit Retreat Center, please mail the following to:

Summer Program

The Jesuit Retreat Center

300 Manresa Way

Los Altos, CA 94022

**Additional materials required:**

1. Request a statement from your spiritual director indicating your participation and length of time in direction, as well as your director’s opinion regarding your readiness for the 30-Day retreat.
2. Provide two (2) letters of recommendation from people who know you well. Preferably, this should come from individuals familiar with Ignatian spirituality. Your writers must be familiar with you as a person of faith and as an active member of a community of faith. Please ask them to reflect on your preparedness to enter into the challenge and grace of the Spiritual Exercises.

An application deposit of $600 is required to reserve a space. You will receive confirmation of your acceptance into the retreat within 14 days of receipt of your fully-completed application. If you are accepted, your payment of the remaining balance ($3,350) is due 14 days after acceptance. Should your application be declined, your $600 application deposit will be fully refunded.

***Name, Address, and Misc. Personal Information***

Professional Title

First:

**Middle:**

**Last:**

**Suffix:**

Name on Name Tag:

Address:

City:

State:

ZIP:

Home Phone:

Work Phone:

Cell Phone:

E-Mail:

Gender:

Marital Status:

Date of Birth:

Christian Denomination:

Have you made a retreat here before? (when and type)

Do you have any mobility or dietary restrictions? Please specify.

***Emergency Contact***

Name:

Phone:

Relationship:

***Questions :*** *Please respond to the following questions as fully as possible. More is better than less.*

**1. Please describe your occupation and how long you’ve been engaged in it. Are you active in ministry of any kind?** **If so, please describe**.

**2. Each of us has major moments in our history: highs and lows, lights and shadows, moments of freedom and lack of freedom. In your personal and spiritual autobiography, please write about those moments - especially as regards your family, education, relationships, ministry and more**.

**3. Have you made an individually directed, silent retreat before? If so, what occasioned the retreat? Where and when did you make it? How was it helpful**?

**4. Why do you pray? How do you pray? How much time do you spend in prayer? What do you pray about? Do you pray regularly, e.g. daily or sporadically?**

**5. The Spiritual Exercises employ various ways of praying – imagination, memory, contemplation, reason, to name of few. Each of these methods of prayer fosters the graces characteristic of the Exercises. Are you comfortable using these forms of prayer during the course of the Exercises?**

**6. Describe your experience of receiving spiritual direction. What do you talk about in spiritual direction? In what ways do you find it helpful? Are you comfortable in this setting? Do you receive direction regularly? If so, how often?**

**7. Please comment on the place of communal worship in your life. For Roman Catholics, comment on the place of the Eucharist (Mass), the Sacrament of Reconciliation, and the place of the other sacraments and the Church in your life.**

**8. Attendance and participation at daily Mass during the retreat is expected. Are you comfortable with this?**

**9. Why are you considering making the 30-day Retreat at this particular time in your life? What hopes and desires, challenges and difficulties are prompting you to make the Spiritual Exercises now? What are you looking for? What do you seek? How do you think the Exercises may be helpful for you at this time?**

**10. Are you open to being individually directed by a layperson, a sister, or a priest assigned by the retreat team leaders? Do you have a preference? [Note: We will try our best but we cannot guarantee a preference.]**

**11. Do you have any limiting conditions in your emotional, psychological, or physical health that may affect your making this retreat?**

**12. Are you now or have you ever been in psychological therapy?** **Please explain.**

**13. Are you willing to keep the spirit of quiet, i.e silence, throughout the retreat?**

**14. Are you willing to curtail the use of cell phones, computers, and other electronic paraphernalia during the entire retreat?**

***Thank you!***

***The Staff of The Jesuit Retreat Center of Los Altos***

*When complete, please save this application to your computer and then email to* ***Retreat@jrclosaltos.org*** *as an attachment.*