# **Application for Sponsorship**

# Touch a Life

A child sponsorship ministry of the Final Frontiers Foundation, Inc.

Personal Information on the child:				
Name:	Dayana Lizeth Rivera Arguijo			
Name child is called by if different:				
Birthday (d/m/y):	23-Feb-02			
Gender:	Female			
Nationality:	Honduran			
Country:	Honduras			
Town:	San Juan de Flores			
What is the child's current status?				

**Destitute** 

Please write a story about how the child became orphaned or destitute or abandoned. (Make it as detailed as possible and use additional paper if necessary.)

The child needs helps because only the father works and he does not have enough resources to give her what she needs.

### **Family Information:**

Does the child have any natural brothers or sisters? (If the answer is yes, please list their names and current ages.)

Yohana Yamileth Arguijo Carranza 12 years old Yenifer Andrea Rivera Arguijo 4 years old

What is the child's eye color? **Black** 

What is the child's hair color? **Dark brown** 

What language(s) does the child speak? **Spanish** 

What are the typical foods eaten by the child? Rice, beans and egg

What is the child's favorite color? Orange

Has the child ever gone to school? Yes

What is the last grade completed? 2nd. grade

Is the child currently attending school? If not, why not?

If the child has toys, what does he like the most? A doll

What toys does the child wish to have? Dolls and stuffed animals

What is the father's name? Elmer Omar Rivera Ocles

What is the father's occupation and weekly salary? <b>Agriculture. Earns 620 Lempiras weekly.</b>
What is the mother's name? Ruth Yamileth Arguijo Cabrera
What is the mother's occupation and weekly salary? Housewife
Describe the specific living conditions of the child in detail. (List the child's material possessions.)
An adobe house. It has a bedroom and a living room.
Describe the condition of the house and living area. (Please include photographs)
The bedroom has a matress over the floor. They have no furniture.

Spiritual Information:
Has the child accepted Christ as their personal Savior? Yes
Does the child attend Sunday School regularly? If not, why not? <b>No</b>
What is the name of the church? Renacer
What city is the church in? San Juan de Flores
What is the pastor's name? Marcos
Does the child have a favorite Bible story or verse?
Medical Information:
Does a doctor examine the child regularly? Only when she is sick
Does the child have any physical or mental handicaps? (If yes, please explain.)
None
What is the child's height? <b>1.40 cm</b> Weight? <b>60 lbs</b>

#### Placement Information:

Where is the child now living?

With their own family

### **Financial Accountability:**

Will the child be willing to acknowledge (when asked in person or in writing) that they receive financial support from Final Frontiers Foundation / Touch a Life?

#### Yes

Will an adult be appointed to help the child to complete the letters, which will be given to the sponsor?

#### No

Who?

#### The child

## **Summary:**

If you would like to give us any information other than what was asked, please do so here.

This application was translated by: **Turk Services** 

Date (d/m/y): 1/13/2011

This application was approved by (pastor):

Date (d/m/y): 24-Jun-10

This application was approved by (director):

Date (d/m/y):

# **Application for Sponsorship**



# Touch a Life

A child sponsorship ministry of the Final Frontiers Foundation, Inc.

I.D
Personal Information on the child: Informacion Personal del Niño
Name: Dayana lizeth Rivera arguijo
Name child is called by if different:
Gender: <u>femenino</u>
Birthday (d/m/y): 23/02/2002 Cumpleannos
Nationality: <u>Hondurena</u> Nacionalidad
Country: Hondons Pais
Town: San Juan de Plores Pueblo
What is the child's current status? Condicion del Niño
<ul> <li>Orphan (Huerfano)</li> <li>Abandoned (Abandonado)</li> <li>Destitute (Pobre viviendo con su familia)</li> <li>Other (si es otro entonces explique)</li> </ul>

Please write a story about how the child became orphaned or destitute or abandoned. (Make it as detailed as possible and use additional paper if necessary.)

Porfavor Escribe una pequeña historial de como el niño llego a ser orfano o Pobre o abandonado. Use muchos detalles si es posible. Si es mucho, Utilice otro papel.

La nina necesita la ayuda por que solo el padre trabaja y no le rinde para darle la necesario.

## Family Information:

Información de la Familia

Does the child have any natural brothers or sisters? (If the answer is yes, please list their names and current ages.) Si el Niño tiene hermanos, escribe sus nombres y edades

Name:	yora	na	Pndrea	e 14	argu	110	Carn	un ZaAge:	12
Nombre	1 3		/					Edad	
Name:	Venil	Cel	Procea	Ri	vera	01	90110	Age:	4
Nombre	/				w	(		Edad	
Name:								Age:	
Nombre								Edad	
Name:								Age:	
Nombre _							_	Edad	
Name:								Age:	
Nombre _				_				Edad	
Name:								Age:	
Nombre								Edad	
Name:								Age:	
Nombre								Edad	
Name: _								Age:	
Nombre				r				Edad	
Name:								Age:	
Nombre _								Edad	
Name:								Age:	
Nombre				_				Edad	
Name:								Age:	
Nombre				_		^		Eďad	

What is the child's eye color?

Color de Ojos del Niño

What is the child's hair color?

Color de Pelo del Niño

What language(s) does the child speak?

Que Idioma Habla el Niño Español

What are the typical foods eaten by the child?

Que Tipo de Comida come el Niño

What is the child's favorite color?

El color favorite del Niño

Aparanjado

Has the child ever gone to school? Si el Niño has asistado la escuela What is the last grade completed? Cual fue el ultimo grado completado Is the child currently attending school? If not, why not. Si no va a la escuela entonces porque If the child has toys, what does he like the most? Que juguetes tiene el Niño ma moneca. What toys does the child wish to have? Que Juguetes le gustaria tener monedas. y peloches. What is the father's name? Nombre del Padre Elmer Omar Rivera veles. What is the father's occupation and weekly salary? En que trabaja el Padre y cuanto Gana Agricultura. gana 1620, a la semana What is the mother's name? Nombre de su madre Roth yamileth arguijo cabrera What is the mother's occupation and weekly salary? Trabajo de su madre y cuanto gana Amade casa Describe the specific living conditions of the child in detail. List the child's material possessions. Detalle las condiciones en como vive el niño con detalles incluyendo su casa

En una casa de adove un cuarto y

una sala.

. .

un cuarto no tienen cama duermen en el suelo en un colchon, no tienen muebles
Spiritual Information: Informacion Espiritual Has the child accepted Christ as their personal Savior?  Ha aceptado a Cristo el niño
Does the child attend Sunday School regularly? If not, why not? Si el Niño va a la escuela dominical y si no porque
*
What is the name of the church? Renacer  Nombre de la Iglesia
What city is the church in? San Juan de Flores. En que pueblo esta la Iglesia
What is the pastor's name?
Does the child have a favorite Bible story or verse? Cual es el Versiculo favorite del Niño

Describe the condition of the house and living area. (please include photographs) Detalle la condition de su casa incluyendo como duerme y sus muebles

información Medico
Does a doctor examine the child regularly? 500 coando se enferma Si el Niño es examinado regularmente por un doctor
Does the child have any physical or mental handicaps? (If yes, please explain.) Si el Niño tiene algun problema de salud o mental (Si tiene, Explique)
What is the child's height? 1 - 40 weight? 60 libras  Cuanto Mide el Niño  weight? Feso
Placement Information: Informacion General Where is the child now living? (Con quien vive el Niño en este momento)  Orphanage (orfanato)  Christian Home (con una famila Cristiana)  With their own family (con su familia)  Other (please explain) (Otro)
Financial Accountability:  Requesitos de Ayuda  Will the child be willing to acknowledge (when asked in person or in writing) that they receive financial support from Final Frontiers Foundation / Touch a Life?  El Niño promete cuando es preguntado decir que sus ayudas vienen de el programa Touch a Life  Si o NO
Will an adult be appointed to help the child to complete the letters, which will be given to the sponsor?
Who? \a \cdots \cdots

**Medical Information:** 

# Summary: Informacion Final

If you would like to give us any information other than what was asked, please do so here.

Si hay algo que no preguntamos y es importante que sepamos del Niño, esribelo aqui

Firma del Traductor	
Date (d/m/y): 24/06/10 Fecha	
This application was approved by (pastor): Firma del Pastor que lo aprobo	Marcos
Date (d/m/y): 24/06/10 Fecha	
This application was approved by (director): Firma del Director del programa	
Date (d/m/y):Fecha	