

## Application for Sponsorship

# Touch a Life

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

### Personal Information on the child:

Name: **Leana Yolibeth Acosta Maradiaga**

Name child is called by if different:

Birthday (d/m/y): **6/24/2001**

Gender: **Female**

Nationality: **Honduras**

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 help because she only lives with her mother, the father is dead and they only survive with some help they receive from other people.

**Family Information:**

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

Cristian Antonio (7 years old)  
Joselyn Anabel (12 years old)  
Belkin Yolibeth (9 years old)

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

What is the child's hair color? **Brown**

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

What are the typical foods eaten by the child? **Rice, tortillas, beans and chicken sometimes**

What is the child's favorite color? **Red**

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? **Does not have toys**

What toys does the child wish to have? **A doll and a set of little dishes**

What is the father's name? **Rene Armando Acosta**

What is the father's occupation and weekly salary? **Doesn't work**

What is the mother's name? **Glenda Xiomara Maradiaga**

What is the mother's occupation and weekly salary? **Doesn't work**

Describe the specific living conditions of the child in detail. (List the child's material possessions.)

Doesn't own a house, they live in a provided adobe house with no ground, just dust, tin roof, with one room. It has electricity and water

Describe the condition of the house and living area. (Please include photographs)

The child sleeps with her mother and the other siblings sleep in the other bed (which is a table with a mattress), one chair and a plastic table

**Spiritual Information:**

Has the child accepted Christ as their personal Savior? **Yes**

Does the child attend Sunday School regularly? If not, why not? **Yes**

What is the name of the church? **Iglesia de Dios es Amor**

What city is the church in? **San Juan de Flores**

What is the pastor's name?

Does the child have a favorite Bible story or verse? **Genesis 1:1**

**Medical Information:**

Does a doctor examine the child regularly? **Yes**

Does the child have any physical or mental handicaps? (If yes, please explain.)

**Just for common diseases**

What is the child's height? **110 cm**

Weight? **35 lbs**

**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?

**Yes**

Who?

**Her mother**

**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): **6/24/2010**

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: Leana Yolibeth Acosta Maradiaga  
Nombre

Name child is called by if different: \_\_\_\_\_  
Otro Nombre o Apodo

Gender: Femenina

Birthday (d/m/y): 24 de Junio 2001  
Cumpleaños

Nationality: Hondureño  
Nacionalidad

Country: Honduras  
Pais

Town: San Juan de Flores  
Pueblo

**What is the child's current status?**

Condicion del Niño

- ☐ Orphan (Huerfano)
- ☐ Abandoned (Abandonado)
- ☒ Destitute (Pobre viviendo con su familia)
- ☐ Other (si es otro entonces explique)



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.

Lo niño necesita ayuda por sol  
vive con su mamá ya que el papá mu  
sobreviven con alguna ayuda que reciben  
diferentes personas.



### 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:	Christhian Antonio	Age:	7
Nombre		Edad	
Name:	Joselyn Anabel	Age:	12
Nombre		Edad	
Name:	Belkin Yolibeth	Age:	9
Nombre		Edad	
Name:		Age:	
Nombre		Edad	
Name:		Age:	
Nombre		Edad	
Name:		Age:	
Nombre		Edad	
Name:		Age:	
Nombre		Edad	
Name:		Age:	
Nombre		Edad	
Name:		Age:	
Nombre		Edad	

What is the child's eye color?

Color de Ojos del Niño , cafe claros

What is the child's hair color?

Color de Pelo del Niño castaño

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 arroz , frijoles y tortillas

What is the child's favorite color?

El color favorite del Niño Rojo

Has the child ever gone to school? *Si*

Si el Niño has asistado la escuela

What is the last grade completed?

Cual fue el ultimo grado completado *2º grado*

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

Si no va a la escuela entonces porque

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

Que juguetes tiene el Niño *no tiene Juguetes*

What toys does the child wish to have?

Que Juguetes le gustaria tener *1 muñeco y trasteitos*

What is the father's name?

Nombre del Padre *Rene Armando Acosta*

What is the father's occupation and weekly salary?

En que trabaja el Padre y cuanto Gana *\_\_\_\_\_*

What is the mother's name?

Nombre de su madre *Glenda Xiomara Maradiago*

What is the mother's occupation and weekly salary?

Trabajo de su madre y cuanto gana *no trabajo*

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

*no tiene casa propia se la prestan para que  
viva, de adobe, piso de tierra, techo de lamina  
de un solo cuarto, tiene electricidad y  
agua potable.*

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

Lo niño duerme con la mamá y  
la hermanita, solo tienen 1 cama de  
tablas con colchon, 1 silla y una  
mesa de plastico.

**Spiritual Information:**

Informacion Espiritual

Has the child accepted Christ as their personal Savior? Si

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 si

What is the name of the church? Iglesia Dios es Amor

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? \_\_\_\_\_

Nombre del Pastor

Does the child have a favorite Bible story or verse?

Cual es el Versiculo favorite del Niño Genecis 1:1

**Medical Information:**

Informacion Medico

Does a doctor examine the child regularly? Si

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)

solo por enfermedades comunesWhat is the child's height? 1.10 cm

Cuanto Mide el Niño

weight? 35 lbs

Peso

**Placement Information:**

Informacion General

Where is the child now living? (Con quien vive el Niño en este momento)

- ☐ Orphanage (orfanato)
- ☐ Christian Home (con una familia 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) NO

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

Si el Niño va necesitar ayuda de un adulto para escribir sus cartas

Who? su mama

Quien

**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

This application was translated by: \_\_\_\_\_  
Firma del Traductor

Date (d/m/y): \_\_\_\_\_  
Fecha

This application was approved by (pastor): \_\_\_\_\_  
Firma del Pastor que lo aprobo

Date (d/m/y): 24 de junio 2010  
Fecha

This application was approved by (director): \_\_\_\_\_  
Firma del Director del programa

Date (d/m/y): \_\_\_\_\_  
Fecha