

Application for Sponsorship

Touch a Life

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

Personal Information on the child:

Name: **Kensy Yanory Garcia Lanza**

Name child is called by if different:

Birthday (d/m/y): **8th November 2007**

Gender: **Female**

Nationality: **Honduras**

Country: **Honduras**

Town: **Guantanamera**

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.)

Her father left them. Her mother sells "dulce de leche" to provide for her daughter. She has 8 children more and it's really hard to give her everything she needs.

Her earnings are really low since she sells from door to door, the more she sells the more she earns.

They are very limited and for that reason they need you to help Kensy to keep going on.

Family Information:

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

Madely Victoria Orteiz - 23
Merilyn Yohani Orteiz - 22
Eben Ezer Orteiz - 18
Jarel Caleb Orteiz - 16
Asa Paola Orteiz - 16
Dania Gavalino Orteiz - 13
Kevin Enoc Orteiz - 12
Carlos Samuel Garcia - 2

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

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, Beans, Once in a while eggs and chicken**

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

Has the child ever gone to school? **Yes**

What is the last grade completed?

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

If the child has toys, what does he like the most? **She doesn't have any toy**

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

What is the father's name? ----

What is the father's occupation and weekly salary? ----

What is the mother's name? **Ana Paulina Lanza**

What is the mother's occupation and weekly salary? **Street seller of sweets.
She earns depending on what she sells**

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

They have a little house in very bad conditions. The walls are broken. When it rains they have a big problem because everything gets wet .

They don't have power in the house, drinking water or drains.

The floor is made of soil

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

Kensy sleeps with her mother and her little brother in an old and little bed. In their house they just have a little table and no chair.

They usually sit on a bag or on the floor

Spiritual Information:

Has the child accepted Christ as their personal Savior? **No**

Does the child attend Sunday School regularly? If not, why not? **She doesn't attend since her mother works on Sundays**

What is the name of the church?

What city is the church in?

What is the pastor's name?

Does the child have a favorite Bible story or verse?

Medical Information:

Does a doctor examine the child regularly? **No**

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

She has trouble breathing

What is the child's height? **3 ft**

Weight? **40 lb**

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): **7/12/2012**

This application was approved by (pastor):

Date (d/m/y): **25th June 2012**

This application was approved by (director):

Date (d/m/y):

Application for Sponsorship


urgente

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: Hensy Yanory Garcia Lanza
Nombre

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

Gender: Femenino

Birthday (d/m/y): 08 - Noviembre - 2007
Cumpleaños

Nationality: Hondureña
Nacionalidad

Country: Honduras
Pais

Town: Centenario
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.

Su padre los abandono. Su madre se dedica a vender dulce de leche para poder darle un sustento a su hijo. Ella tiene 8 hijos mas y se le es muy dificil darle a su hijo todo lo necesario para poder sacar adelante. Su ingresos son muy pocos porque como es una vendedora ambulante o de calle, depende de lo mucho que pueda vender. Tienen una vida muy llena de limitaciones y es por eso que desea que usted pueda brindar un pequeño apoyo para sacar adelante a Kency.

Has the child ever gone to school?

Si el Niño has asistado la escuela

Si, Kinolew

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

No, tiene ningun juguete

What toys does the child wish to have?

Que Juguetes le gustaria tener

Municas, peluches,

What is the father's name?

Nombre del Padre

— ha abandonado

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

Ana Paulina bonza

What is the mother's occupation and weekly salary?

Trabajo de su madre y cuanto gana

Vendedor de Dulce. En la calle, Gano depende la venta.

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

Tiene una pequeña casa que esta toda deteriorada porque esta rajada las paredes. Y cuando llueve es un gran problema. Porque todo se le moja o inunda la casa no posee electricidad, agua potable. ni alcantarillado. El piso es de tierra

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:	Madelly Victoria Ortiz	Age:	23
Nombre		Edad	
Name:	Marilyn Yohani Ortiz	Age:	22
Nombre		Edad	
Name:	Eben Ezer Ortiz	Age:	16
Nombre		Edad	
Name:	Jarel Guleb Ortiz	Age:	16
Nombre		Edad	
Name:	Asa Paola Ortiz	Age:	16
Nombre		Edad	
Name:	Dania Gervolina Ortiz	Age:	13
Nombre		Edad	
Name:	Kerian Enoc Ortiz	Age:	12
Nombre		Edad	
Name:	Gablos Samuel Garcia	Age:	2
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

What is the child's hair color?

Color de Pelo del Niño Castano

What language(s) does the child speak?

Que Idioma Habla el Niño Espanol

What are the typical foods eaten by the child?

Que Tipo de Comida come el Niño Aroz, Frijoles pocas veces algun poquito de pollo o huevos.

What is the child's favorite color?

El color favorite del Niño

Rosado.

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

La niña Kensy Duerme con su mamá y su hermanito
menor en una cama virge y pequeña.
En su casa solo tienen una mesa pequeña, no tiene
silla. generalmente se sientan en algun valde o en
un saco, pero es mas probable en el suelo.

Spiritual Information:

Informacion Espiritual

Has the child accepted Christ as their personal Savior? No
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

No, asiste porque su mamá trabaja los domingos

What is the name of the church? _____
Nombre de la Iglesia

What city is the church in? _____
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

Medical Information:

Informacion Medico

Does a doctor examine the child regularly? No

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)

tiene problemas con las vias respiratoriasWhat is the child's height? 3 Ft

Cuanto Mide el Niño

weight? 40 lb.

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 o NO

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

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

Who? su madre.

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): 25 - Junio - 2012
Fecha

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

Date (d/m/y): _____
Fecha

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

Date (d/m/y): _____
Fecha