

Touch a Life

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

7. I.D. _____

Personal Information on the child:

Name: **Kaveri Malavaha**

Name child is called by if different: **Nil**

Birthday (d/m/y): **19-11-2004**

Gender: **Female**

Nationality: **Indian**

Country: **India**

Town: **Hubli**

What is the child's current status?

- ☒ **Semi-Orphan**
- ☐ Abandoned
- ☐ Destitute
- ☐ Other

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.)

Kaveri's mother was dedicated to be temple prostitute, though her family were well to do , but her mother felt that if she dedicated her daughter to the temple, then all the sickness in the family will be cured. She recalls that in a day she had to sleep with 15 men, which is why she lost all her strength within two years of her life in the temple. Later she was thrown out to live on her own, she could not resist but had to obey the orders.

She went village to village begging and feeding her kids, Lalitha and her sisters had to spend their time all by themselves under shady trees or besides the compound wall of bus stations. And she would look out for her mom to bring them some food, which usually happens late night when her mother returns if not they had to starve.

By the grace of God, she heard the gospel from a pastor when she went to beg at his house, then and there she was convicted , dropped the idol she was carrying and confessed her sins , received Christ as her personal savior. It is then she began to think of surviving without relying on prostitution, she gave up her company of temple prostitutes and began to attend church service regularly. Every week she walks around 8 miles to attend the service. Now she is leading a normal life, but had to slog the whole day in the farm as well in the house of the landlord. The burden also fell on her daughters to work ,which kept them from going to school. She is anxiously waiting on us to take her daughters into our home.

Family Information:

Does the child have any natural brothers or sisters?

(If the answer is yes, please list their names and current ages.)

Nil

Name: **Lalitha** Age: **12**

Name: **Jyothi** Age: **04**

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

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

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

What are the typical foods eaten by the child? **Roti, dal and rice**

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

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

What is the last grade completed? **II rd grade**

Is the child currently attending school? If not, why not? **Not regular , for lack of financial help.**

If the child has toys, what does he like the most? **No, Elephant**

What toys does the child wish to have? **Elephant**

What is the father's name? **Nil**

What is the father's occupation and weekly salary? **Nil**

What is the mother's name? **Malavaha**

What is the mother's occupation and weekly salary? **5 \$**

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

She lives in a small one room shack, erected beside the local landlord's house, for lack of proper wall they suffer during winter and their roof leaks during monsoon, suffer from wet floor.

Nil

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

Stays at children home (orphanage) , photographs enclosed

She lives in a small one room shack, erected beside the local landlord's house, for lack of proper wall they suffer during winter and their roof leaks during monsoon, suffer from wet floor.

Enclosed

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?

Bethel Baptist Church

What city is the church in?

Sangankeri

What is the pastor's name?

Dabuji L

Does the child have a favorite Bible story or verse?

Gideon

Medical Information:

Does a doctor examine the child regularly?

Yes

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

No

What is the child's height?

4 ft 1"

Weight? **23 kg**

Placement Information:

Where is the child now living?

- ☐ Semi-Orphanage
- ☐ Christian Home
- ☐ **With their own family**
- ☐ Other (please explain)

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?

Rukmini

Orphanage Information:

(Complete these questions only if the child has been placed in an orphanage.)

Where is the orphanage located?

Nil

What is the name of the adult who is responsible for the orphanage?

Nil

Christian Home Information: Nil

(Complete these questions only if the child has been placed in the home of a Christian family.)

What is the name of this family?

Where does this family live?

Of what materials is their house made?

How many rooms does it have?

What is the occupation of the father?

Are the husband and wife both Christians?

Are they church members in good standing?

Summary:

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

This application was translated by: **Rukmini**

Date (d/m/y): **July 18,2012**

This application was approved by (pastor): **Dabuji L**

Date (d/m/y): **July 18,2012**

This application was approved by (director): **Solomon Bijja**

Date (d/m/y): **July 18,2012**