

Application for Sponsorship

Touch a Life

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

Personal Information on the child:

Name: **Nohemi Elizabeth Izaguirre Castro**

Name child is called by if different:

Birthday (d/m/y): **February 7th, 2005**

Gender: **Female**

Nationality: **Honduran**

Country: **Honduras**

Town: **El Pedregal**

What is the child's current status?

Destitute

Family Information:

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

Yanary Abigail Izaguirre Age: 25

Yina Marcela Izaguirre Age: 14

Helen Dariana Izaguirre Age: 12

Anyi Daniela Izaguirre Age: 10

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

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

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

What are the typical foods eaten by the child? **beans, rice, eggs, tortillas, spaghetti, banana, butter**

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

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

What is the last grade completed? **First grade**

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

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

What toys does the child wish to have? **dolls, dishes, bicycle, stuffed animals**

What is the father's name? **Santos Emidio Izaguirre**

What is the father's occupation and weekly salary? **Farmer 2000 lps. monthly**

What is the mother's name? **Gladis Castro**

What is the mother's occupation and weekly salary? **unemployed**

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

Family own a house built by adobe, wood roofing and tiles, flooring of cement. House has three rooms (kitchen, living room and bedroom), there is a big patio with fruit trees, where girls can play.

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

On the bedroom sleep seven person and there is four beds, girl shares a bed with her sister Yina 14 years old, they have a TV, table and 3 chair of wood.

Spiritual Information:

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

Does the child attend Sunday School regularly? If not, why not? **She attend all sundays the sunday's school**

What is the name of the church? **Love and faith**

What city is the church in? **El Pedregal**

What is the pastor's name? **Oscar Ponce**

Does the child have a favorite Bible story or verse? **Psalm 23:1 "A psalm of David. The LORD is my shepherd, I lack nothing"**

Medical Information:

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

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

dermatology problems

What is the child's height? **120 cms.**

Weight? **20 kgs.**

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?

Gladis Castro

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): **06/19/2013**

This application was approved by (pastor):

Date (d/m/y):

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. 0827-2005-00059

Personal Information on the child:

Información Personal del Niño

Name: Nohemi Elizabeth Izaguirre Castro
Nombre

Name child is called by if different: — 0 —
Otro Nombre o Apodo

Gender: Femenino
Género

Birthday (d/m/y): 7 (Día) / Febrero (Mes) / 2005 (Año)
Fecha de nacimiento

Nationality: Hondureña
Nacionalidad

Country: Honduras
País

Town: El Pedregal
Pueblo

What is the child's current status?

Condición 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.

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:	Yanary Abigail Izaguire	Age:	25
Nombre		Edad	
Name:	Yina Marcela Izaguire	Age:	14
Nombre		Edad	
Name:	Helen Dariana Izaguire	Age:	12
Nombre		Edad	
Name:	Anyi Daniela Izaguire	Age:	10
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

Negros.

What is the child's hair color?

Color de Pelo del Niño

Castaño Claro.

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

Frijoles, arroz, huevos, tortillas.
espaguetis, platano, mantequilla.

What is the child's favorite color?

El color favorite del Niño

Rosado.

Has the child ever gone to school?

Si el Niño has asistado la escuela

Si

What is the last grade completed?

Cual fue el ultimo grado completado

primer grado.

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

Si no va a la escuela entonces porque

—o—

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

Que juguetes tiene el Niño

Peluches;

What toys does the child wish to have?

Que Juguetes le gustaria tener

Murecas, trastesitos, bicicletas, peluches.

What is the father's name?

Nombre del Padre

Santos Emidio Izaguime.

What is the father's occupation and weekly salary?

En que trabaja el Padre y cuanto Gana

Agricultura propia. \$= 2000.00 al mes.

What is the mother's name?

Nombre de su madre

(No trabajo) Celadis Castro.

What is the mother's occupation and weekly salary?

Trabajo de su madre y cuanto gana

No trabaja.

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

Viven en casa propia construida de adobe de tierra techo de madera y teja de barro. piso de cemento la casa tiene 3 cuartos. (1 cocina, sala y una recamara, la casa tiene un patio grande con arboles frutales donde las niñas pueden jugar.

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

En la recamara duermen 7 personas ha 4
camas. la niña duerme acompañada por su
hermana Yina de 14 años; tienen televisor
mesa, 3 sillas de madera,

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

asiste los dias domingos a la dominical.

What is the name of the church? Amar y Fe'
Nombre de la Iglesia

What city is the church in? El Pedregal
En que pueblo esta la Iglesia

What is the pastor's name? Oscar Ponce
Nombre del Pastor

Does the child have a favorite Bible story or verse?
Cual es el Versiculo favorite del Niño

Jeova es miu Pastor nada me faltará
en delicados pastos me pasteará
Salmos 23:1

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)

Problemas dermatologicos.

What is the child's height? 120 cm
Cuanto Mide el Niño

weight? 20 Kilos
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 Si o 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? Coladis Castro
Quien

Orphanage Information:

Informacion del Orfanato

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

(Escribe aqui solo si el Niño es un huérfano)

Where is the orphanage located?

Adonde queda el Orfanato

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

Como se llama el encargado del Orfanato

Christian Home Information:

Informacion del niño si el vive con otra familia

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

(Escribe aqui solo si el Niño no vive con su propia familia)

What is the name of this family? _____

Nombre de la familia

Where does this family live? _____

Adonde vive la Familia

Of what materials is their house made? _____

De que es hecho la casa adonde vive

How many rooms does it have? _____

Cuantos cuartos tiene

What is the occupation of the father? _____

De que vive el padrasto

Are the husband and wife both Christians? _____

Si son Cristianos

Are they church members in good standing? _____

Si son la familia son miembros fieles en la Iglesia

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): _____
Fecha

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

Date (d/m/y): _____
Fecha

