

**Application for Sponsorship**

# **Touch a Life**

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

**Personal Information on the child:**

Name: **Carlos Ivan Hernandez Bustillo**

Name child is called by if different: **None**

Birthday (d/m/y): **May 24/2009**

Gender: **Male**

Nationality: **Honduran**

Country: **Honduras**

Town: **Cantarranas**

What is the child's current status?

**Destitute**

**Please write a story about how the child became orphaned, destitute or abandoned.**

The boy asks for your help because his parents do not have a steady job, they have five children and what they have is not enough to cover the cost of school. When the father gets a job the money goes to feed the family.

**Family Information:**

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

**Karla Yareli Hernandez (13 years old)**  
**Estefany Noemi Hernandez (12 years old)**  
**Lizzy Yolibeth Hernandez (8 years old)**  
**Maynor Antonio Hernandez (3 years old)**

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

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

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

What are the typical foods eaten by the child? **Beans, rice and eggs**

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

Has the child ever gone to school? **No**

What is the last grade completed? **He is attending school since this year**

Is the child currently attending school? If not, why not? **Yes, but he is attending the school since this years because his parents couldn't afford it**

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

What toys does the child wish to have? **Cars, planes and balls**

What is the father's name? **Carlos Antonio Hernandez**

What is the father's occupation and weekly salary? **When he has a job as a day laborer he makes 500 lempiras a week**

What is the mother's name? **Deysi Suyapa Bustillo**

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.)

They live in a rented house, the house is made of adobe, tile roof and concrete floor.

They have electricity and potable water

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

He sleeps in a platform bed with his mother and his little brother. They have two chairs and a plastic table.

**Spiritual Information:**

Has the child accepted Christ as their personal Savior? **Not**

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

What is the name of the church? **Profecia**

What city is the church in? **Cantarranas**

What is the pastor's name? **Merlon**

Does the child have a favorite Bible story or verse? **Genesis 4:4**

**Medical Information:**

Does a doctor examine the child regularly? **Not**

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

**None**

What is the child's height? **112 cm**

Weight? **36 pounds**

**Placement Information:**

Where is the child now living?

**Christian home**

**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?

**His 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): **10/6/2014**

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. 0820-2009-00777

**Personal Information on the child:**

Informacion Personal del Niño

Name: Carlos Ivan Hernandez Bustillo  
Nombre

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

Gender: masculino  
Género

Birthday (d/m/y): 24 (Día) / mayo (Mes) / 2009 (Año)  
Fecha de nacimiento

Nationality: Hondureno  
Nacionalidad

Country: Honduras  
Pais

Town: Pantarranas  
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.

El niño solicita su ayuda.  
Porque los padres no tienen un trabajo estable y son cinco hijos los que tienen y lo que gana no les alcanza para lo necesario para la escuela y colegio.  
y los días que logra a trabajar el papé es solo para poderles dar de comer.

**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:	<u>Karla Yareli Hernandez.</u>	Age:	<u>13</u>
Nombre		Edad	
Name:	<u>Estefany Noemy Hernandez.</u>	Age:	<u>12</u>
Nombre		Edad	
Name:	<u>Lizy Jolibeth Hernandez.</u>	Age:	<u>8</u>
Nombre		Edad	
Name:	<u>Maynor Antonio Hernandez.</u>	Age:	<u>3</u>
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 oscuro.

What is the child's hair color?  
Color de Pelo del Niño negro

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, huevos

What is the child's favorite color?  
El color favorito del Niño Anaranjado



Has the child ever gone to school?

Si el Niño has asistado la escuela **NO**

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

No lo pudieron poner asfa este año

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

Que juguetes tiene el Niño **NO**

What toys does the child wish to have?

Que Juguetes le gustaria tener **Carros Autoncitas balón**

What is the father's name?

Nombre del Padre **carlos Antonio Hernandez.**

What is the father's occupation and weekly salary?

En que trabaja el Padre y cuanto Gana

**Cuando trabajo es de Jornalero  
y gana \$ 500 Semanual**

What is the mother's name?

Nombre de su madre **Deysi Suyapa Bustillo.**

What is the mother's occupation and weekly salary?

Trabajo de su madre y cuanto gana

**ama de 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

**La casa donde vive el niño es arquilada.  
es de adobe. techo de tejas piso de cemento.  
Tiene luz electrica, 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

La cama es una tarima.  
y duerme la mamá el niño y su hermanito  
Tiene dos sillas. y una mesa de plástico.

**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

Si

What is the name of the church? Profecía

Nombre de la Iglesia

What city is the church in? Cantarranas

En que pueblo esta la Iglesia

What is the pastor's name? Marlon

Nombre del Pastor

Does the child have a favorite Bible story or verse?

Cual es el Versiculo favorite del Niño Genesis 4:4

**Medical Information:**  
Informacion Medico

Does a doctor examine the child regularly?  
Si el Niño es examinado regularmente por un doctor

NO

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? 772. cm +.  
Cuanto Mide el Niño

weight? 36 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:**  
Requisitos 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? Su mamá  
Quien



## CERTIFICACION DE ACTA DE NACIMIENTO



El infrascrito Registrador Civil Municipal CERTIFICA que en el Archivo de nacimientos que se tiene en esta oficina; se encuentra el acta de nacimiento número: 

0	8	2	0	-	2	0	0	9	-	0	0	1	7	7
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 ubicada en el folio 079 del tomo 00115 del Año 2009 y que pertenece a:

a) HERNANDEZ *Primer Apellido*      b) BUSTILLO *Segundo Apellido*  
c) CARLOS IVAN *Nombre*      SEXO F  M

y cuya información es la siguiente:



1.) Lugar, fecha y orden de nacimiento

a) CANTARRANAS *Municipio*      b) FRANCISCO MORAZÁN *Departamento*      c) HONDURAS *País*  
d) VEINTICUATRO *Día*      e) MAYO *Mes*      f) 2009 *Año*

2.) Apellidos, nombre y nacionalidad del padre:

a) HERNANDEZ *Primer Apellido*      b) FERRERA *Segundo Apellido*  
c) CARLOS ANTONIO *Nombre*      d) HONDUREÑA *Nacionalidad*

3.) Apellidos, nombre y nacionalidad de la madre:

a) BUSTILLO *Primer Apellido*      b) RUIZ *Segundo Apellido*  
c) DEYSI SUYAPA *Nombre*      d) HONDUREÑA *Nacionalidad*

4.) Notas marginales autorizadas:



NINGUNA

Extendida en CANTARRANAS *Municipio*      FRANCISCO MORAZÁN *Departamento*

a los: VEINTISIETE *días del mes*      DICIEMBRE

del DOS MIL TRECE



Firma y Sello del Registrador Civil Municipal



**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