

Application for Sponsorship

Touch a Life

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

Personal Information on the child:

Name: **Diego Alexander Garmendia Zuniga**

Name child is called by if different:

Birthday (d/m/y): **28-Feb-10**

Gender: **Male**

Nationality: **Honduran**

Country: **Honduras**

Town: **Suyapa**

What is the child's current status?

Destitute (poor and living with family)

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

Poor from descendency. The community is poor and there are not many opportunities.

Family Information:

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

Doris Ester Garmendia Zuniga, Age 2

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

What is the child's hair color? **Light coffee**

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

What are the typical foods eaten by the child? **Rice, beans, chicken, eggs, etc**

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

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

What is the last grade completed?

Is the child currently attending school? If not, why not? **He is too small**

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

What toys does the child wish to have? **Race cars**

What is the father's name? **Rolando Antonio Garmendia Cardona**

What is the father's occupation and weekly salary? **Motorist at security company. 9,000 IPS (~\$428/month)**

What is the mother's name? **Dorila Zuniga Cantarero**

What is the mother's occupation and weekly salary? **Homemaker. Takes care of her kids.**

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

Lives in a house of concrete cement. Floor of cement, laminate ceiling.

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

House of cement.
Floor of cement.
Laminate ceiling.
Does not have couches.
Sleeps on a bed of mattress.

Spiritual Information:

Has the child accepted Christ as their personal Savior? **He is too small**

Does the child attend Sunday School regularly? If not, why not? **Yes, his mom takes him**

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

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

What is the pastor's name? **Brother Fredis**

Does the child have a favorite Bible story or verse? **He prays and know the Our Father**

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? **58 cm** Weight? **28lbs**

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?

From 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. 28/02/10

Personal Information on the child:

Informacion Personal del Niño

Name: Diego Alexander Garmendia Zuniga
Nombre

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

Gender: masculino
Género

Birthday (d/m/y): 28 (Día) / Febrero (Mes) / 2010 (Año)
Fecha de nacimiento

Nationality: Hondureño
Nacionalidad

Country: Honduras
Pais

Town: Suyapa
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 lleo a ser orfano o Pobre o abandonado. Use muchos detalles si es posible. Si es mucho, Utilice otro papel.

Pobre por su Decendencia
La Comunidad es Pobre y no
hay muchas ofortunidades

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>Doris ester Garmendia Zuniga</u>	Age:	<u>2 años</u>
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	
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 cafe 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
ARROZ Frijoles Pollo huevo Etc

What is the child's favorite color?

El color favorite del Niño

Rojo

Has the child ever gone to school?

Si el Niño has asistado la escuela

no esta muy pequeño

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

esta muy pequeño

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

Que juguetes tiene el Niño

Carros Bicicletas y Peluches

What toys does the child wish to have?

Que Juguetes le gustaria tener

Carritos Rastras

What is the father's name?

Nombre del Padre

Rolando Antonio Garmendia Cardona

What is the father's occupation and weekly salary?

En que trabaja el Padre y cuanto Gana

motorista en empresa de seguridad

What is the mother's name? 1Ps. 9000

Nombre de su madre

Dorila Zuniga Cantarero

What is the mother's occupation and weekly salary?

Trabajo de su madre y cuanto gana

Ama de casa cuida sus hijos

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

vive en casa de concreto cemento
piso de cemento techo de lamina

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

Casa de cemento
Piso de cemento
techo de lamina
no tiene muebles
Duerme en cama de colchon

Spiritual Information:

Información Espiritual

Has the child accepted Christ as their personal Savior? esta pequeño
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 lo lleva su madre

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

What city is the church in? en cantarranas
En que pueblo esta la Iglesia

What is the pastor's name? Hermano Fredis
Nombre del Pastor

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

el ora x se save el Padre nuestro

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)

No

What is the child's height? 58 centimetros weight? 28.165
Cuanto Mide el Niño 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? de su madre
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

Garmentia Zuniga

Where does this family live?

Adonde vive la Familia

Surape

Of what materials is their house made?

De que es hecho la casa adonde vive

Cemento

How many rooms does it have?

Cuantos cuartos tiene

2 Cuartos

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

Si

El vive con sus Padres
& Hermanita

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): 06/08/14
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