

**Application for Sponsorship**

**Touch a Life**

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

**Personal Information on the child:**

Name: **Doris Ester Garmendia Zuniga**

Name child is called by if different:

Birthday (d/m/y): **Nov,4th,2011**

Gender: **Female**

Nationality: **Hondurans**

Country: **Honduras**

Town: **Suyapa**

What is the child's current status?

**Destitute**

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

Comes from a poor family, in the community there are very few opportunities.

**Family Information:**

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

**Diego Alexander Garmentia Zuniga, 4 years old.**

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

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

What language(s) does the child speak? **Not answered**

What are the typical foods eaten by the child? **Arroz, Frijol, Pollo, huevos, etc.**

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

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

What is the last grade completed? **0**

Is the child currently attending school? If not, why not? **She is too young**

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

What toys does the child wish to have? **Big dolls**

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

What is the father's occupation and weekly salary? **Driver in security company.**

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

What is the mother's occupation and weekly salary? **Homemaker, children care taker**

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

Concrete house, concrete floor, tin roof.

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

concrete house, concrete floor, tin roof, Two rooms. They have no furniture and sleep on a mattress.

**Spiritual Information:**

Has the child accepted Christ as their personal Savior? **No, she is too young.**

Does the child attend Sunday School regularly? If not, why not? **Yes, Her Mom takes her.**

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

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

What is the pastor's name? **Brother Freddy.**

Does the child have a favorite Bible story or verse? **The Lord's Prayer**

**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? **54 cm = 21 inches**      Weight? **26 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): **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. 04/11/2011

**Personal Information on the child:**

Informacion Personal del Niño

Name: Doris ester Garmendia Zuniga  
Nombre

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

Gender: Femenino  
Género

Birthday (d/m/y): 04 (Dia) / noviembre (Mes) / 2011 (Año)  
Fecha de nacimiento

Nationality: Hondureña  
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 llego a ser orfano o Pobre o abandonado. Use muchos detalles si es posible. Si es mucho, Utilice otro papel.

Pobre por decadencia de su  
Familia en la Comunidad  
y pocas oportunidades

**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>Diego Alexander Garmendia Zuñiga</u>	Age:	<u>4 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	

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

What language(s) does the child speak?

Que Idioma Habla el Niño negro

What are the typical foods eaten by the child?

Que Tipo de Comida come el Niño ARROZ Frijol Pollo huevos Etc.

What is the child's favorite color?

El color favorite del Niño

Rozado

Has the child ever gone to school?

Si el Niño has asistado la escuela

no esta muy pequeña

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

tiene muy pocos años

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

Que juguetes tiene el Niño

muñecas

What toys does the child wish to have?

Que Juguetes le gustaria tener

muñecas grandes

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?

Nombre de su madre

Dorila Zuniga cantarero

What is the mother's occupation and weekly salary?

Trabajo de su madre y cuanto gana

Amma 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

casa de cemento

piso de cemento

techo de lamina

Describe the condition of the house and living area. (please include photographs)  
Detalle la condition 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:**

Informacion Espiritual

Has the child accepted Christ as their personal Savior? esta muy chica  
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 la lleva su mamá

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

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

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

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

ora 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? 54 centimetros weight? 26.165  
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:**

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? 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

Garmendia Zuniga

Where does this family live?

Adonde vive la Familia

Suyapa

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

ella vive con sus padres

x su Hermanito

**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