

Application for Sponsorship

Touch a Life

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

I.D. _____

Personal Information on the child:

Name: JARIKONGA MOSES.

Name child is called by if different:

Birthday (d/m/y): 5/2/2008

Gender: MALE

Nationality: UGANDAN

Country: UGANDA

Town: PAROMBO

What is the child's current status?

- ☒ 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.)

A CHILD WAS BORN IN A DEPREVED HOME WITH NO WATER, HOSPITAL AND GOOD ROAD. HIS PARENTS DIED OF HIV/AIDS AND HE IS NOW LIVING WITH THE GRAND MOTHER. THEY ARE LIVING IN A GRASS THATCHED RODPED HOUSE WITH ONE ROOM AND THEY COOK OUT SIDE THE HOUSE. A CHILD IS SLEEPING ON A MAT ON THE FLOOR.

Family Information:

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

Name:	Age:
Name:	Age:
Name:	Age:
Name:	Age:
Name:	Age:
Name:	Age:
Name:	Age:
Name:	Age:
Name:	Age:
Name:	Age:
Name:	Age:

What is the child's eye color?

yellowish

What is the child's hair color?

BLACK

What language(s) does the child speak?

Atur

What are the typical foods eaten by the child?

CASSAVA, BEANS, MAIZE, VEGETABLES.

What is the child's favorite color?

WHITE

Has the child ever gone to school?

YES.

What is the last grade completed?

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

YES

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

MOTORCYCLE AND CAR

What toys does the child wish to have?

CAR

What is the father's name?

Deceased

What is the father's occupation and weekly salary?

What is the mother's name?

What is the mother's occupation and weekly salary?

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

A CHILD IS LIVING ON A GRASS THATCHED HOUSE WITH ONE PAIR OF SLIPPER, FEW CLOTHES AND SLEEPS IN A HOUSE WITH ONE ROOM AND COOKED OUTSIDE THE HOUSE.

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

THE HOUSE IS IN THE DEPREVED REMORTED AREA IN THE FARMING AREA. A HOUSE IS ROOFED WITH GRASS AND CLAY.

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?

GREATER GRACE CHURCH.

What city is the church in?

NEBBI

What is the pastor's name?

OCHOUN AFREA

Does the child have a favorite Bible story or verse?

YES

Medical Information:

Does a doctor examine the child regularly?

NO

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

NO

What is the child's height?

4.1 FT ~~24~~

weight?

24 Kg.

Placement Information:

Where is the child now living?

- ☒ 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? SUNDAY TEACHER,

Orphanage Information:

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

Where is the orphanage located?

ANGAL TRADING CENTRE - PATOMBO ROAD

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

PERIKONYI ALBERT.

Christian Home Information:

(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.

He Likes Playing Football,
he has no shoe, sandals etc.

This application was translated by: CLASS TEACHER.

Date (d/m/y): 26/02/2017.

This application was approved by (pastor): OCHOUN ALFRED

Date (d/m/y): 27/02/2017

This application was approved by (director): Alfred Ochoun

Date (d/m/y): 28/02/2017