Application for Sponsorship

Touch a Life

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

I.D.			

Personal Information on the child:

Name: Anirwoth Sunday

Name child is called by if different:

Birthday (d/m/y): 8-11-2010

Gender: Female

Nationality: ugandan
Country: uganda
Town: Akwara

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.)

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Family Information:

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

Age: Name: Age: Name:

What is the child's eye color? brown

What is the child's hair color? back

What language(s) does the child speak? ALLE and small Enquich.

What are the typical foods eaten by the child? Carrova, beans ound green vegetables.

What is the child's favorite color? - yevo yevou.

Has the child ever gone to school?

yes.

What is the last grade completed? TOP CLOSE.

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

194

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

(you toy.

What toys does the child wish to have?

Gun +07.

What is the father's name?

Deceareg.

What is the father's occupation and weekly salary?

What is the mother's name?

Deceased.

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.)

The child has -

The Chily near taken to orbhanacle aftery and other materials. mith their our per sheet and orbabling work must their is any the Rille provide one bail of sanger in the anner of sanger.

Describe the condition of the house and living area. (Please include The Child river in agrace marched house photographs)

Spiritual Information:

Has the child accepted Christ as their personal Savior?

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

yes

What is the name of the church?

(dreater Grace Church Akmoro.

What city is the church in?

AKLLOFO

What is the pastor's name?

Orom waster.

Does the child have a favorite Bible story or verse?

Medical Information:

Does a doctor examine the child regularly?

NO

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

021

What is the child's height?

I Meter 21 cm-

weight?

13 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?

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Will an adult be appointed to help the child to complete the letters, which will be given to the sponsor?

yes

Who?

Crace teacher

Orphanage Information:

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

Where is the orphanage located?

Angoll on parombo road.

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

partor ochoun Alfred.

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.

This application was translated by: NYOLONINA ROMALD

Date (d/m/y): 11-01-201%

This application was approved by (pastor):

Date (d/m/y): 11.01-2018

This application was approved by (director): OCHOUN ALFRED.

Date (d/m/y): 11-01-2018