

Touch A Life Child Application

Personal Information on the child:

Name of Child WANGUIC BRIDGET

Gender Female (femenino)

Date of birth Friday, May 15, 2015

Nationality: UGANDAN

Country Uganda

Town NEBBI

What is the child's current status? Orphan (Huerfano)

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.)

THE DIED WHEN GIVING BIRTH TO THIRD CHILD AND FATHER WAS WITCHED IN HIS GARDEN AFTER 2YEARS LATER LAST YEAR APRIL HE ALSO PASSED AWAY LEAVING TWO ORPHANS

Family Information:

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

Name (Nombre)

AMARWOTH SINDIA

Age (Edad)

7

What is the child's eye color? BLACK WHITE

What is the child's hair color? BLACK

What language(s) does the child speak? ALUR LANGUAGE (MOTHER TONGUE)

What are the typical foods eaten by the child? CASSAVA AND BEANS

What is the child's favorite color? WHITE

Has the child ever gone to school? No

Is the child currently attending school?

No

Why is the child not currently attending school?

NO SCHOOL FEES

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

CAR TOY

What toys does the child wish to have?

CAR TOY

What is the father's name?

DOLO PATRICK

What is the father's occupation and weekly salary?

PEASANTS FARMER

What is the mother's name?

CIKAWUN CHARITY

What is the mother's occupation and weekly salary?

WAS APEASANT FARMER

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

THE CHILD CONDITION IS NOT GOOD

Describe the condition of the house and living area.

GRASS THATCH HOUSE WITH SINGLE ROOM AND ALMOST FALLING DOWN

Photograph of the house/orphanage



Spiritual Information:

Has the child accepted Christ as their personal Savior?

Yes

Does the child attend Sunday School regularly?

Yes

What is the name of the church?

ERUSSI GREATER GRACE CHURCH

What city is the church in?

ARUA CITY

What is the pastor's name?

PR. OSAGA ROBERT

Does the child have a favorite Bible story or verse?

GENESIS 1:1

Medical Information

Does a doctor examine the child regularly?

No

Does the child have any physical or mental handicaps?

No

What is the child's height?

Please enter a number

130

cm

What is the child's weight?

Please enter a number

27

kgs

Where is the child now living?

With their own family (con su familia)

Orphanage Information

Christian Home Information

Summary

Date Application Completed

Tuesday, June 13, 2023

Application completed by

PR. OSAGA ROBERT

Signature of person completing application

Application approved by (Director)

PR. OSAGA ROBERT