

# Touch A Life Child Application

## Personal Information on the child:

Name of Child	OFOYRWOTH BRIGHTY
Gender	Male (masculino)
Date of birth	Saturday, February 4, 2012
Nationality:	D.R.C
Country	Congo
Town	MAHAGI
What is the child's current status?	Abandoned (Abandonado)

**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.)**

Due to intensives war in Congo which scattered them with the parents the child was found on street and he was taken by the believer in the church and start staying with the child.

## 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) NO
What is the child's eye color?	BLACK
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?**

LACK OF SCHOOL FEES

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

Toy car

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

Toy car

**What is the father's name?**

OSAGA INNOCENT

**What is the father's occupation and weekly salary?**

PEASANTS FARMER

**What is the mother's name?**

ACEN BRIGHT

**What is the mother's occupation and weekly salary?**

PEASANT FARMER

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

Is not good.

**Describe the condition of the house and living area.**

Is not good.

## 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?**

AREJU D.R.C

**What city is the church in?**

KINSHASA

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

PR. PIROWTH BASILE CWINYAAY

**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 118  cm
What is the child's weight?	Please enter a number 25  kgs
Where is the child now living?	Orphanage (orfanato)

## Orphanage Information

Where is the orphanage located?	NEBBI
What is the name of the adult who is responsible for the orphanage?	PR.OSAGA ROBERT

## Christian Home Information

### Summary

Date Application Completed	Friday, June 9, 2023
Application completed by	PR. OSAGA ROBERT
Signature of person completing application	
Application approved by (Director)	PR. OSAGA ROBERT