

## Application for Sponsorship

# Touch a Life

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

I.D. \_\_\_\_\_

### Personal Information on the child:

Name: **Wilian Heriberto Lopez Mejia**

Name child is called by if different:

Birthday (d/m/y): **11/01/1995**

Nationality: **Honduran**

Country: **Honduras**

Town: **San Juan de Flores**

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.)

**He wasn't given his father last name, he does not receive any help from his father; his mother takes all the responsibility.  
They are very poor.**

**Family Information:**

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

Name: **Kevin Josue** Age: **6**

Name: **Yarlin Alexia** Age: **4**

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?

**Brown**

What is the child's hair color?

**Black**

What language(s) does the child speak?

**Spanish**

What are the typical foods eaten by the child?

**Everything**

What is the child's favorite color?

**Green**

Has the child ever gone to school?

**Yes**

What is the last grade completed?

**1st grade**

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

**No, the family cannot afford it.**

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

**No, he would like to have toy planes, balls, cars and toy bears.**

What toys does the child have?

**None**

What is the father's name?

**Henri**

What is the father's occupation and weekly salary?

**We do not know**

What is the mother's name?

**Dilia Margarita Lopez Mejia**

What is the mother's occupation and weekly salary?

**She washes and irons clothes for other people. She makes L. 50.00 daily. ( \$ 2.50 )**

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

**Mud brick walls and sheet tin roof; it is in very bad condition.**

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

**They sleep two people in each bed, they just have some old furniture, made of old wood.**

**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?

**Renacer Christian church**

What city is the church in?

**San Juan de Flores**

What is the pastor's name?

**Juan Pablo**

Does the child have a favorite Bible story or verse?

**No**

**Medical Information:**

Does a doctor examine the child regularly?

**No**

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

**He suffers with headache pain**

What is the child's height? **4.2** weight? **55**

**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?

**His mother**

**Orphanage Information:**

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

Where is the orphanage located?

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

**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: **Nolin Vargas**

Date (d/m/y): **August 30, 2005**

This application was approved by (pastor): **Flavio Varela**

Date (d/m/y): **July 2005**

This application was approved by (director): **Flavio Varela**

Date (d/m/y): **July 2005**



Application for Sponsorship

**Touch a Life**

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

I.D. \_\_\_\_\_

**Personal Information on the child:**

Informacion Personal del Niño

Name: Wilian Heriberto Lopez Mejia  
Nombre

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

Birthday (d/m/y): 7 de noviembre 1995  
Cumpleaños

Nationality: Hondureña  
Nacionalidad

Country: Honduras  
Pais

Town: San Juan de Flores  
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)

MVC 069K

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.

no es Reconocido por el padre  
no le ayuda en nada  
la madre es como el padre  
y son muy Pobres

Dirección Barrio el Centro  
Colleja por el Banco banadesa  
Cuido casa y propiedad  
agora

**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:	Kevin Josué Lopez Mejia	Age:	6
Nombre		Edad	
Name:	Yarlin alexia Lopez Mejia	Age:	4
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 Cafe

What is the child's hair color?

Color de Pelo del Niño Negro

What language(s) does the child speak?

Que Idioma Habla el Niño Español

What are the typical foods eaten by the child?

Que Tipo de Comida come el Niño de todo

What is the child's favorite color?

El color favorite del Niño Verde

Has the child ever gone to school?

Si el Niño has asistado la escuela — Si

What is the last grade completed?

Cual fue el ultimo grado completado — Primer 0

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

Si no va a la escuela entonces porque

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

Que juguetes tiene el Niño

ninguno

What toys does the child have?

Que Juguetes le gustaria tener

Peluches, Carros, avioncitos, pelotas

What is the father's name?

Nombre del Padre

Henrrí

What is the father's occupation and weekly salary?

En que trabaja el Padre y cuanto Gana

No Sabe

What is the mother's name?

Nombre de su madre

Delia Margarita Lopez Mejia

What is the mother's occupation and weekly salary?

Trabajo de su madre y cuanto gana

Planchar - lavar / 50 Lempiras

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

Paredes: de adobe

Techo: Lamina

Piso = Suelo:

condiciones: en malas condiciones

Describe the condition of the house and living area. (please include photographs)  
Detalle la condition de su casa incluyendo como duerme y sus muebles

2 en cada cama  
muebles: de tabla

**Spiritual Information:**

Informacion Espiritual

Has the child accepted Christ as their personal Savior? Si  
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 va

What is the name of the church? Cristiana Renacer  
Nombre de la Iglesia

What city is the church in? San Juan de Flores  
En que pueblo esta la Iglesia

What is the pastor's name? Juan Pablo  
Nombre del Pastor

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

no se sabe ninguno

**Medical Information:**

Informacion Medico

Does a doctor examine the child regularly? NO  
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)

Si padece de la cabeza (color)

What is the child's height? 42 inches = 2 pulg weight? 55  
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? La Madre  
Quien