

## Application for Sponsorship

# Touch a Life

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

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

### Personal Information on the child:

Name:

**Jose Manuel Salgado Seron**

Name child is called by if different:

**Titin**

Birthday (d/m/y):

**February 7, 2002**

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.)

**Jose lives with his parents, only the father works to support the family. They live in their own house and have always been 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: <b>Roger Francisco Salgado Seron</b>	Age: <b>16 years old</b>
Name: <b>Josue Benjamin Salgado Seron</b>	Age: <b>13 years old</b>
Name: <b>Jorge Ariel Salgado Seron</b>	Age: <b>10 years old</b>
Name: <b>Moises Alejandro Salgado Seron</b>	Age: <b>11 years old</b>
Name: <b>Paola Salgado Seron</b>	Age: <b>6 years old</b>
Name:	Age:
Name:	Age:
Name:	Age:

What is the child's eye color?

**Black**

What is the child's hair color?

**Dark brown**

What language(s) does the child speak?

**Spanish**

What are the typical foods eaten by the child?

**Rice, beans, cream, cheese, eggs.**

What is the child's favorite color?

**Green**

Has the child ever gone to school?

**No**

What is the last grade completed?

**No**

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

**He is too young.**

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

**He does not have any.**

What toys does the child wish to have?

**He would like to have cars and balls.**

What is the father's name?

**Jorge Salgado Vasquez**

What is the father's occupation and weekly salary?

**He is a constructing worker and he earns LPs. 1200 a week (\$60)**

What is the mother's name?

**Melida Suyapa Seron Vasquez**

What is the mother's occupation and weekly salary?

**Housewife**

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

**Jose Manuel has only a few clothes, 1 pair of shoes, and he has no toys. The house is of cement block.**

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

**Jose sleeps in a wooden bed with a foam rubber mattress. The house has 2 rooms and no electricity so they use candles and kerosene lamps, they only have 2 chairs and do have running water but no tank to store it.**

**Spiritual Information:**

Has the child accepted Christ as their personal Savior?

**No**

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

**No because he is too small to go alone.**

What is the name of the church?

What city is the church in?

What is the pastor's name?

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.)

**No**

What is the child's height?

weight?

**3 foot and 1 inch**

**30 pounds**

**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?

**The mother**

**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): **September 28, 2005**

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

Date (d/m/y): **July 29, 2005**

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

Date (d/m/y): **July 29, 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: Jose manuel Salgado Sctoñ  
Nombre

Name child is called by if different: Ti Tin  
Otro Nombre o Apodo

Birthday (d/m/y): 7 de Febrero 2002 7/2/02  
Cumpleaños

Nationality: Hondureño  
Nacionalidad

Country: Honduras  
Pais

Town: San Juan de Flores (Cerrito)  
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)

MUCOB 4 F 6105



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.

Jose manuel vive con sus padres  
son pobres solo el papa trabaja  
para sostener la Familia vive en su  
Propia CASA.  
desde sus abuelos han sido pobres.

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José manuel lives with his parents, only the  
father works to support the family, they live in their  
own house. And have always been poor.



**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:	<u>Roger Francisco Salgado Serón</u>	Age:	<u>16</u>
Nombre:		Edad:	
Name:	<u>Josue Venjani Salgado Serón</u>	Age:	<u>13</u>
Nombre:		Edad:	
Name:	<u>Gorge Arril Salgado Serón</u>	Age:	<u>10</u>
Nombre:		Edad:	
Name:	<u>Moyse Alejandro Salgado Serón</u>	Age:	<u>11</u>
Nombre:		Edad:	
Name:	<u>Yeci Paola Salgado Serón</u>	Age:	<u>6</u>
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? Black  
Color de Ojos del Niño Negro

What is the child's hair color? Dark brown  
Color de Pelo del Niño Cafe oscuro

What language(s) does the child speak? spanish  
Que Idioma Habla el Niño Español

What are the typical foods eaten by the child? Rice, beans, cream, cheese, eggs  
Que Tipo de Comida come el Niño Arroz Frijoles mantiguia queso  
huevo

What is the child's favorite color?  
El color favorito del Niño Verde Green



Has the child ever gone to school?

Si el Niño has asistado la escuela No

What is the last grade completed?

Cual fue el ultimo grado completado No

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

Si no va a la escuela entonces porque esta pequeño

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

Que juguetes tiene el Niño

No Tiene

What toys does the child have? would like to have: Cars, ball.

Que Juguetes le gustaria tener

Carros, Pelota

What is the father's name?

Nombre del Padre

Gorge Salgado Morquez

What is the father's occupation and weekly salary? Is Constructor makes \$203 =

En que trabaja el Padre y cuanto Gana

Es albañil, \$1,200.00 la semana

a week

What is the mother's name?

Nombre de su madre

Melida Suyapa Serón Bosquez  
Seron

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

Trabajo de su madre y cuanto gana

Se dedica a cuidar a los hijos

wife

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

Jose manuel Tiene poca Ropa y un  
Par de Sopa, no Tiene Juguetes,  
La Casa es de bloques

Jose Manuel has few clothes, 1 pair shoes, has no toys  
the house is of cement block.



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

Duerme en cama de madera con un colchon.  
Solo hay dos sillas, solo hay dos cuartos.  
no tiene luz electrica si hay agua potable  
Pero no hay pila y se alumina con candles  
y candelos de kerosen.

José sleep on a wooden bed with a foam rubber mattress.  
The house has 2 rooms, no electricity, they use candles  
and kerosine lamps. They only have 2 chairs and the do  
have running water but no tank to store it or wash in.

### Spiritual Information:

Informacion Espiritual

Has the child accepted Christ as their personal Savior? No  
Ha aceptado a Cristo el niño

Does the child attend Sunday School regularly? If not, why not? Because he is too small  
Si el Niño va a la escuela dominical y si no porque No  
Porque esta pequeño

What is the name of the church? N/A  
Nombre de la Iglesia

What city is the church in? N/A  
En que pueblo esta la Iglesia

What is the pastor's name? N/A  
Nombre del Pastor

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



**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)

NoWhat is the child's height? 1 Pic con 1 plg

Cuanto Mide el Niño

1 ft. 1 inch

weight?

30 Libro

Peso

30 pounds**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 (Yes) Si o NOWill an adult be appointed to help the child to complete the letters, which will be given to the sponsor? Si (Yes)

Si el Niño va necesitar ayuda de un adulto para escribir sus cartas

Who?

Quien

La mamá, (Mother)



N/A

**Orphanage Information:**

Informacion del Orfanato

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

(Escribe aqui solo si el Niño es un huérfano)

Where is the orphanage located?

Adonde queda el Orfanato

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

Como se llama el encargado del Orfanato

**Christian Home Information:**

Informacion del niño si el vive con otra familia

(Complete these questions only if the child has been placed in the home of a Christian family.)

(Escribe aqui solo si el Niño no vive con su propia familia)

What is the name of this family? \_\_\_\_\_

Nombre de la familia

Where does this family live? \_\_\_\_\_

Adonde vive la Familia

Of what materials is their house made? \_\_\_\_\_

De que es hecho la casa adonde vive

How many rooms does it have? \_\_\_\_\_

Cuantos cuartos tiene

What is the occupation of the father? \_\_\_\_\_

De que vive el padrasto

Are the husband and wife both Christians? \_\_\_\_\_

Si son Cristianos

Are they church members in good standing? \_\_\_\_\_

Si son la familia son miembros fieles en la Iglesia

**Summary:**  
Informacion Final

W/A

If you would like to give us any information other than what was asked, please do so here.

Si hay algo que no preguntamos y es importante que sepamos del Niño, esribelo aqui

This application was translated by: \_\_\_\_\_  
Firma del Traductor

Angelica Varela

Date (d/m/y): \_\_\_\_\_  
Fecha

July 8, 2005

This application was approved by (pastor): \_\_\_\_\_  
Firma del Pastor que lo aprobo

José Luis M. Varela

Date (d/m/y): \_\_\_\_\_  
Fecha

JUL- 8-05

This application was approved by (director): \_\_\_\_\_  
Firma del Director del programa

Date (d/m/y): \_\_\_\_\_  
Fecha