

Application for Sponsorship

Touch a Life

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

I.D. _____

Personal Information on the child:

Name:

José Fernando Lainez

Name child is called by if different:

Birthday (d/m/y):

28-1 -2001

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.)

They have always been poor. Also his father has abandoned them and sends no money to help the family.

Family Information:

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

Name:

Age:

Claudia Naomi Martinez

5 months old

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?

Light brown

What is the child's hair color?

Light brown

What language(s) does the child speak?

Spanish

What are the typical foods eaten by the child?

Rice, beans and eggs

What is the child's favorite color?

Red

Has the child ever gone to school?

Yes

What is the last grade completed?

Kindergarten

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

Yes

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

1 ball and action figures

What toys does the child wish to have?

He would like to have cars, action figures, balls and planes.

What is the father's name?

Jose Lainez

What is the father's occupation and weekly salary?

He is a foreman (he does not live with them)

What is the mother's name?

Claudia Isabel Martinez

What is the mother's occupation and weekly salary?

Works in the fields and she wins Lps. 370 weekly (\$19)

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

He has only a few cloths and 1 pair of shoes. The house is of adobe mud block with a clay tile roof donated by the European Union.

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

The house is made of mud block with a cement floor. They have no electricity or bathroom. As for furniture they have 1 wooden bed with a mattress, 5 chairs, 1 table and 4 beds of another style (probably cots). They are fortunate to have running water. They use candles to light their house at night because they cannot afford to buy a kerosene lantern or buy the kerosene. The cooking is done outside because they have no kitchen. The mother cooks on a typical adobe stove that is fueled by sticks. They have a latrine outside that is used for a bathroom.

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?

Bautista Gracia

What city is the church in?

San Juan de Flores

What is the pastor's name?

Flavio Varela

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.)

No

What is the child's height? **3' 6"** weight? **35 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): **May 11, 2006**

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

Date (d/m/y): **May 5, 2006**

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

Date (d/m/y): **May 5, 2006**

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 Fernando Lainez
Nombre

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

Birthday (d/m/y): 28/1/2007
Cumpleaños



Nationality: Hondureño
Nacionalidad

Country: Honduras
Pais

Town: San Juan de Flores "Cerrito de Piedra"
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)

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 lleo a ser orfano o Pobre o abandonado. Use muchos detalles si es posible. Si es mucho, Utilice otro papel.

desde sus abuelos son Pobles

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>Claudia Naomi Martínez Abila</u>	Age: <u>5 meses</u>
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
Name: _____	Age: _____
Nombre	Edad

What is the child's eye color?

Color de Ojos del Niño

Cafe claro

What is the child's hair color?

Color de Pelo del Niño

castaño

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

Frijoles, Arroz, huevos

What is the child's favorite color?

El color favorito del Niño

ROJO

Has the child ever gone to school?

Si el Niño has asistido la escuela

What is the last grade completed?

Cual fue el ultimo grado completado

Quinder

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

Si no va a la escuela entonces porque

ASTA OTC AÑO VA

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

Que juguetes tiene el Niño

una pelota pichigos

What toys does the child wish to have?

Que Juguetes le gustaria tener

Carros, Pichigos, Pelotas, Aviones

What is the father's name?

Nombre del Padre

Jose Laines

What is the father's occupation and weekly salary?

En que trabaja el Padre y cuanto Gana

copatras dirigiendo gentes (no tiene con el)

What is the mother's name?

Nombre de su madre

Clouidia isabel martinez delasquez

What is the mother's occupation and weekly salary?

Trabajo de su madre y cuanto gana

En el campo gana 370 fcs a la semana

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

*Tiene poca Ropa, un par de zapatos es de bloque Tejuda
con Tejidos (donada por la Union Europea)*

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

La casa es de bloque el piso de Fundacion
no tiene luz, de la cocina es de Tuxtepec Tiene un colchón
Duerme el solo hay agua potable Tiene 5 silla una
mesa y cocina

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

What is the name of the church? Bautista Gracia
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? Flordia Vivera
Nombre del Pastor

Does the child have a favorite Bible story or verse?
Cual es el Versiculo favorito del Niño No Tiene



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)

no

What is the child's height? no sabe

Cuanto Mide el Niño

weight? no sabe.

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 mama

Quien

Summary:

Informacion Final

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

Date (d/m/y): 19-11-05

Fecha

This application was approved by (pastor): ANTONIO CARCANO

Firma del Pastor que lo aprobo

Date (d/m/y): 70/12/2005

Fecha

This application was approved by (director): _____

Firma del Director del programa

Date (d/m/y): _____

Fecha