

## Application for Sponsorship

# Touch a Life

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

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

### Personal Information on the child:

Name: **Davison Izaguirre García**

Name child is called by if different:

Birthday (d/m/y): **18- 03-2000**

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.**

**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:

**Jeferson Enoc Izaguirre Garcia**

**2 years old**

Name:      Age:

**Melvin Jesus Izaguirre Garcia**

**3 years old**

Name:      Age:

Name:      Age:

Name:      Age:

Name:      Age:

Name:      Age:

Name:      Age:

Name:      Age:

What is the child's eye color?

**Dark 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, eggs**

What is the child's favorite color?

**Green**

Has the child ever gone to school?

**Yes**

What is the last grade completed?

**He is enrolled in kindergarten now.**

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

**He'll finish Kinder Garden this year.**

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

**1 car**

What toys does the child wish to have?

**He would like to have trains, motorcycles, bikes, cars and trucks.**

What is the father's name?

**Melvin Ramon Izaguirre Martinez**

What is the father's occupation and weekly salary?

**Does not work**

What is the mother's name?

**Angelica Garcia Coello**

What is the mother's occupation and weekly salary?

**House wife (salary unknown but is probably less than \$10 weekly)**

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

**He has only a few clothes but has no shoes. Until he receives shoes and a uniform he can not go to school.**

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

**The house is made of adobe blocks and the roof is made of compressed cardboard. He sleeps with his brother and mother in a wood framed bed that has cardboard spread across where there should be a mattress. They have 3 benches and they do have drinking water but no electricity. There is no other furniture in their house. The cooking is done on an adobe mud stove outside that is fueled by sticks. They have no 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?

**GENESIS 1:1**

**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?

**3feet 2inches**

**40pounds**

**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 grandmother**

**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 10, 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

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

**Personal Information on the child:**

Informacion Personal del Niño

Name: Darvinson miyer Isaguire Garcia  
Nombre

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

Birthday (d/m/y): 18/3/2000  
Cumpleaños

Nationality: Honduras  
Nacionalidad



Country: Honduras  
Pais

Town: San Juan de Flores (cerro 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 llego a ser orfano o Pobre o abandonado. Use muchos detalles si es posible. Si es mucho, Utilice otro papel.

desde sus abuelos y me siendo Pobre

**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>Jefferson enoc Isaguire Garcia</u>	Age:	<u>2</u>
Nombre		Edad	
Name:	<u>Melvin Jesus Isaguire Garcia</u>	Age:	<u>3</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	

What is the child's eye color?

Color de Ojos del Niño Cafe oscuro

What is the child's hair color?

Color de Pelo del Niño

What language(s) does the child speak?

Que Idioma Habla el Niño Castano

What are the typical foods eaten by the child?

Que Tipo de Comida come el Niño

Arroz, frijoles, huchos

What is the child's favorite color?

El color favorite del Niño

Verde

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 este año va acaba de salir del Quinder

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

Que juguetes tiene el Niño

un Carrito

What toys does the child wish to have?

Que Juguetes le gustaria tener

Trenes, amotos, Bisicletas, Carros, Furgones

What is the father's name?

Nombre del Padre

melvin Ramon Isaguire martinez

What is the father's occupation and weekly salary?

En que trabaja el Padre y cuanto Gana

(no Trabaja)

What is the mother's name?

Nombre de su madre

Angelica g. maria garcia Cuello

What is the mother's occupation and weekly salary?

Trabajo de su madre y cuanto gana

OFISIO domestico

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

Poca ropa no tiene zapatos la casa es de adobe  
es Tacada con carton comprimido



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 adobe y su Techo de carton comporcado  
duerme en una cama de cuberta con curto y la  
comparte con sus hermanos y mama Tiene 3 Bando  
de sustarse no Tiene luz Tiene agua Potable

**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? Antoni Flavio Varela  
Nombre del Pastor

Does the child have a favorite Bible story or verse?  
Cual es el Versiculo favorite del Niño Genesis 4:9

**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? 43 PLo

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 NOWill 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 Abuela

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 CARCAMO  
Firma del Pastor que lo aprobo

Date (d/m/y): 10/12/2005  
Fecha

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

Date (d/m/y): \_\_\_\_\_  
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*un Carrito*

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