Application for Sponsorship

Touch a Life

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

I.D. _____

Personal Information on the child:

Name: Deylin Maryeli guzman Matute

Name child is called by if different:

Birthday (d/m/y): **13/Aug/2002**

Nationality: Honduran

Country: Honduras

Town: they live in a place between Cantaranas and Las Lajitas.

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.)

She lives with her mother, she is 3 years old and the father doesn't live with them.

Family Information:

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

Name: Yunior Edgardo Cerrato Matute Age: 6 years ol				
Name: Cat	Age: 8 years old			
Name:	Age:			
What is the child's eye color?				

Black

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 tortillas

What is the child's favorite color?

Red

Has the child ever gone to school?

No

What is the last grade completed?

None

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

She is not old enough.

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

She has none.

What toys does the child wish to have?

Dolls, dishes, cuddly toys and bikes

What is the father's name?

Marvin Reinel Guzman Zuniga

What is the father's occupation and weekly salary?

He works picking tomatoes and earns 400 per week (\$20)

What is the mother's name?

Griselda Beatriz Matute

What is the mother's occupation and weekly salary?

Housewife (her income is uncertain but is probably \$10 weekly)

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

They have a room, living room and kitchen in the house. They have almost no furniture or personal possessions and very few clothes.

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

The house's walls are made of adobe and the roof is made of clay tiles. The floor is made of cement. They have no furniture except for 3 chairs. They have to sleep on the concrete floor and cover themselves with a sheet. They have no running water or electricity. The water is brought in a bucket from a nearby stream and used to clean and bathe. The bathroom is outside. The house is lit with candles and when they can afford it, with a kerosene lantern.

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?

Gracia Baptist Church

What city is the church in?

El Centro

What is the pastor's name?

Flavio Varela

Does the child have a favorite Bible story or verse?

John 14:6

Medical Information:

Does a doctor examine the child regularly?

She visits a public and local medical center.

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

It's normal, she has some respiratory problems. This is because they cook inside the house on an adobe stove and it fills the house with smoke. Also they have to light fires on the floor to stay warm in the winter time.

What is the child's height? 3'3" weight? 32pounds

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?

Griselda Beatriz Matute

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): Antonio Carcamo

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

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: Deglin Margeli Nombre	Guzmon	Matute
Name child is called by if different: Otro Nombre o Apodo		
Birthday (d/m/y): 13 dc agos Cumpleannos	sto del 2002.	
Nationality: hondureña		
Country: <u>Honduras</u>		
Town: <u>En la posta entre</u> Pueblo	cantavrana	s y las lojitas.

What is the child's current status? Condicion del Niño

- Orphan (Huerfano)
- D _Abandoned (Abandonado)
- Destitute (Pobre viviendo con su familia)
- u 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.

Vive con la mama', 1:3° años. Y el papa se fue no vive con ellos.

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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:	yunior	edoardo	Cerrato	Matule Age: 6 anos Matule Age: 8 años
Nombre		C L	0 1	L A Edad
Name:	Caterin	Estefani	Cerrato	Malule Age: 8 años
Nombre				Edad
Name:				Age:
Nombre				Edad
Name:				Age:
Nombre				Edad
Name:				Age:
Nombre				Edad
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Name:			-	Age:
Nombre				Edad
Name:				Age:
Nombre				Edad
Name:				Age:
Nombre				Edad

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What is the child's eye color? Color de Ojos del Niño Ne Q ro S What is the child's hair color? Color de Pelo del Niño What language(s) does the child speak? Que Idioma Habla el Niño Os Ponol What are the typical foods eaten by the child? Que Tipo de Comida come el Niño Ox roz, Frijoles, for 1: llas. What is the child's favorite color? El color favorite del Niño

ro, 0.

Has the child ever gone to school?

Si el Niño has asistado la escuela What is the last grade completed? Cual fue el ultimo grado completado

N.A

Is the child currently attending school? If not, why not. Si no va a la escuela entonces porque edad No tiene

If the child has toys, what does he like the most? Que juguetes tiene el Niño

N.A

What toys does the child wish to have? Que Juquetes le gustaria tener

munecas, trastes, peluches, bicicleta

What is the father's name? Nombre del Padre Marvin Reine Guzman Zuhiga

What is the father's occupation and weekly salary? En que trabaja el Padre y cuanto Gana

trabaja empacando tomates gana 2400= semanal.

What is the mother's name? Nombre de su madre Ginselda Beatriz Matute

What is the mother's occupation and weekly salary? Trabajo de su madre y cuanto gana

Se dedica a su casa.

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 cuarto, sala, cocina.

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

ta casa es de: paredes i de adobe techo: de teja piso: cemento No tiene muebles, tiene 3 sillas

Spiritual Information:

Informacion Espiritual Has the child accepted Christ as their personal Savior? 5 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

What is the name of the church? Iglesia Bautista Gracia Nombre de la Iglesia

What city is the church in? El Centro En que pueblo esta la Iglesia

Nombre del Pastor

What is the pastor's name? Flavio Varela

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

Jn. 14.6.

Medical Information:

Informacion Medico

Does a doctor examine the child regularly? to Ileva al Centro do Saluo 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)

Es normal, padece del pecho.

What is the child's height? Cuanto Mide el Niño

weight? Peso

Placement Information:

Informacion General

Where is the child now living? (Con quien vive el Niño en este momento)

- u Orphanage (orfanato)
- u Christian Home (con una famila Cristiana)
- u With their own family (con su familia)
- u 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 SIONO

Will an adult be appointed to help the child to complete the letters, which will be given to the sponsor? _____ >1 Si el Niño va necesitar ayuda de un adulto para escribir sus cartas

Who? Griselda Beatriz Matute

Quien

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Summary: Informacion Final

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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):__ Fecha

This application was approved by (pastor): ANTONIO CARCOMO

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

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

Date (d/m/y):_____