

Application for Sponsorship

Touch a Life

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

I.D. _____

Personal Information on the child:

Name:

Flor Estafanie Montes Canales

Name child is called by if different:

Birthday (d/m/y):

20/04/2002

Nationality:

Honduran

Country:

Honduras

Town:

Las Lajitas, San Juan de Flores Fco. Morazan

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.)

Their home has always been poor because her parents only work temporarily in the plantations. The girl is sick and she suffers from a heart disease and from a lip disorder. The mother takes her to the public hospital in Tegucigalpa. They already made her a surgery on the lip. They are planning 4 other surgeries. They are going to have a surgery because of her cardiac problems.

Family Information:

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

Name: **Jimmy Josue Montes Canales** Age: **8 years old**

Name: Age:

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?

Beans, rice, tortillas, eggs, cheese

What is the child's favorite color?

Blue

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?

Because of her age, she is too young.

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

Dolls

What toys does the child wish to have?

Dolls, the prettiest ones.

What is the father's name?

Mario Montes

What is the father's occupation and weekly salary?

In the plantations earning Lps. 360 weekly (\$18)

What is the mother's name?

Glenda Suyapa Canales

What is the mother's occupation and weekly salary?

In the tomato fields by season, earning Lps. 60 daily (\$3)

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

She lives in the maternal grandparent's house. It is an adobe house with cement floors and tile roofing. The house has 2 rooms, a living room, kitchen, and toilet. She lives with 12 people, 7 adults and 5 children.

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

Because it only has 2 rooms the living room is used as a bedroom in the night. It has 4 plastic chairs, a plastic table and 5 beds. They do have running water but they have no electricity so they use a kerosene lantern. The mother cooks outside the house using an adobe stove that the children gather sticks to fuel.

Spiritual Information:

Has the child accepted Christ as their personal Savior?

No

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

Yes

What is the name of the church?

Grace Baptist

What city is the church in?

San de Flores, Fco. Morazan

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?

Yes in the Materno Infantil Hospital (children's hospital)

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

The child suffers from the Heart problem and a lip disorder.

What is the child's height? **3.1 feet** weight? **28 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?

Her 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): **June 9, 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: Flor Estefanie Monte Canales
Nombre

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

Birthday (d/m/y): 20 - April - 2002 3 años
Cumpleaños

Nationality: Hondureña
Nacionalidad

Country: Honduras, C.A.
Pais

Town: Los Lapitos, San Juan de Flores, F.M.
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.

El Hogar Siempre ha sido pobre ya que sus papas solo trabajan por temporadas en la agricultura. -

La niña es enferma, padece de una enfermedad cardíaca y de labio Leporino congénito y la madre la lleva al Hospital Materno Infantil en Tegucigalpa y ya le han realizado una cirugía correctiva del labio Leporino, faltan otras cirugías que ^(cuatro en total) la operan por riesgos por la enfermedad cardíaca.

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>Jimmy José Montes Canales</u>	Age:	<u>8</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

Cafes

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

Espanol

What are the typical foods eaten by the child?

Que Tipo de Comida come el Niño

Frijoles, arroz, tortillas, huevos, queso.

What is the child's favorite color?

El color favorite del Niño

Azul

Has the child ever gone to school?

NO

Si el Niño has asistado la escuela

What is the last grade completed?

Cual fue el ultimo grado completado

— 0 —

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

Si no va a la escuela entonces porque

por su edad.

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

Que juguetes tiene el Niño

Muñecas

What toys does the child wish to have?

Que Juguetes le gustaria tener

muñecas más bonitas

What is the father's name?

Nombre del Padre

Mano monte.

What is the father's occupation and weekly salary?

En que trabaja el Padre y cuanto Gana

En el campo, gana \$360.00 (campesino)
semanalmente

What is the mother's name?

Nombre de su madre

Glenda Snyapa canals.

What is the mother's occupation and weekly salary?

Trabajo de su madre y cuanto gana

en tomates por temporadas y gana \$60.00
(seventa centavos diarios)

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

vive en casa de los abuelos maternos,

Casa hecha de Adobes repellados, piso de
Cemento, techo de tejas.

La casa tiene 2 cuartos, 1 Sala, 1 cocina
1 Letina de fosa. — viven en la casa
12 personas, 7 adultos y 5 niños

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

Como solo tienen 2 cuartos, la sala
es usada como cuarto por la noche
tienen 4 sillas plásticas, 1 mesa de plástico
y 5 camas plegables.

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?
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, F. Morazan
En que pueblo esta la Iglesia

What is the pastor's name? Florio Varela
Nombre del Pastor

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

— o —

Medical Information:

Informacion Medico

Does a doctor examine the child regularly?

Si el Niño es examinado regularmente por un doctor

Si en el
hospital Materno Infantil

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)

La niña padece del Corazón y labio
Leporino

What is the child's height?

Cuanto Mide el Niño

3.1 pies

weight?

Peso

12.72 Kgs.**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)

Zapato 24

vestido 6.

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

Who?

Quien

Su mamá

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

N. A.

This application was translated by: _____
Firma del Traductor

Date (d/m/y): _____
Fecha

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

Date (d/m/y): _____
Fecha

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

Date (d/m/y): _____
Fecha