Application for Sponsorship Touch a Life

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

I.D
Personal Information on the child:
Name:
Sonia Verenise Galvez Godoy
Name child is called by if different:
Birthday (d/m/y):
April 5, 2001
Nationality:
Honduran
Country:
Town: El Hatillo
What is the child's current status?
Orphan Abandoned X 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.)

Hi! My name is Sonia Verenica Galvez Godoy. I speak Spanish. I am from Honduras, Central America. I am 5 year old, my birth date is, May, 4, 2001,

I have light brown hair and dark brown eyes. I am 3 fee and 6 inches tall and weigh 35 pounds. My favorite color is dark pink. I have 1 brother an 2 sisters, and I live in a village named El Hatillo in the central mountains of our country.

I live with my family -in a 2 room hut The walls are made of rough boards. The roof is old tin, It's in real bad conditions, and we have a dirt floor.

I sleep with my sister on a bed. We do have running water, but no electricity, and no flushable toilet, just an outhouse, and we use kerosene lanterns and candles for light.

My step father shovels and sells sand by the river, and earns about \$10 a week.

Here we normally eat tortillas, beans, rice, or spaghetti.

I have shoes and very few clothes. I have no toys, but would like to have a bike, a toy phone, and a doll.

Family Information:

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

Name: **Delmer Geovany Pineda Galvez** Age: **15 years old**

Name: Mirian Yarida Pineda Galvez Age: 17 years old

Name: Keydi Yolibeth Pineda Galvez Age: 11 years old

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?

Beans, rice, tortillas and eggs

What is the child's favorite color?

Dark pink

Has the child ever gone to school?

Yes

What is the last grade completed?

Pre-school

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

Yes

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

She doesn't have any toys.

What toys does the child wish to have?

A toy cell phone, a doll and bike.

What is the father's name?

Vicente Pineda, Stepfather

What is the father's occupation and weekly salary?

He works carrying sad from the river, wins 10 dollars per week.

What is the mother's name?

Maria Angela Godoy

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.

The house is made of wood, the roof is tin and the floor is made of mud. The house is in a very bad shape because the wood is totally rotten. The house is about to fall down. They have running water and a latrine. They have no electricity so they use candles or whenever possible, they buy kerosene for the lanterns.

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

Sleeps in a bed with a sister and they have no furniture. No table or chairs. The cooking is done on an adobe stove that causes the house to fill with smoke and soot and makes breathing difficult, especially in the cold months when they must keep the door closed.

Because the roof is old and made from tin, it is common for the roof to leak during the rainy season causing the floor to turn to mud.

Spiritual Information:

Has the child accepted Christ as their personal Savior?

No

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

No, seemingly she doesn't like to. Once she is enrooled the parents have agreed to bring her to Sunday School. She will also be receiving Bible stories daily at the feeding center as well as songs and scripture memory.

What is the name of the church?

Grace Baptist Church

What city is the church in?

El Hatillo

What is the pastor's name?

Flavio Varela

Does the child have a favorite Bible story or verse?

She has never learned any.

Medical Information:

Does a doctor examine the child regularly?

No

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

No but when she is sick the grandmother prepares some home made medication.

What is the child's height? 3 ft and 6 inches weight? 35 pounds

Placement Information:

Where is the child now living?
Orphanage
Christian Home
X 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?

Keydi Yolibeth Pineda Galvez

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 27, 2006**

This application was approved by (pastor): Flavio Varela

Date (d/m/y): June 5, 2006

This application was approved by (director): Flavio Varela

Date (d/m/y): June 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: Sonia Verenise Galver Godoy Nombre	
Name child is called by if different: Otro Nombre o Apodo	
Birthday (d/m/y): 4 de mayo de 2001 Cumpleannos	
Nationality: Hondurena Nacionalidad	
Country:Pais	
Town: El Hatillo 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) 	

Sonio Verenise

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: Delmer Creavany Pincola Chalver	_Age:	15
Nombre	Edad	14
Name: Miriam Yarida rinedo polver	Age: _ Edad	11
Nombre V 1- U 10 1 2 1 (cil		11
Name: Keydi Golibeth Rineda Galver	Age: _ Edad	11
Nombre		
Name:	Age: _ Edad	
Nombre	Age:	
Name:	Age Edad	
Nombre	Age:	
Name:	Age Edad	
	Age:	
Name:Nombre	Edad	-
	Age:	
Name:	Edad	
Nombre		
Name:	Age: Edad	
Nombre		
Name:	Age: Edad	
Nombre	Age:	
Name:	Edad	
Nombre	Luau	

What is the child's eye color?

Color de Ojos del Niño

Café oscoro

What is the child's hair color?

Color de Pelo del Niño

Castario claro 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

Injoles, amoz, fortillas huevos. What is the child's favorite color?

El color favorite del Niño

Kosado oscuro

Sonia Verenie

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 Is the child currently attending school? If not, why not. Si no va a la escuela entonces porque If the child has toys, what does he like the most? Que juguetes tiene el Niño No tiene What toys does the child have? Que Juguetes le gustaria tener Célular (juguete), muneca, bicicle ta What is the father's name? Nombre del Padre Vicente Pineda Diene Padrasto What is the father's occupation and weekly salary? En que trabaja el Padre y cuanto Gana 1/2200 semanal sacando Asena What is the mother's name? Nombre de su madre Maria Angela Goday What is the mother's occupation and weekly salary? Trabajo de su madre y cuanto gana Anno de Casal-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 Casa de madera, techo de lámino, piso de tiena. (La casa está en muy malas condiciones

la madera esta totalmente malo, a ponto de

Caerse). tiene agoa potable, le trina

Sonia Verenise

Describe the condition of the house and living area. (please include photographs Detalle la condition de su casa incluyendo como duerme y sus muebles	s)
Duerme en 1 cama con su hermano; y no tiene ningún tipo de muebles.	
Spiritual Information: Informacion Espiritual Has the child accepted Christ as their personal Savior? 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	
No, porque no le gusta	
What is the name of the church? Nombre de la Iglesia	
What city is the church in? En que pueblo esta la Iglesia	
What is the pastor's name?	
Does the child have a favorite Bible story or verse? Cual es el Versiculo favorite del Niño	

Medical Information: Informacion Medico
Does a doctor examine the child regularly? 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) Su abuela le hace tratamiento Caseros
What is the child's height? P-3 6 weight? Seso
Placement Information: Informacion General Where is the child now living? (Con quien vive el Niño en este momento) Orphanage (orfanato) Christian Home (con una famila 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 o NO
Will an adult be appointed to help the child to complete the letters, which will be given to the sponsor?
Who? Keid: Yolibeth Pineda Galver

Summary: Informacion Final

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

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): 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	