

## Application for Sponsorship

# Touch a Life

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

### Personal Information on the child:

Name: **Loana Grissel Castro Tilguanth**

Name child is called by if different: **Little Black Girl**

Birthday (d/m/y): **12-Dec-09**

Gender: **Female**

Nationality: **Honduran**

Country: **Honduras**

Town: **Aldea El pederegal**

What is the child's current status?

**Family Information:**

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

What is the child's eye color? **Black**

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? **Fried Chicken, Rice**

What is the child's favorite color? **Red**

Has the child ever gone to school? **Not mentioned**

What is the last grade completed?

Is the child currently attending school? If not, why not? **Assists the children**

If the child has toys, what does he like the most? **Stuffed animals, Baby Dolls, Play kitchenware**

What toys does the child wish to have? **A motorcycle**

What is the father's name? **Edgar Ariel Castro Sots**

What is the father's occupation and weekly salary? **Supervisor, Lps 2000**

What is the mother's name? **Nancy Griselda Tilguanth**

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 an adobe. The house has ceiling tiles. The floor is dirt.

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

Sleeps with their parents, there is only one bed; no furniture

**Spiritual Information:**

Has the child accepted Christ as their personal Savior? **no**

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

What is the name of the church?

What city is the church in?

What is the pastor's name?

Does the child have a favorite Bible story or verse?

**Medical Information:**

Does a doctor examine the child regularly? **no**

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

**Allergies from the climate change**

What is the child's height? **3ft. 4in**

Weight? **33 lbs**

**Placement Information:**

Where is the child now living?

**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?

**Nancy Griselda Tilguanth**

**Summary:**

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

This application was translated by: **Turk Services**

Date (d/m/y): **7/4/2014**

This application was approved by (pastor):

Date (d/m/y):

This application was approved by (director):

Date (d/m/y):

Application for Sponsorship

# Touch a Life

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

I.D. 0827-2009-00333

**Personal Information on the child:**

Informacion Personal del Niño

Name: Loana Grissel Castro Telgwanth  
Nombre

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

Gender: Femenina  
Género

Birthday (d/m/y): 12 (Día)/ Diciembre (Mes)/ 2009 (Año)  
Fecha de nacimiento

Nationality: Hondureña  
Nacionalidad

Country: Honduras  
Pais

Town: Aldea El pedregal  
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)

**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: _____	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 _____
Name: _____	Age: _____
Nombre _____	Edad _____

What is the child's eye color?

Color de Ojos del Niño Negros

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 Español

What are the typical foods eaten by the child?

Que Tipo de Comida come el Niño pollo frito, arroz

What is the child's favorite color?

El color favorite del Niño Rosado



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

Asiste al Kinder

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

Que juguetes tiene el Niño

Muñecas, peluches, trastesitos.

What toys does the child wish to have?

Que Juguetes le gustaria tener

Una moto

What is the father's name?

Nombre del Padre

Edgar Ariel Castro Soto

What is the father's occupation and weekly salary?

En que trabaja el Padre y cuanto Gana

Supervisor L. 2,000=

What is the mother's name?

Nombre de su madre

Nancy Griselda Telgvanth

What is the mother's occupation and weekly salary?

Trabajo de su madre y cuanto gana

Ama de Casa (Perito)

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

La Casa es de adobe, el techo de teja,  
piso de tierra, no hay pila



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

Duerme con sus padres solo tienen una  
Cama, no hay muebles.

**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

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? \_\_\_\_\_

Nombre del Pastor

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? 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)

Alergia por el Cambio de clima

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

40 1/2 pulg.

weight?  
Peso

33 libras

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

Who?

Quien

Nancy Griselda Tilguanth