

## Application for Sponsorship

# Touch a Life

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

### Personal Information on the child:

Name: **Roland Josue Castillo Medina**

Name child is called by if different:

Birthday (d/m/y): **July 31,2002**

Gender: **Male**

Nationality: **Honduran**

Country: **Honduras**

Town: **San Juan De Flores**

What is the child's current status?

**Destitute**

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.)

Not mentioned.

**Family Information:**

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

Belkin Nohemy Castillo Medina, Age 5.

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?  
**Beans, rice, eggs, chicken, tortilla, bread, and pasta.**

What is the child's favorite color? **Blue red and yellow**

Has the child ever gone to school? **Yes**

What is the last grade completed? **Second Grade**

Is the child currently attending school? If not, why not? **Not mentioned**

If the child has toys, what does he like the most? **Not mentioned**

What toys does the child wish to have? **An airplane, a machine, and cars.**

What is the father's name? **Jose Santos Castillo**

What is the father's occupation and weekly salary? **Not mentioned. 110 a day.**

What is the mother's name? **Rut Medina**

What is the mother's occupation and weekly salary? **Housewife. Sells Tortillas.**

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

We own a home made of adobe brick. One room. Has electricity. No water. We get water for the dad who is our neighbor

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

Sleeps on a bed with her mom. There are two wooden tables, two wooden chairs, dishes, a fireplace, and a TV.

**Spiritual Information:**

Has the child accepted Christ as their personal Savior? **Yes**

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

What is the name of the church? **Iglesia 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? **No**

**Medical Information:**

Does a doctor examine the child regularly? **Yes**

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

**He has Asthma**

What is the child's height? **1.25 meters**      Weight? **80 lbs.**

**Placement Information:**

Where is the child now living?  
**with their own family**

**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 father**

**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): **1/13/2011**

This application was approved by (pastor):

Date (d/m/y): **July 20, 2010.**

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. \_\_\_\_\_

**Personal Information on the child:**

Información Personal del Niño

Name: Rolando Josue Castillo Medina  
Nombre

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

Gender: Masculino

Birthday (d/m/y): 31 julio - 2002  
Cumpleaños

Nationality: Hondureño  
Nacionalidad

Country: Honduras  
Pais

Town: San Juan de Flores  
Pueblo

**What is the child's current status?**

Condición del Niño

- ☐ Orphan (Huerfano)
- ☐ Abandoned (Abandonado)
- ☒ Destitute (Pobre viviendo con su familia)
- ☐ Other (si es otro entonces explique)

**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): \_\_\_\_\_  
Fecha

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

Date (d/m/y): 20-julio-2010  
Fecha

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

Date (d/m/y): \_\_\_\_\_  
Fecha



**Medical Information:**

Informacion Medico

Does a doctor examine the child regularly? SI  
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 ASMOTICO

What is the child's height? 1.25  
Cuanto Mide el Niño

weight? 80 Lbr  
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 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? Su papa  
Quien

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

Duerme en un catre con su mamá  
tiene dos mesas de madera, dos bancos,  
frastes, un Fuego, y un televisor.

**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? Iglesia 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? Flavio Varela  
Nombre del Pastor

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

Ninguno

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

segundo grado

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

Si no va a la escuela entonces porque

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

Que juguetes tiene el Niño Si

What toys does the child wish to have?

Que Juguetes le gustaria tener

un Avion, una maquina, carros.

What is the father's name?

Nombre del Padre

Jose santos castillo

What is the father's occupation and weekly salary?

En que trabaja el Padre y cuanto Gana

Jose santos castillo.  
Si trabaja y gana \$110.00 al dia

What is the mother's name?

Nombre de su madre

Rut Medina

What is the mother's occupation and weekly salary?

Trabajo de su madre y cuanto gana

Ama de casa (vende tortillas)

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 propia, de adobe, lamina, una sola pieza  
tiene energia, No tiene agua propia.  
le regala su papa que es vecino.

### 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:	Belkin Nohemy castillo medina	Age:	5
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

Frijoles, Arroz, huevo, pollo, tortilla, pan, Espagueti.

What is the child's favorite color?

El color favorite del Niño

Azul, Rojo y Amarillo

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.

Ninguno