

MILITARY SERVICE ACT, 1917.

QUESTIONNAIRE

SERIAL No.....

NAME.....

Exemption Granted

ADDRESS.....

as follows :—

NOTICE : You are required to fill in correctly all the following questions which apply to you and to return this questionnaire immediately to "The Registrar under the Military Service Act, 1917," at **KINGSTON**.....(envelope enclosed). If you fail to post it to him within three days after its delivery by the Post Office, the exemption heretofore granted to you will be subject to forfeiture. Postage need not be prepaid on mail matter addressed to the Registrar.

PART I—QUESTIONS TO BE ANSWERED BY ALL PERSONS.

1. If your full name is not correctly given above, give it correctly and fully.

Surname.....Given names.....

2. What is your age ?..... weight ?.....lbs. height ?.....ft.....in.

3. If you have not full use of your limbs, senses and faculties, state what you lack.....

4. If you are otherwise not physically fit, state in what respect.....

5. If you are not a British subject, state the country of which you claim to be a citizen or subject and the year in which you came to Canada.

Country

Year came to Canada

6. Indicate exactly the nature of the work you are now doing.....

7. State all the occupations at which you have worked since you were eighteen years of age and the length of time you have worked at each.

Occupation

Years

Months

Occupation

Years

Months

Occupation

Years

Months

Occupation

Years

Months

8. Give the name and address of your nearest grown up relative.

.....
 Name Address

 Relationship

PART II—QUESTIONS TO BE ANSWERED BY ALL EMPLOYED PERSONS.

9. If you are now employed, give the name and address of your employer.

.....
 Employer's name Address

10. How long have you been working for your present employer?.....

PART III—QUESTIONS TO BE ANSWERED BY ALL PERSONS EMPLOYED IN AGRICULTURE.

11. What kind of farm do you work on? ("Dairy," "grain," "stock," or as the case may be).

12. Give the name, sex and age of all the people working on it.

..... Name	..... Sex	..... Age
..... Name	..... Sex	..... Age
..... Name	..... Sex	..... Age
..... Name	..... Sex	..... Age
..... Name	..... Sex	..... Age

13. Do you do any other work than work on the farm?.....

14. What are your special duties, if any, on the farm?.....

15. How many acres are there (a) in the farm?.....(b) broken?.....

16. If any crops are now being raised, state the kind and the number of acres under each kind.....

.....acres.....acres.....acres.

17. What kind and quantity of crops were raised last season?.....

.....bush.....bush.....bush.

18. How is the uncultivated land being used?.....

19. Give the number and kind of live stock?.....horses.....milch cows.....other cattle

.....sheep.....pigs.

20. What would happen if you left the farm?.....

21. Does the man who works the farm own it or rent it?.....

ART IV.—QUESTIONS TO BE ANSWERED IF CLAIM FOR EXEMPTION IS MADE ON ANY GROUNDS OTHER THAN OCCUPATION OR PHYSICAL CONDITION.

22. If you have any dependants, give their names, addresses, their relationship to you, the extent to which you support them and the length of time you have done so.

NAMES	AGES	RELATIONSHIP	EXTENT TO WHICH YOU FURNISH SUPPORT	SINCE WHEN YOU HAVE DONE SO.
.....
.....
.....
.....

23. State the names, ages and relationship of any near relatives in the Canadian Expeditionary Force.

Name	Age	Relationship	Unit
.....
.....
.....

24. State any other special circumstances connected with your domestic position.

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.....

25. What was your total income in the last twelve months, in cash or otherwise ? \$.....

Value \$.....

Otherwise.

In cash

26. If you have any business obligations, state their exact character and extent.....

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.....

.....

27. If you have any financial obligations, state their exact character and extent.....

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PART V.—IMPORTANT NOTICE.

If the answers you give are not disputed, your answers may, without notice to you, be submitted to a tribunal for the purpose of having the exemption granted you re-considered. You should therefore state any other facts upon which you rely for exemption from military service.

Other facts :—

The above answers are correct and I understand that any misstatement will make me liable to punishment.

Dated the..... day of..... 1918

Signature.....

Present Post Office Address.....

Permanent Post Office Address.....