

## NAA: MT1486/1, CORNEY/PERCY

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Title: Corney, Percy; age 18; address - Coledale NSW

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Care gran MILITARY FORCES. AUSTRALIAN FORCE. AUSTRALIA Attestation Paper of Persons Enlisted for Service Abroad. CORNEY. Name. No. Unit Jocens Joined on Questions to be put to the Person Enlisting before Attestation. Perez. Comer 1. What is your Name? in or 2. In the Parish of 2. In or near what Parish or Town were you born? near the Town of Wo in the County of 3. Are you a natural born British Subject or a Naturalized British Subject ? (N.B.—If the latter, papers to be British PT .... shown) Months cars 4. What is your age ? heeler 5. What is your trade or calling ? 6. Are you, or have you been, an Apprentice ? If so, where, to whom, and for what period ? ... ... 7. Are you married ? tacher) John Gorner 8. Who is your next of kin ? (Address to be stated) .... (The answer to this question shall not be constructed as in the nature of a will.) 9. Have you ever been convicted by the Civil Power ? ... 10. Have you ever been discharged from any part of His Majesty's Forces, with Ignominy, or as Incorrigible and Worthless, or on account of Conviction of Felony, or of a Sentence of Penal Servitude, or have you been dismissed with Disgrace from the Navy? 10. 11 RE-EXAMINED and REJECTED 11. Do you now belong to, or have you ever served in, His Majesty's Army, the Marines, the Militia, the Militia Reserve, the Territorial Force, Royal Navy, or Colonial Forces? If so, state which, and if not now serving, state cause of discharge. ... Ollayen Forces. 12. Have you stated the whole, if any, of your previous service? 13. Have you ever been rejected as unfit for His Majesty's Service ? If so, on what grounds ? ... ... 14. Do you understand that no Separation Allowance will be issued in respect of your service beyond an amount which together with Pay would reach eight chillings par day. shillings per day 15. Are you prepared to undergo inoculation against small-pox and enteric fever ? .... do solemnly declare that the above answers made Gomes eronby me to the above questions are true, and I am willing and hereby voluntarily agree to serve in the Military Forces of the Commonwealth of Australia within or beyond the limits of the Commonwealth. \*And I further agree to allot not less than two-fifths of the pay payable to me from time to time during my three-fifths service for the support of my wife wife and children Veray 60 Signature of person enlisted. Date 26 11-17 \* This clause to be amended where necessary and should be struck out in the case of unmarried men or widowers without children under 18 years of age.

## CERTIFICATE OF ATTESTING OFFICER.

The foregoing questions were read to the person enlisted in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to by him.

I have examined his naturalization papers, and am of opinion that they are correct. (This to be struck out except in the case of persons who are naturalized British Subjects.)

Date 27-11-17

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Signature of Attesting Officer.

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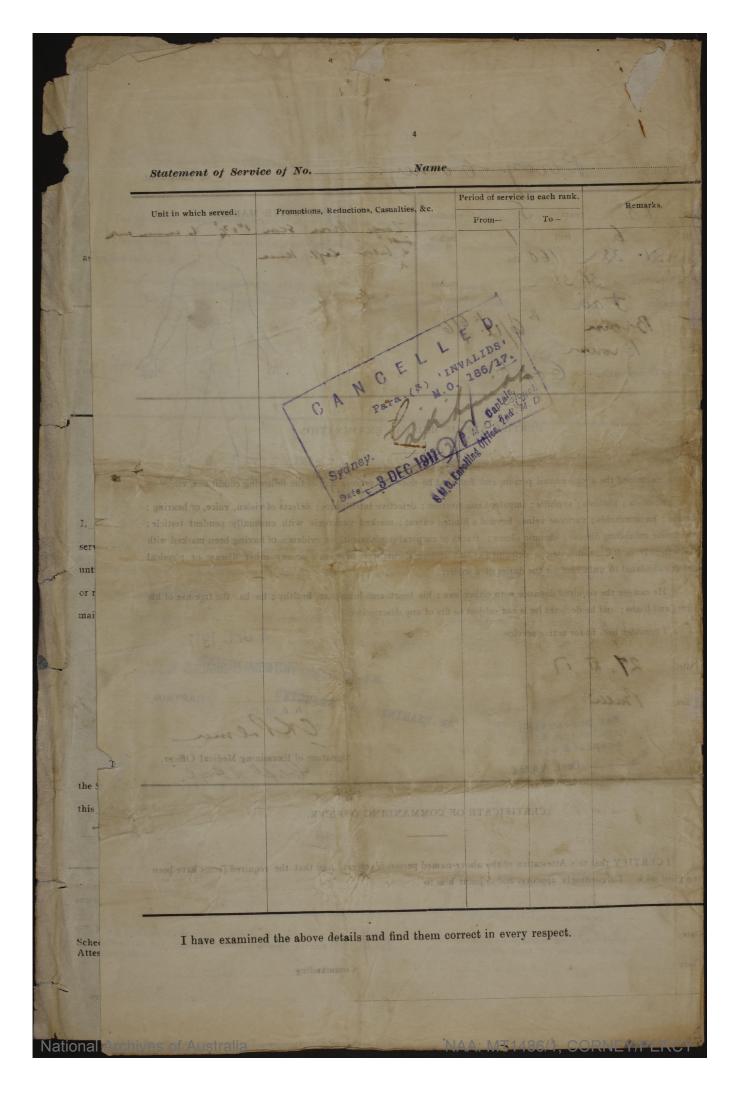
QATH TO BE TAKEN BY PERSON BEING ENLISTED.\*

serve our Sovereign Lord the King in the Australian Imperial Force from All yovember 1914 until the end of the War, and a further period of four months thereafter, unless sooner lawfully discharged, dismissed, or removed therefrom ; and that I will resist His Majesty's enemies and cause His Majesty's peace to be kept and maintained ; and that I will in all matters appertaining to my service, faithfully discharge my duty according to law. SO HELP ME, GOD.

Signature of Person Enlisted

Taken and subscribed at the State of liventy Levalt day of ovember Signature of Attesting Officer. \*A person enlisting who objects to taking an oath may make an affirmation in accordance with the Third Schedule of the Act, and the above form must be amended accordingly. All amendments must be initialed by the Attesting Officer.

Percy. Come Description of on Enlistment. DISTINCTIVE MARKS 18 years months Height 6 feet inches ed Weight 31 - 33 ~ 160 lbs. Chest Measurement 31- 33 " inches Complexion 6/12:6/6 Eyes Brow Religious Denomination CERTIFICATE OF MEDICAL EXAMINATION I have examined the above-named person, and find that he does not present any of the following conditions, viz : Scrofula ; phthisis ; syphilis ; impaired constitution ; defective intelligence ; defects of vision, voice, or hearing ; hernia; hæmorrhoids; varicose veins, beyond a limited extent; marked varicocele with unusually pendent testicle; inveterate cutaneous disease ; chronic ulcers ; traces of corporal punishment; or evidence of having been marked with uly the letters D or B.C.; contracted or deformed chest ; abnormal curvature of spine ; or any other disease or physical defect calculated to unfit him for the duties of a soldier. ed, He can see the required distance with either eye; his heart and lungs are healthy; he has the free use of his ind joints and limbs; and he declares he is not subject to fits of any description. 3 DEC 1917 I consider him fit for active service RE-REAMINED VICTORIA SARRACKS, N.G.W. 27. XI 17 Date RE-EXAMINED and REJECTED CAPTAIN, Bulli Place A. A. M. ( CRP-eme War precaution regulation 41 C. complied with. Signature of Examining Medical Officer. Capt. A.A.M.G. Capt AAm C. CERTIFICATE OF COMMANDING OFFICER. I CERTIFY that this Attestation of the above-named person is correct, and that the required forms have been complied with. I accordingly approve, and appoint him to Date Place Commanding



	3/12/10	
	Original Duplicate	
Application to Enlist in	n the Australian Imperial Force.	
To the Recruiting Officer	(Official Stamp)	
at Bul	ei	
I, CORNEY. Per hereby offer myself for Enlistment in Abroad, and undertake to enlist in Military Authorities, within one mon	The Australian Imperial Force for Active Service the manner prescribed, if I am accepted by the	
Postal Address	Signature Percy & orney	
boledale	Signature Percy & orney Occupation Wheeler.	
	Date 26 11-17	
I HEREBY CERTIFY that I approve enlistment of my $\begin{cases} son \\ ward \end{cases}$ for Active		
either or both L'arents.	Father's Signature John Corney	
Mother alland	Mother's Signature	
Bon-22.6.1899 PERSON	AL PARTICULARS.	
Age—	6 ft. / ins. Chest Measurement (fully expanded)— 12 4/6 3 D C 3 J // inches.	
	MEDICAL EXAMINATION	
Decision of Medical Authority	and a substants that a provide the second of	1997
Place Philli Date D. XI 17	CRPhlmen	
Date 27. XI 17	Signature of Medical Authority.	
I Concur Place VICTORIA BARRACKS, N.S.W.	CAPTAIN,	
Date - 3 DEC 1917	Signature of M.O. at Central Recruiting Depot	
	OF RECRUITING OFFICER.	
I CERTIFY that I have this day provi in the Australian Imperial Force. Place Bulli	Signature Recruiting Officer.	
Date 27-11-14	[OVER	
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## INSTRUCTIONS.

(1) Application forms received by Recruiting Officers will not be handed back again to applicants but will be passed direct to the Medical Practitioner, who will similarly return them to the Recruiting Officer, who will then forward them by post to the Officer in Charge of the Central Recruiting Depot to which recruits are instructed by them to Report.

(2) If an Applicant who has been rejected desires a copy of this certificate, it must be completed in **duplicate** at the time of Medical Examination, and the word "original" or "duplicate" as the case may be, will appear on top of the respective forms. Both copies will be forwarded to the Officer in Charge of the Central Recruiting Depot, where the **duplicate** will be impressed with the official stamp and then returned to the applicant.

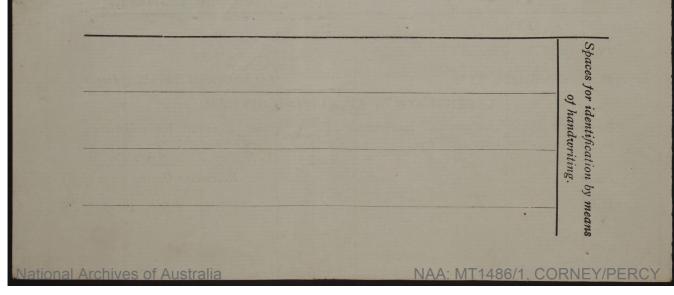
(3) Copies will **NOT** be made of any certificates of acceptance. The word "Duplicate" will be struck out of such certificates, and they will be sent to the Officer in Charge of the Central Recruiting Depot by post.

(4) Names of accepted applicants who do not report at Central Recruiting Depot within the prescribed time will be forwarded to the Local Recruiting Officer for information.

(5) When alternatives are shown on the front of the form, such as:  $-\frac{\text{Fit}}{\text{Unfit}} \begin{vmatrix} \text{Son} \\ \text{Ward} \end{vmatrix} \frac{\text{Married}}{\text{Widower}} \begin{vmatrix} \text{Original} \\ \text{Ouplicate} \end{vmatrix}$  strike out the words which are not applicable.

(6) Only those persons who fulfil the requirements in all other respects will be examined regarding medical fitness. These requirements may be ascertained by reference to daily newspapers and official posters.

(7) The Central Recruiting Depot, to which accepted applicants from various places will be sent for final medical examination, will be determined by District Commandants. Recruiting Officers at outlying places will require to issue clear instructions to such applicants, informing them where and when to report, and will forward the application forms in time to insure that they will be in the hands of the Officer in Charge of the Central Recruiting Depot when the recruit reports for enlistment.



of Australian Military Forces.
PROCEEDINGS of a Medical Board assembled at Victoria Barracks on the -3 DEC 1917 by order of P.M.O., 2nd Military District.
The Board has examined :- CORNEY Party
and finds that he is Unfit for Active Service.
S.M.O., Enrolling Ordine, 2nd M.D.
Hull Members. Capt. A.A.M.C.
D.HQ.'s Printing Office, Victoria Barracks, Sydney. Mational Archives of Australia

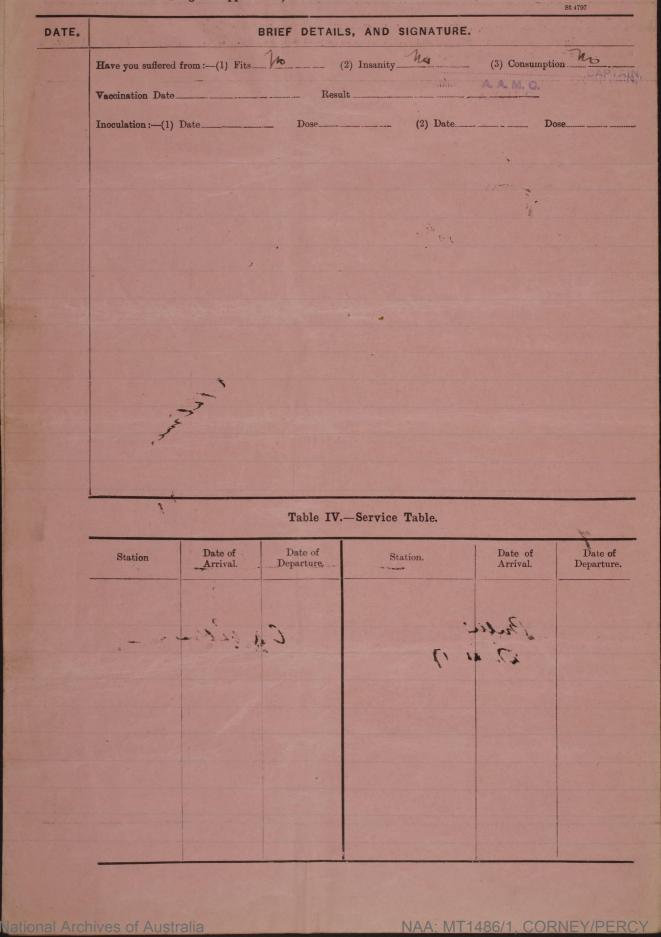
A.M. Form D.I. To be used for Enlistment in the Permanent Military Forces only. MEDICAL HISTORY of CORNEY Christian Name. Surname I.-GENERAL TABLE. TABLE Birthplace .19/ .day Examined 5 abouts Ban 22.6.1899 Declared Age ... ... Trade or Occupation .....feet..... Height 6 ...inches. 160 Weight .....lbs. Girth when fully inches. Chest Measurement inches. Range of Expansion Physical Development and Pulse rate Right Left. Arm Vaccination Marks Number When Vaccinated Vision ... L.E.-V =(a)(a) Marks indicating congenital peculiarities or previous disease (b)(b) Slight defects, but not VICTORI sufficient to cause rejection Approved by ... (Signature) & Am (Rank) Medical Officer. Enlisted .day of. .19/ Corps Regtl. No. Joined on Enlistment Transferred to ... Became non-effective by ......day of..... ...19 on (Signature) (Rank) . St 4797 [P.T.O. NAA: MT1486/1. CORNEY/PERC

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Name of Hospital.	Day.	Month.	Year.	Day.	Month.	Year.	Discase.	of days in Hospital.	accider
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future use. In cases of Syphilis, accident, state whether it occurre	re, or Treatment of the Case, likely to be o , admissions and re-admissions to hospital will be ed on duty.	shown. If an Sign	nature of Medical Officer.
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Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, &c.; Examinations forTransfer or Service Abroad, Extension, Re-engagement, or Prolongation of Service;Issue of Surgical Appliances; Particulars of Dental Treatment, &c.



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