



NAA: MT1486/1, PEARCE/THOMAS WILLIAM

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Title: Pearce, Thomas William; age 25; address - Coledale NSW

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Application to Enlist in the Australian Imperial Force

To the Recruiting Officer

at **VICTORIA BARRACKS N. S. W.**

(OFFICIAL STAMP)

I, Thomas William Pearce
hereby offer myself for Enlistment in the Australian Imperial Force for Active Service Abroad, and undertake to enlist in the manner prescribed, if I am accepted by the Military Authorities, within one month from date hereof.

POSTAL ADDRESS
Garlick St
Cotedale
S.C.

Signature T W Pearce
Occupation Miner
Date 20-5-18

(For Identification purposes the above space should be filled in personally by the Applicant.)

CONSENT OF PARENTS OR GUARDIANS. (For persons under 21 years of Age)

I HEREBY CERTIFY that I approve of the above application, and consent to the enlistment of my ^{son} _{ward} for Active Service Abroad.

Statement regarding Death or Absence of either or both parents,

Father's Signature _____
Mother's Signature _____
or
Guardian's Signature _____

PERSONAL PARTICULARS.

Age 25 yrs. 6 mos. | Height 5 ft. 3 3/4 ins. | Chest Measurement (fully expanded) _____ inches
Married ~~Widower~~ Single Single

PRELIMINARY MEDICAL EXAMINATION.

Decision of Medical Authority { FIT for Active Service.
UNFIT for the following reasons:—

eyesight

Place VICTORIA BARRACKS N. S. W.

Date _____ Signature of Medical Authority _____

I Concur

Place VICTORIA BARRACKS N. S. W.

Almona Chua Capt. A. A. M. O.
Signature of M.O. at Central Recruiting Depot.

CERTIFICATE OF RECRUITING OFFICER.

I CERTIFY that I have this day provisionally Accepted ~~Rejected~~ this applicant for enlistment in the Australian Imperial Force,

Place VICTORIA BARRACKS N. S. W. Signature P. W. Banks Recruiting Officer.

Date MAY 20 1918 [OVER

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:—

Fit	Son	Married	Duplicate	strike
Unfit	Ward	Widower	Original	

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 ensure that they will be in the hands of the Officer in Charge of the Central Recruiting Depot when the Recruit reports for enlistment.

I hereby certify that I approve of the above application, and consent to the enlistment of my ward for Active Service Abroad.

Signature of Father or other person standing in place of Father or other person

Signature of Medical Practitioner

Signature of Recruiting Officer

PERSONAL PARTICULARS

Age: _____ yrs. Height: _____ ins. Weight: _____ lbs.

Married: _____ Widower: _____ Single: _____

Complexion: _____ Eyes: _____ Hair: _____

PRELIMINARY MEDICAL EXAMINATION

Decision of Medical Authority (UNIT for the following reasons:—

I Consent

Signature of Officer in Charge of Central Recruiting Depot

CERTIFICATE OF RECRUITING OFFICER

I hereby certify that I have this day provisionally accepted this applicant for enlistment in the Australian Imperial Force.

Signature

Date

Signature of Medical Practitioner

Spaces for identification by means of hand-writing.