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**» Application Form. «**

***THE COOMBE,  
HESPELER,  
ONTARIO.***

**Drawer.**

**G. W. TEBBS,  
*Manager.***

**PLEASE NOTE:**

**No Child is Placed in a Roman Catholic Family.**

1. Applicant's Name (in full).....
2. Applicant's Occupation.....
3. Married or Unmarried?.....
4. Applicant's Post Office Address.....
5. Is this the nearest village or town to your home?.....
6. State distance and direction of your place from Post Office.....
7. Name of Township.....Concession.....Lot.....
8. If living in town, state name of street.....and number.....
9. Do you require a boy?.....of what age?.....
10. What work will you expect him to do?.....
11. Do you require a girl?.....of what age?.....
12. What work will you expect her to do?.....
13. Have you had any children from this Home, or any other Institution, before?.....
14. Do you belong to a Church?..... What denomination?.....
15. How far are you from Church?..... Sunday School?.....
16. What is your nearest Railway Station?..... On what line?.....
17. Please state the most convenient way for Child to reach your home. (This question is very important if you cannot meet child at Railway Station).....  
.....

**The Following Questions must be Answered by Persons Applying for Children Under School Age, i.e., 14 Years.**

- |                                                                              | No. | Ages.     | No. | Ages.      |
|------------------------------------------------------------------------------|-----|-----------|-----|------------|
| 18. How many children have you?.....                                         |     | Boys..... |     | Girls..... |
| 19. Are any of your family at home ill or confirmed invalids?.....           |     |           |     |            |
| 20. How far are you from Day School?.....                                    |     |           |     |            |
| 21. Does your Day School open in Summer or Winter?.....                      |     |           |     |            |
| 22. Will you send Child to Day School at least four months in the year?..... |     |           |     |            |
| 23. Will you report the Child to us by letter at least twice a year?.....    |     |           |     |            |

N.B.—Leave this Application, and a Stamped Envelope, with your Minister, asking him to sign recommendation on the back of this Form and return it to us.

APPLICATION NO.....

**MINISTER'S RECOMMENDATION.**

I hereby Certify that the accompanying statements are quite correct, and that

\_\_\_\_\_ is a suitable person  
to be entrusted with the care of a Child from The Coombe, Hespeler, Ont., and that  
his (her) circumstances justify him (her) in undertaking this charge.

Minister's Signature, \_\_\_\_\_

Minister's Address, \_\_\_\_\_

Date \_\_\_\_\_

*Miss Smyly's Home.*

**MR. G. W. TEBBS,**

**The Coombe,**

**HESPELER, ONTARIO,**

**DRAWER.**

**CANADA.**

*383725*

