ENRIGHT, NELLIE JOSEPHINE
C4679 Part 1

Treated for mould contamination
Traité contre la moisissure
Date: Dec. 12, 2011

FORCE No. C 4679 NC | SURNAME Enright | FULL CHRISTIAN NAMES Nellie Josephine RRC | RANK [illegible] St. Thomas Ont | DATE 16.11.40 | APPOINTED PLACE | DATE | TYPE OF COMMISSION S.R.

RECORD OF SERVICE OFFICERS

6. BIRTH DATE 14-9-82 | **CITIZENSHIP** British

PLACE (CITY, TOWN) Ottawa (PROV.) Ont. (COUNTRY) Canada

FATHER (FULL NAME) John Charles Enright

ADDRESS 416 Lewis St. Ottawa, Ont.

BIRTHPLACE Ottawa, Ont.

MOTHER (FULL MAIDEN NAME) Alice McCurley

ADDRESS (deceased)

BIRTHPLACE Ottawa, Ont

7 EDUCATIONAL STANDING (GRADUATED-YES OR NO)

HIGH SCHOOL ENTRANCE

JUNIOR MATRICULATION (YRS.) GRAD.

SENIOR MATRICULATION (YRS.) GRAD. Yes-Ont.

TECHNICAL SCHOOL (No. YRS.) GRAD

UNIVERSITY (No. YRS) DEGREE R.N.

CORRESPONDENCE COURSES 9

OTHER 1906-09, Nurses Training

8. CIVIL OCCUPATIONS OR EXPERIENCE

Royal Victoria Hosp., Mtl 1912-14 head nurse
Roosevelt Hosp., N.Y., 1910-12, head nurse
DPNH, Montreal Prince of Wales 1919-20, anaesthetist
DPNH, St Anne de Bellevue, 1920-22 anaesthetist
Royal Victoria Hosp. 1922-39 anaesthetist 1220

9. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE

C.A.M.C. 4-2-15/25-5-19, nursing sister nursing & anaesthetics
RCAMC, 26-2-40/15-11-40

R5

10 HONOURS-AWARDS, MENTIONS

	AUTH	DATE
RRC London Jubilee medal		

11. FLYING EXPERIENCE ON APPOINTMENT (HOURS)

SOLO | DUAL | PASSENGER

12. RELIGION R.C. 1

13. LANGUAGE English 1

14. SPORTS OR HOBBIES Golf.

15. PERMANENT HOME ADDRESS PRIOR TO APPOINTMENT 10502

416 Lewis Str., Ottawa, Ont.

16. SINGLE, MARRIED, WIDOWER, SEPARATED, DIVORCED: single

WIFE (FULL MAIDEN NAME)

PLACE OF MARRIAGE DATE

AUTHORITY (IF AFTER APPOINTMENT) 6

17. MARRIED ESTABLISHMENT

REMARKS	RANK	EFFECTIVE	D.R.O.

18. CHILDREN

CHRISTIAN NAMES	BIRTH DATE	D.R.O.	CHRISTIAN NAMES	BIRTH DATE	D.R.O.

19. NEXT-OF-KIN (ADDRESS AND D.R.O. IN PENCIL)

FULL NAME Mr. John Lewis Enright RELATIONSHIP father

ADDRESS 416 Lewis St. Ottawa, Ont. D.R.O.

FULL NAME RELATIONSHIP

ADDRESS D.R.O.

20. ADDITIONAL PERSON TO BE NOTIFIED IN CASE OF CASUALTY

FULL NAME RELATIONSHIP

ADDRESS D.R.O.

21. RANK, PROMOTION, AND APPOINTMENT (STATE IF COMM. FROM RANKS)

Matron (a/s 10-2-40) 16-11-40 (A.P. & R. 42 d/3-4-41) (T.F.S. 143) (A.F.O. 406/41) (C.G.O. 43 d/26-4-41) (amended)
Change of Rank on Transfer to Medical Br. for matron to T.F.L. (A.F.R.O. 1962) (A.F.R.O. 1731)
Change of Rank on Transfer to Medical Br. for matron to T.F.L. (A.F.R.O. 1962) amended (K310)
T.F.L. Off. 1-9-42 (a/s 10-2-42) (K308)
T.F.L. Off. 1-9-42 (a/s 10-2-40) (K310)
Retired 21-2-43 (A.P. & R. 35 d/5-3-43) (K45

22. CLASSIFICATION (G.L. N.F.L. ETC.)

T.F.L. (S.R.) Nursing Services 268
16-10-40 (A.P. & R. 42 d/3-4-41)
Trans to T.F.L. (S.R.) Medical Br. (Nurs. Serv.) 1-9-42 (K310)
(a/s 10-2-40 / A.F.R.O. 1731/43) (K308)

23. DATE AND PLACE OF SIGNING R.C.A.F. R.40 SERVICE ROLL

16-11-40, St. Thomas

24. COURSES OF INSTRUCTION (STATE COURSE AND RESULT)

Aviation-Nursing Course 1-49.0% - failed - 2 K.T.S. - T20

25. STANDING BOARDS

BOARD	PLACED ON	TAKEN OFF

26. LEAVE

FROM	TO	DAYS	TYPE	D.R.O.	T.W. AND D.P.O
16-2-43	21-2-43	7		K45	
22-6-43	29-6-43	7		K173	c39978 K179

27. COURTS MARTIAL

28. GROUND DUTIES PERFORMED

29. MISDEMEANORS (SUMMARY AWARDS COURTS MARTIAL, ETC.)

30. MISCELLANEOUS

R79A MF R465 045.

AIR FORCE No. C4679

SURNAME: ENRIGHT, NELLIE JOSEPHINE

FULL CHRISTIAN NAMES

APPOINTED PLACE St Thomas, Ont. DATE 16-11-40

RE-APPOINTED PLACE _____ DATE _____

TYPE OF COMMISSION A.R.

RECORD OF SERVICE OFFICERS

98

R.C.A.F. R.47A (REVISED) 10M-2-42 (1768) H.Q. 1062-3-32

1. POSTING (INDICATE S.O.S. OR T.O.S.) TEMPORARY DUTY (IN RED INK)

S.O.S. OR T.O.S.	UNIT AND PLACE	EFFECTIVE	D.R.O.
T.O.S.	T.T.S. St Thomas (on appt	16 11 40	T.T.S. 93/101
S.O.S.	T.T.S. St Thomas	18 8 41	T.T.S. 196
T.O.S.	Stn. Gander, Nfld	18 8 41 amended	NFLD 95, 1-7
T.O.S.	Stn. Gander, Nfld	18 8 41	NFLD 87 "
T.O.S.	Stn. Gander, Nfld	19 8 41	NFLD 95, 1-7
S.O.S.	Stn. Gander, Nfld	9 2 42	NFLD 37
T.O.S.	Stn. Dartmouth	10 2 42	K 61
S.O.S.	Stn. Dartmouth	1 12 42	K 335
T.O.S.	Sch of Av. Nursing, No 6 M.D. Toronto	2 12 42	6 MD 259
S.O.S.	Sch of Av. Nursing, No 6 M.D. Toronto	20 12 42	6 MD 267
T.O.S.	Stn. Dartmouth, N.S.	21 12 42	K 4
S.O.S.	Stn. Dartmouth, N.S.	21 2 43	K 45
	Retired - Non-Medical Reasons		
	Ent. to Rehabilitation Grant		
A.O.R.	91 Gilmour St, Ottawa, Ont.		

T-FTO-6 20NE 38-JD-001

C	CH	DATE	PARA	ADD ON DISCHARGE	P	CH
A		21 2 43	190	10502		

conf file - entitled to WSO

9139 HS Completed JAN 3 1945

Dred 23-4-47 at Montreal (Wvald/16-5-47)

POSTING (INDICATE S.O.S. OR T.O.S.) TEMPORARY DUTY (IN RED INK)

S.O.S. OR T.O.S.	UNIT AND PLACE	EFFECTIVE	D.R.O.

3. MEDICAL HISTORY - HOSPITALIZATION

EXAMINATIONS (IN RED INK) HOSP. (IN BLACK INK)

DATE	FORM	CATEGORY	REMARKS
HOSPITAL	ADMITTED	DISCHARGED	D.R.O.
QUARTERS	CONFINED	RET'N. DUTY	
17-3-41	R47	A4B	
4-2-43	MMB227	A4B	

4. TYPE OF SERVICE AIRCRAFT QUALIFIED TO FLY

TYPE	D.R.O.

2. QUARTERS-RATIONS-SUBSISTENCE ALLOWANCE-PAY ENTRIES

FROM	TO	D.R.O.

5. FLYING TIME

DATE	SINGLE-ENG. DAY	SINGLE-ENG. NIGHT	MULTI-ENG. DAY	MULTI-ENG. NIGHT	CREW DUTIES: OBSERVER	CREW DUTIES: GUNNER	CREW DUTIES: OTHER	PASS.	TOTAL

AIR FORCE No. C-4679

SURNAME: ENRIGHT

FULL CHRISTIAN NAME: Nellie Josephine

ENLISTMENT/APPOINTMENT
PLACE
DATE 16 November 1940

RELIGION: R.C.

ROYAL CANADIAN AIR FORCE
RECORD OF SERVICE
OFFICERS, AIRMEN AND AIRWOMEN

R.C.A.F. FORM R230
150M-7-42 (2446)
H.Q. 885-R-230

BIRTH DATE	PLACE	COUNTRY	CITIZENSHIP	RACIAL ORIGIN
14-9-82	Ottawa, Ont.	Canada	Canadian	

CIVIL EDUCATION

PUBLIC SCHOOL 1888 – 1897	JUNIOR MATRICULATION
HIGH SCHOOL ENTRANCE 1897-1902	SENIOR MATRICULATION
TECHNICAL SCHOOL	UNIVERSITY
CORR./BUSINESS COURSES	LANGUAGES SPOKEN

CIVIL OCCUPATIONS AND EXPERIENCE

1906-10 Training, Head Nurse, Royal Victoria Hosp. Mont. 1910-12 Roosevelt Hosp, N.Y. 1912-14 Head Nurse, R.V.H. Mont. 1915-19 Anesthetist D.P.N.H, Mont. 1919-20-22 D.P.N.H. Anse de Bellevue, Royal Victoria Hosp. Anaesthetics.

PREVIOUS SERVICE

No. 3 Can. Gen. Hosp (McGill) Nursing.
No. 3 C.C.C. Station 1915-1919 Nursing Sister
41 + 33 British C.C. Station
No. 7 Can. Gen. Hosp.

PLACE AND DATE OF MEDICAL	CATEGORY	PLACE AND DATE OF MEDICAL	CATEGORY
16-11-40	A 4/3.		

PARTICULARS OF FAMILY

SINGLE, MARRIED, WIDOWER, DIVORCED: Single
WIFE (FULL MAIDEN NAME) OR HUSBAND
PRESENT ADDRESS (IN PENCIL)
PLACE OF MARRIAGE — DATE
AUTHORITY (IF AFTER APPOINTMENT/ENLISTMENT)

CHILDREN

NAMES	PLACE AND DATE OF BIRTH	NAMES	PLACE AND DATE OF BIRTH

NAME(S), ADDRESS(ES), RELATIONSHIP OF PERSON(S) TO BE INFORMED OF CASUALTIES (IN PENCIL)

M. J. C. Enright, (father)
416 Lewis St.,
Ottawa, Ont.

EMPLOYMENT AS INSTRUCTOR OFFICER AIRMAN/AIRWOMAN

TYPE	FROM	TO	TYPE	FROM	TO

OFFICERS

RANK, BRANCH AND CATEGORY	DATE	AUTH.	DUTIES PERFORMED DURING SERVICE, E.G. ADJ.
Medical (N.S.)			
Flight Officer	1 9 42		
Flight Lieutenant	14 12 42		

COURTS-MARTIAL ATTENDED WITH DATES
(STATE IF UNDER INSTRUCTION OR AS MEMBER)

AIRMEN AND AIRWOMEN

RANK	DATE	AUTH.	TRADE	DATE	AUTH.

OFFICERS, AIRMEN/AIRWOMEN

COURSE OR TRADE	GRP.	%	PF	DATE

AIR FORCE No. C-4679

ENRIGHT — Nellie Josephine — F/L

SURNAME — FULL CHRISTIAN NAME

ENLISTMENT/APPOINTMENT
PLACE
DATE 16 November 1940

RELIGION
R.C.

R.C.A.F. FORM R230

TYPE OF LEAVE

FROM	TO	No. DAYS	DESCRIPTION	AUTH.
19-5-41	25-5-41	7	Annual	DRO. 118
15-2-42	21-2-42	7	Special L.	
Ess. S.L.	T.W. C4679		d-6-2-40	
22-6-42	29-6-42	7	Annual	179
Ess. S.L.	T.W. C39978		d-20-6-42	

TYPE OF AIRCRAFT ON WHICH MOST PROFICIENT

(IF UNDER INSTRUCTION STATE NUMBER OF HOURS ON EACH TYPE AND TESTS PASSED)

SERVICE MACHINES FLOWN

POSTINGS, ATTACHMENTS & TEMPORARY DUTY

SOS TOS	FROM TO	DATE	AUTHORITY
SOS	6 "M" Depot Dartmouth	20 12 42	
SOS	Retrid effet.	21 2 43	DRO. 45

ALL OTHER CASUALTIES

CASUALTY AND DATE	AUTHORITY

CHARACTER AND TRADE ASSESSMENT

DATE	CHARACTER	TRADE ASSESSMENT

HONOURS, AWARDS AND MENTIONS

DATE	AWARD	AUTHORITY

R.C.A.F. R.47
100M—10-40 (7391)
H.Q. 1062—3—56

ROYAL CANADIAN AIR FORCE

OFFICER'S APPLICATION AND RECORD SHEET

C4479

Date ~~Jan 22.~~ Nov 16 1940

I have the honour to apply for an appointment to the Special Reserve (Non-Flying List) / (General List)

Please read these notes before completing the form:—

(a) All questions must be answered in candidate's own handwriting It is not sufficient to leave a space for reply, blank. Write "N.A." if "Not Applicable". Incorrect answers may prejudice an applicant's chance of selection.

(b) Where spaces are inadequate, information should be given on foolscap paper attached to and identified with this application.

(c) Paragraphs 35, 36 and 37 must be signed, dated and witnessed.

(d) The submission of false information or falsified documents in connection with this application may render the applicant liable to Prosecution.

1. Surname ENRIGHT. (Use capital letters)

2. Christian Names NELLIE JOSEPHINE (Use capital letters)

3. Date of Birth Sept. 14/1882 Place Ottawa (City) Ont. (Province) Canada (Country)

4. Permanent Address 416 Lewis St. Ottawa Ont.

5. Present address for correspondence stating date until which it holds good. Tech. Train. Centre. St. Thomas Ont. | Telephone 3700

6. Nationality (If Naturalized Canadian, proof of naturalization must be submitted)

7. Religion (State denomination, e.g., C. of E., R.C., U.C., etc.) R.C.

8. Next of Kin (Name) J.C. Enright. Relationship Father
Address 416 Lewis St. Ottawa Ont.

9. Father's name in full John Charles Enright Alive ~~Deceased~~
Address 416 Lewis St. Ottawa Ont.
Birth Place Ottawa Nationality English.
Profession Retired
Mother's maiden name in full Alice Mc Carley ~~Alive~~ Deceased
Birth Place Ottawa Ont.

10. Has either parent acquired any other nationality? (If so, full particulars and date must be given)
No

11. Single, ~~Married~~, ~~Widower~~, ~~Divorced~~, ~~Separated~~?
Particulars of Marriage (Date) (Place)
Full maiden name of Wife Birthplace

12. Particulars of Children:—

NAME	DATE OF BIRTH	PLACE OF BIRTH
n. a.		

13. Person or persons to be notified in case of casualty:—
Name Mrs. J. Enright. Relationship Father
Address 416 Lewis St. Ottawa Ont.

4679

14. Education:—

SCHOOLS	DATES IN ATTENDANCE FROM	DATES IN ATTENDANCE TO	COURSES	DIPLOMAS AND DEGREES
St. Patrick School	1888	1897		
Sacred Heart Convent Ottawa	1897	1902		
Universities				
Nil				

15. Special Civil Courses or Examinations other than in 14 above, Correspondence Courses, etc.

Nil

16. Civil Employment, from leaving school to present in chronological order, and Reasons, if any, for leaving:—
(If space does not permit full details of civil duties supplementary memorandum should be attached to and identified with each copy of this form.)

NAME AND ADDRESS OF EMPLOYER	FROM	TO	DUTIES	CAUSE OF LEAVING
	1906	1909	Training	
Royal Victoria Hosp. Montreal	1912	1914	Head Nurse	Change
Roosevelt Hosp. New York	1910	1912	" "	"
C.A.M.C.	1915	1919	Nurse + Anaesthetist	Discharged
R.V.H. Montreal Prince of Wales	1919	1920	Anaesthetist	Hosp. Closed
R.V.H. Ste. Anne de Bellevue	1920	1922	"	Relieved by R.V.H. staff Ste Anne's
Royal Victoria Hosp.	1922	1939	"	to R.V.H. staff Ste Anne's

17. Clubs or Organizations of which applicant is a member Reg. Nurses Ass. Montreal
Alumnae Ass. of R.V.H. Montreal, Business & Professional Women Club, Montreal, C.A.N.C. Club

18. Previous Service with Navy, Army, Air Force, Permanent or Non-Permanent:—
(If in the Air Force state nature of duties, *e.g.*, Pilot, Observer, Technical or Ground duties and if entitled to wings.)

FULL NAME OF UNIT	FROM	TO	RANK	DUTIES
No 3 Can. Gen. Hosp. (McGill)				
" 1 " " "				Nursing & Anaesthetics
" 3 C.A.C. Station	Apr. 22 1915	May 22 1919.	Nursing Sister	
49th Bn British C.C.S.				
No 7 Can. Gen. Hosp.				

19. Reason for Termination of last Service Engagement Discharged

20. Details of Ground Officer's Duties Performed N. A

21. Experience as Teacher or Instructor (Service or Civilian):—

SUBJECT	FROM	TO	UNIT	PLACE
Nil				

22. Have you ever been or are you now in receipt of a Disability Pension? No

If so, state nature of disability:

Particulars of other Pension:

23. Honours and Awards (Quote authority—*London* or ~~*Canada Gazette*~~)
R.R.C. London Jubilee medal

1/1679

24. Service Courses taken:—

TYPE OF COURSE	PLACE	FROM	TO
n.a.			

25. Have you previously applied for a Commission or for enlistment in the Royal Canadian Air Force or any of its auxiliaries? If so, state:—

No.

(Unit and Place) (Date) (Result)

26. Have you any knowledge of internal combustion engines, construction of aircraft, mechanics or electricity?

No

27. Types of Aircraft Flown (Service or Civilian):—

PLACE	LIST FLYING HOURS BY YEARS	REMARKS
n.a.		

28. Total Flying Time n.a.

(Hours) (State Type and No. of Licence held)

29. Sports and games played, and whether extensively, moderately or occasionally.

Golf.

30. Hobbies None

31. Languages spoken, or written (State proficiency) English.

32. Any other remarks or information not included in the foregoing

Ref.

33. Names and present addresses of responsible persons (preferably including employer), able to certify from personal knowledge of the candidate's career, as to his suitability for commissioned rank.

Name Miss J. Munroe (in capitals)
Address Royal Victoria Hosp.
Profession Superintendent of Nurses.

Name Miss G. Doyle (in capitals)
Address Mount Royal Hotel Montreal
Profession Secretarial Service

Name Dr. D. Ballon (in capitals)
Address Bishop St.
Profession Medicine

Name Miss N. Handcock (in capitals)
Address 1230 Bishop St. Montreal
Profession Nurse.

34. NOTE:—

The applicant must be prepared to provide, if required, references from his former headmaster, employer or other person. The Department is not prepared to enter into correspondence, whether officially or unofficially, with persons other than those whom the candidate has nominated; and the Selection Board will disregard recommendations from any persons who are not directly and personally acquainted with the candidate's work, at school, university, in industry or business, in H.M. Forces or otherwise. **Applicants are cautioned not to prejudice their candidature by endeavouring to enlist the support of persons inside or outside the Service who they consider might have some influence.**

35. CERTIFICATE

The foregoing information was personally compiled by me and is correct to the best of my knowledge and belief. I understand that His Majesty may exercise the right at any time to dispense with the services of an Officer on probation.

Witness Murray L Ban Signature Nellie Enright.

Date Nov 16 1940

36. AGREEMENT

If selected, I agree to accept a Commission in the Royal Canadian Air Force, Special Reserve (Non-Flying List) (General List).

Witness Murray L Ban Signature Nellie Enright.

Date Nov 16 1940

4679

37. DECLARATION

I, Nellie J. Enright, having made an application, dated (Nov 16/40) for a Commission on the Special Reserve of the R.C.A.F. do hereby declare, provided my said application is accepted, that I am willing to serve on Active Service, anywhere in Canada, also beyond Canada and Overseas for the duration of the present war, and for the period of demobilization thereafter, should His Majesty so long require my services.

Witness M. L. Barr

Date Nov 16 19 40 Signature N. J. Enright.

Place St. Thomas, Ont.

38. *(a)* Location of Will Safety Deposit box. Bank of Montreal St Thomas.

(b) Entered in Officer's Records by .....
(Rank) (Date) (Place)

CERTIFICATE OF MEDICAL EXAMINATION

Name in full Nellie Josephine Enright

PART 1. Information obtained from the applicant:—

1 Age 38 2. Have you ever suffered from any of the following defects in health?

(a) Rheumatism	no	*(j)* Nasal Trouble	no
(b) Tuberculosis	no	*(k)* Ear Disease	no
(c) Bronchitis or Asthma	no	*(l)* Eye Disease	no
(d) Heart Disease	no	*(m)* Epilepsy	no
(e) Kidney or Bladder Disease	no	*(n)* Nervous or Mental Disease	no
(f) Stomach or Bowel Trouble	no	*(o)* Syphilis	no
(g) Rupture	no	*(p)* Gonorrhoea	no
(h) Varicose Veins	no	*(q)* Bone Fracture	no
(i) Flat or Deformed Feet	no	*(r)* Other Disease or Defect	no

3. Have you ever worn glasses? yes

4. Have you had any illness of more than one week's duration? No

X Nellie J. Enright.
Signature of Applicant.

Examiner's remarks *re* above .....

PART 2. Information obtained by Medical Examination (Applicant must be stripped):—

1. Identification marks or scars (if operative, obtain history) Diamond mark left cheek

2. Height 5' Feet 5½ Inches 3. Weight 165 lbs.

4. Complexion Fair 5. Colour of eyes blue Hair grey

6. Development ~~Good~~ ~~Fair~~ ~~Poor~~ 7. Chest measurement—full expiration 37½ inches
range of expansion 2 inches

8. Hearing—Right W. A. 20' Left W. A. 20' Tympana—Right N. Left S.

9. Vision—Without Glasses—Right 20/30 With Glasses—Right 20/20
Left 20/30 Left 20/20
Colour Vision N. (Nelson)

10. Condition of mouth and teeth healthy

11. Heart and blood vessels normal 12. Blood Pressure—S 150 D 90

13. Reflexes normal 14. Urine—Albumen neg. Sugar neg.

15. Abnormalities (Congenital and Pathological) found on Examination nil

PART 3. The candidate has been examined in accordance with existing standards and he is considered fit for Category A 4 B

General Impression and any special remarks of Medical Officers 8-3-40 X-ray Neg. [illegible] R/L.

CATEGORY APPROVED A 4 B MAR 17 1941 Name Compiled Sqn Ldr for D.M.S. Air

Date Nov 16 19 40

M. L. Barr Surg Lt (President) Lieut (Member) T. A. Sweet (Member) Capt. RCAMC.

~~ORIGINAL~~
DUPLICATE
~~TRIPLICATE~~

M.F.M. 1
25M—10-39 (2289)
H.Q. 1772-39-1644

(To be completed in triplicate. Copy designation to be shown by striking out terms not applicable)

Unit R.C.A.M.C. Rank Nursing Sister

Personal No. Name Nellie J. Enright

CANADIAN ACTIVE SERVICE FORCE

ATTESTATION PAPER

OFFICER'S DECLARATION PAPER

Also applicable to Nursing Sisters

1. Surname Enright
2. Christian Names Nellie Josephine
3. Present Address 1230 Bishop St. Montreal.
4. Date of birth Sept. 14th. 1884.
5. Place of birth Ottawa (Country) Ont. (County or Province) Ottawa (Town or Twp.)
6. Religion (state denomination) R.C.
7. Profession or occupation R.N.
8. Married, ~~widower~~ or single Single
9. Name of next of kin Mr. J.C. Enright 416 Lewis St.
10. Relationship Brother
11. Address of next of kin 416 Lewis St. Ottawa.
12. (a) State unit of Active Militia in which you are serving or have served C.A.M.C. 1915 - 1919.

    (b) Present rank
13. State particulars of former war service No 3 Can. Gen. Hosp. No 1 Gen Hosp. No 3 C.C.C.S. & 49 & 35 British C.C.S.

I, Nellie J. Enright. do solemnly declare that the above particulars are true, that I hold His Majesty's Commission in the Canadian Militia and I am willing to serve in the Canadian Active Service Force if, when and so long as required.

Date Feb 10th 1940 Nellie J. Enright R.N. (Signature and rank)

CERTIFICATE OF OFFICER COMMANDING

The application of Nursing Sister N. J. Enright (Rank and name) for appointment to the R.C.A.M.C., C.A.S.F. (Unit) ~~with the rank of~~ Matron and appointment to R.C.A.F. Hospital, St. Thomas, Ont. ~~(was)~~ (is) recommended, appointment to date from 26th February, 1940. ~~has been approved.~~ is recommended for approval.

Authority 866-3-11 d/20-2-40

(Signature of O.C.) Colonel, D.G.M.S. (Rank)

Date 10th February, 1940. R.C.A.M.C., C.A.S.F. (Unit)

Record of Service of Nursing Sister Nellie J. Enright
(Name)

Active Militia Unit Retired List 1

Rank N.A. Date of Rank N.A.

Highest rank for which qualified by examination N.A.

Staff College N.A.
Militia Staff Course N.A.
Advanced Course N.A.

Languages English

Other military qualifications or special courses (specify)

University or College Degrees Nil

Civil Technical Training or qualifications (specify)

Nursing Sister, Great War

Report		Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date of appointment to Field Force	Rank Shown	Effective Date	Unit	Place	Authority	
Date	From whom received						Part II D.O. No. Cas. List, etc.	Dated
		Joined on appointment						
26-2-40	DMO M.D.4	Administrative Officer and Anaesthetist, Prince of Wales Hospital 1919-1920 St. Anne's Hospital 1920-1921						
	Superintendent Royal Victoria Hosp.	Anaesthetist, Royal Victoria Hospital 1921-1939						
		Attached to No. 8 Det., R.C.A.M.C. and posted to R.C.A.F. Station Hospital, St. Thomas, Ont.	Matron	26/2/40	R.C.A.M.C.		Pt. II D.O. #73	16/3/40.
		S.O.S. #8 Detachment RCAMC., C.A.(A)RCAF on retirement for immediate appointment in the RCAF (SR). Authority H.Q.54-27-58-4. F.D.96 dated 11-11-40.	Matron	15-11-40	R.C.A.M.C.	St.Thomas	Pt.11 D.O. #25	16-4-41

For additional entries use **M.F.M. 1 and 2 (a)**

CERTIFICATE OF MEDICAL EXAMINATION

Name in full Nellie Josephine Enright Date February 9, 1940.

PART 1. Information obtained from the applicant.

1. Age 55 2. Have you ever suffered from any of the following diseases?

a. Rheumatism	NO	j. Nasal trouble	NO
b. Tuberculosis	NO	k. Ear disease	NO
c. Bronchitis or asthma	NO	l. Eye disease	NO
d. Heart disease	NO	m. Epilepsy	NO
e. Kidney or bladder disease	NO	n. Nervous or mental disease	NO
f. Gastro-intestinal	NO	o. Syphilis	NO
g. Rupture	NO	p. Gonorrhoea	NO
h. Varicose veins	NO	q. Have you ever worn glasses?	YES
i. Flat or deformed feet	NO		

Pension or Compensation ..... No

Nellie J Enright.
(Signature of Applicant)

Examiner's remarks *re* above Worn glasses for near work for four years.

PART 2. Information obtained by medical examination. The applicant must be stripped.

1. Identification marks or scars. (If operative obtain history.)
Small mole left cheek.

2. Height 5 feet 4½ inches. 3. Weight 170 pounds.

4. Complexion Medium Eyes Blue Hair Grayish 5. Development Fair ~~Good~~ Fair ~~Poor~~

6. Chest measurement—Girth on full expansion ..... inches.
Range of expansion ..... inches.

7. Vision, right 20/30 left 20/30 8. Hearing, right W.V. 21 ft. left W.V. 20 ft.

9. Condition of mouth and teeth ~~W.S~~ Satisfactory

10. The abnormalities (congenital and pathological) found on examination are as follows
Overweight B.P. 140/90
Normal urine ears reflexes

PART 3. We, the examiners find no evidence of the diseases mentioned in Question 2. Part 1, except as reported in the remarks. We have examined the Applicant in accordance with the pamphlet "Physical standards and Instructions for the medical examination of recruits" and he is found fit for Category B

Special remarks when category lower than A
Over weight
Over age.

R Rhodwell Capt RCAMC E E Lennon Capt RCAMC F R Belcher Lt Col RCAMC
President Member Member

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
8-3-40	X Ray Chest - Negative E E Lennon Capt.		
29-10-40	Vacc. and TAB. I. H C Barr Major RCAMC.		
6-11-40	TAB. II. and Tet. Tox. I.		
17-11-40	TAB. III.		

Rank Matron Surname ENRIGHT Christian Name Nellie Josephine

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38

C.4679

OTTAWA, Ontario. Single

GENERAL INFORMATION

EDUCATION
1888-97 - St. Patricks School.
1897-02 - Sacred Heart Convent, Ottawa.
1906-09 - Training - Nurse.

CIVIL EXPERIENCE
1910-12 - Roosevelt Hospital, N.Y. - Head Nurse.
1912-14 - Royal Victoria Hospital, Montreal - Head Nurse.
1915-19 - C.A.M.C. - Nurse & Anaesthetist.
1919-20 - Dept. Pensions & National Health, Montreal - (Prince of Wales) - Anaesthetist.
1920-22 - Dept. Pensions & National Health, Ste. Anne de Bellevue - Anaesthetist.
1922-39 - Royal Victoria Hospital - Anaesthetist.

SPORTS
Golf.

OTHER INFORMATION
R.R.C. London - Jubilee Medal.

CRSE of Aviation Nursing 17-12-42 Passed 32 in 34 49.0% Below Average.

Retired 21-2-43 - AP&R #35 5-3-43.

SERVICE EXPERIENCE
- #1 and #3 Can. Gen. Hospital (McGill).
1922-2m - C.C.C. Station - Nursing Sister.
1915-19 - 49 and 33 British C.C.S.
- #7 Can. Gen. Hospital - Nursing & Anaesthetics.

Transferred from Nursing Service to Med. Branch (Nursing Service) 1-9-42 Auth. A.F.R.O. 1731 30-10-42.

R.C.A.F. R198A
5M-2-42 (1762)
H.Q. 885-R-198A

(N/S). (Med.) ENRIGHT, Nellie Josephine RRC (SR)

D

14-9-82	58		16-11-40
Birth Date	Age on Appointment		Date of Appointment

POSTINGS

Rank	Date	Station	Date	Duty	
Matron	16-11-40	TTS, St.Thomas	26-2-40		
Matron	16-11-40	Stn. Newfoundland	18-8-41		
Matron	16-11-40	Stn. Dartmouth	9-2-42		
T/Ft.O	10-2-40	Stn. Dartmouth	9-2-42	Auth. AFRO #1731 d/30-10-42	
T/Ft.O	10-2-40	School of Aviation Nursing #6 Manning Toronto	1-12-42		
T/Ft. O.	10-2-40	RCAF Stn Dartmouth	20-12-42		
		Retirement to be considered.			
		RETIREMENT BEING CONSIDERED			
		Retirement approved.			
		Retired.			

LOWE-MARTIN CO. LIMITED—D85041

Date	CONFIDENTIAL REPORTS
15-6-41	Nursing staff being well run by the matron under difficult conditions due to infectious cases. (66). (G/C R. Collis, TTS, St.Thomas).
14-8-41	On Posting from TTS to Newfoundland - Has run an efficient hospital, may have been rather strict at times, but not unduly. Can rise to any occasion. Has fitted in well with the various Women's Organizations. A serious loss to this station. (56). (W/C H.A. Peacock, TTS). (G/C R. Collis, TTS).
30-10-41	Change of Command - Matron Enright is considerably older than the other nursing sisters and is slightly inclined to over-emphasize petty detail, in other words, a bit of a "fuss-budget". Professionally she is an excellent matron, who takes a very keen interest in the station hospital. Severity of the Newfoundland winter may necessitate a change about Jan. 1942. (55). (G/C K.M. Guthrie, Gander, Newfoundland).
2-12-41	First month that Matron Enright was here she had a very severe cold but has recovered and is in apparent good health. Some three weeks ago she had a severe fall through a trap door with minor injuries but could possibly have had very severe injuries considering the extent of the fall. She is doing very efficient work here and seems quite satisfied although there is practically no opportunity for leaving the hospital at any time. (W/C Leggett). The Matron has been giving very efficient service but it is easy to understand that the winter season at Gander will be a difficult one and if there is a suitable replacement who is younger, it might be well to consider a reposting. (W/C A.A.G. Corbet, for AOC, EAC).
15-12-41	Very efficient matron. Has had great deal of experience in similar capacity. Very exacting and has outstanding supervising ability. I would recommend posting to another station about Jan. 1-1942. (S/L L.H. Legget, S.M.O.). (55). (G/C R.H. Foss, Gander, Newfoundland).
30-1-42	During the 5 months here she has improved and maintained the routine, discipline and general conditions at this hospital. Resourceful and ambitious but inclined to keep a little too strict supervision over the Nursing Sisters and this has caused considerable dissatisfaction. This condition would only exist on a Station such as Gander where the Matron is obliged to live in close contact with the other Nursing Sisters and this is also greatly due to the vast differences in their ages. Recommend as she has completed over 6 months service in Gander, she be posted to another station. (G/C R.H. Foss, C.O., Stn. Gander, Newfoundland).
15-8-42	R.211--2, 6, 1 Rather hesitant and inarticulate, 4, 4, 4, 4, 4, 1 Has very little interest, 5, 6, 4, 5, 6, Total 56. (F/L B.M. Morrow, RCAF Dartmouth) (G/C B.D. Hobbs, Dartmouth)
10-12-42	Memo - It has been recommended to the A.M.P. and he has concurred (4-12-42), that the above Matron be retired on the grounds of having reached the age limit. Miss Enright attained the age of sixty in September, 1942, and it is felt that she is not now in a physical state to carry out the arduous duties of a matron with efficiency. May retirement action be taken, please, at your convenience. (A/C R.W.Ryan, D.M.S.(Air).
16-12-42	Letter to A.O.C. E.A.C. she is 60 years of age and it is felt she is not now in physical state to carry out the arduous duties of a matron with efficiency. Retirement proceedings are to be instituted on account of age.)(G/C T.C.Macfarlane, for Chief of the Air Staff).
26-1-43	Memo..Retirement is being considered by the Retirement Board of Officers. (S/L A.S.MacKinnon for S/L W.H.B. Shannon, D.O.C.).
5-2-43	Memo...Ministerial approval has been given to the retirement of this Officer. (S/L A.S. MacKinnon for S/L W.H.B.Shannon, D.O.C.)

Date	A. M. P. Liaison Reports

Date	Recommendations for Promotion
15-6-41	Confid. Report - Ordinary.
14-8-41	Confid. Report - Ordinary.
30-10-41	Confid. Report - Ordinary.
15-12-41	Confid. Report - Ordinary.
15-8-42	R.211----------Ordinary.

Remarks of Promotion Board

To be made out in duplicate.

M.F.M. 5
100M—9-39 (1870)
H.Q. 1772-39-1651

PARTICULARS OF FAMILY OF AN OFFICER OR SOLDIER OF THE CANADIAN ACTIVE SERVICE FORCE

INSTRUCTIONS.

(*a*) This form is to be completed immediately an officer or soldier is appointed to, or enlisted in, the C.F.F.

(*b*) All questions, etc., must be completed.

(*c*) Both copies of the form are to be forwarded by the Officer Commanding the unit for each officer and soldier, to the Paymaster, or Officer acting as such. The latter will transmit one copy, through the District or Camp Paymaster, to the Chief Paymaster, N.D.H.Q., Ottawa. The other copy will be retained by the Paymaster until the unit arrives Overseas, when it will be forwarded to the Chief Paymaster, Canadian Overseas Intermediate Base.

---

(1) Name of Officer or Soldier ENRIGHT NELLIE JOSEPHINE (Matron)
(Surname first—Christian names in full—Block capitals)
R.C.A.M.C.

(2) Regimental Number - nil -

(3) Unit THE TECHNICAL TRAINING SCHOOL, R.C.A.F. ST. THOMAS, ONTARIO.

(4) Are you married? NO

(5) If married, state,

(*a*) Full name of your wife N.A.

(*b*) Present postal address of wife N.A.

(6) If married, have you been regularly supporting your wife? If not—state reasons
N.A.

(7) Are you a widower? N.A.

(8) Have you any children? NO

If so, give number of boys and girls N.A.

Also their names and ages N.A.

(9) If Separation Allowance is claimed in respect of children—state whether you have been regularly supporting them N.A.

Give particulars of Guardian to whom Separation Allowance should be paid—if authorized—

Name N.A.

Postal Address

(SEE OTHER SIDE).

(10) Have you a common-law wife—whom you have been regularly supporting and publicly representing as your wife? N.A.

If so, state her full name and Postal Address N.A.

(11) Is your father alive? YES

If so, state name and address JOHN CHARLES ENRIGHT
416 LEWIS STREET, OTTAWA, ONTARIO.

(12) If your father is a widower and is totally incapacitated from earning a living—are you his sole support? N.A.

(13) If sole support of father who is a widower—state what amount per month you have given him prior to joining C.F.F. N.A.

Also state reason he has no other means of support N.A.

(14) Is your mother alive? NO

If so, state name and address N.A.

(15) If your mother is a widow, are you her sole support? N.A.

(16) If sole support of widowed mother—state what amount per month you have given her prior to joining C.F.F. N.A.

Also state reason why she has no other means of support N.A.

(17) Are you insured? NO

If so, in what Company? N.A.

Have you made arrangements for payment of your Insurance Premium? N.A.

If not, and it is a monthly premium, you may assign the amount in addition to any other assignment you wish to make, provided the total assignment is not in excess of the maximum monthly amount which may be assigned.

I hereby certify that the information given by me on this form is correct in each and every particular.

Nellie J. Enright
(Signature of officer or man)

Date MAY 28th, 1940.

Howard Patterson
for Officer Commanding
The Technical Training School, R.C.A.F.
St. Thomas, Ontario.

Date 29-5-40

DEPARTMENT OF VETERANS AFFAIRS

23 Apr 47 Post disch death AWARDS AIR FORCE

WAR SERVICE RECORDS

ENRIGHT, Nellie Josephine	C 4679	FTO	FILE No.
SURNAME (IN BLOCK LETTERS) CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICE BADGE (CLASS) No. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
	67241

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

DVA 806

MEDALS AND MEMORIALS—DECEASED PERSONNEL

	REGISTRATION No. DATE OF DESPATCH
(1) MEDALS PERSON ENTITLED TO ADDRESS:	(1)
(2) MEMORIAL CROSS WIDOW -------- ADDRESS:	(2)
(3) MEMORIAL CROSS MOTHER DECEASED ADDRESS:	(3)

OCCUPATIONAL HISTORY FORM

THIS FORM IS TO BE COMPLETED FOR EACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMMITTEE ON DEMOBILIZATION AND REHABILITATION, A COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISHING IN INDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE OF MUCH HELP TO THE COMMITTEE.

PLEASE READ CAREFULLY THE INSTRUCTIONS GIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FORM

PLEASE LEAVE BLANK

Section A—GENERAL INFORMATION

1. (a) Print name in full ENRight Nellie Josephine (b) Reg'l. No. C 4679
2. (a) Arm of service R.C.A.M.C. (b) Unit Hospital (c) Rank Matron
3. (a) Date of birth Sept. 14th 1882 (b) Have you any dependents? no (c) Place of residence at time of enlistment Montreal
4. (a) Place of enlistment Ottawa (b) Date of enlistment Feb. 26 - 1940

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 20 (b) Were you attending school or college up to the time of enlistment?
6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.) Sacred Heart Convent Rideau St. Ottawa
7. If you attended a university, give name of university and standing or degree secured —
8. (a) Did you ever enter upon a trade apprenticeship? yes (b) If so, for what occupation? Nursing (c) Did you finish it? yes (d) If you did not finish it, how long did you serve at it?
9. (a) What languages do you speak fluently? English. (b) What languages do you read well?

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below) Working (b) At time of enlistment of what trade union or professional society were you a member? Alumnae Ass R.V. Hosp Montreal; Business & Prof. Womens Club Montreal; Nurses Ass. Inc. Overseas Nurses Ass. of Can.

Section D—PARTICULARS CONCERNING THOSE WHO WERE UNEMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 11 TO 17 REFER ONLY TO THOSE WHO ANSWER "NOT WORKING" IN QUESTION 10 (a)

11. Had you ever been employed fairly regularly since leaving school?
12. (a) If answer to 11 be "Yes", state exact trade or occupation at which you actually worked (b) State how long you had worked at this trade or occupation
13. If answer to 11 be "No", state exact trade or occupation for which you feel qualified
14. If you had been employed after leaving school, state when you last worked fairly regularly before enlistment
15. Give details of last employer, if any: Name Address
16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)
17. (a) If your last employment was in a business of your own, state nature and address of business (b) Date of discontinuing it

Section E—PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 18 TO 23 REFER ONLY TO THOSE WHO ANSWER "WORKING" IN QUESTION 10 (a). PLEASE READ THESE QUESTIONS AND REPLY TO THOSE APPLYING TO YOU AT TIME OF ENLISTMENT

IF YOU WERE AN EMPLOYEE WORKING FOR AN EMPLOYER UP TO THE TIME OF ENLISTMENT, PLEASE ANSWER QUESTIONS 18 TO 21

18. Name of employer Alumnae Ass. R. Victoria Hosp. Address Montreal
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)
20. (a) Your specific occupation Nursing Anaesthetist (b) Number of years' experience at this occupation with any employer
21. (a) Did your employer promise definitely to give you employment on discharge? no (b) Did your employer refuse to promise you employment on discharge? no (c) Do you wish to return to your former employment? I

IF YOU WERE WORKING ON YOUR OWN UP TO THE TIME OF ENLISTMENT, THAT IS TO SAY, OPERATING A FARM, A STORE, AN AGENCY, OR IN PROFESSIONAL PRACTICE, OR AS A PARTNER IN ANY SUCH LINE, PLEASE ANSWER QUESTIONS 22 AND 23

22. (a) State nature of business, or professional practice (b) Where was it located?
23. (a) Number of years engaged in this business (b) Have you made, or will you make plans to return to the same or a similar business on discharge?

Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war? (b) Do you feel competent to operate a farm? (c) If so, in what kind of farming?
25. (a) Were you born on a farm? (b) How many years' actual farming experience have you had? (c) In what provinces did you have experience?

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? no.
27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.)
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form

DATE Feb. 11/43 1943 SIGNATURE Nellie J. Enright.

ARMY (D.R.)

EMB June 5, 1941.

DEPT. NATIONAL DEFENCE
JUN 23 1941
H.Q. CANADA

RECORD OF SERVICE

CANADIAN EXPEDITIONARY FORCE

N/S Nellie Josephine Enright.

1.	Date and place of birth:-	14-9-85, Ottawa, Ontario.
2.	Date of appointment and Unit:-	4-2-15, Canadian Army Medical Corps.
3.	Date proceeded to England:-	6-5-15, with C.A.M.C. Draft.
4.	Date proceeded to France:-	13-5-15, to No.1 Canadian General Hospital.
5.	Units in the Field:-	No.1 Can. General Hospital. No.3 Can. General Hospital. No.3 Casualty Clearing Station No.8 Can. General Hospital. No.7 Can. General Hospital.
6.	Date returned to England:-	29-3-19.
7.	Appointments:-	--------
8.	Promotions and Reversions:-	--------
9.	Date returned to Canada:-	14-5-19.
10.	Date S.O.S. and reason:-	25-5-19, General Demobilization.
11.	Honours and Awards:-	Royal Red Cross, 2nd Class (L.G. 31092 d/1-1-19.)

CERTIFIED CORRECT
FROM RECORDS

(W.E.L. Coleman), Lt.-Col.,
Officer i/c Records,
for Adjutant-General.

CANADIAN ACTIVE SERVICE FORCE

CERTIFICATE OF SERVICE

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify THAT (Rank) Matron Personal Number XXXXX

(Name in Full) Hollis Josephine XXXXX

was appointed to Commissioned Rank

in Royal Canadian Army Medical Corps

CANADIAN ACTIVE SERVICE FORCE on the Twenty-sixth day

of February 1941

SERVED IN CANADA, with the Royal Canadian Army Medical

Corps

and was STRUCK OFF THE STRENGTH on the Fifteenth day

of November 1941 by reason of having been immediately

appointed to the Royal Canadian Air Force Special Reserve

Dated at Ottawa this Twenty-eighth day

of April 1941.

(W.E.L. Coleman), Lt.-Col.

Officer i/c Records, for Adjutant-General.

M.F.M. 8
2M-9-40 (6915)
H.Q. 1772-39-1654

48

1.—That discharge certificate must be carried when wearing uniform;

2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing; and

3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

H.Q. 392-5-4

M.D. 8

ACTIVE MILITIA OF CANADA

READ INSTRUCTIONS ON BACK

†Recommendation for { ~~Appointment to~~ / ~~Promotion in~~ / ~~Transfer to~~ } * Reserve General List { Squadron, Battery or Company } * Royal Canadian Army Medical Corps Regiment

Headquarters at Ottawa Province of Ontario. Date Feb. 10th 1940

1 Present Rank	2 (The whole name in full, Surname last) (IN BLOCK CAPITALS)	3 Profession or Occupation	4 Residence and Post Office Address IN FULL	5 Native Country (If born abroad state if British Subject)	6 Date of Birth	7 Married or Single	8 Military Qualification: Qualified for rank of	9 Military Qualification: Branch of Service Number and Date of Certificate	10 Rank for which Recommended	11 Appointment to date from	12 How Vacancy was caused
Retired List	Nellie Josephine Enright	R.N.	1230 Bishop St. Montreal	Canada	Septig 1884	Single	Nursing Sister	R.C.A.M.C.	Matron	Feb. 10th, 1940	

13 Particulars of Education	Colleges or Schools Attended	DATES From	DATES To	Nature of Course	Degrees or Educational Certificates Obtained
	Royal Victoria Hosp. Sch. of Nurses	1906	1909.	Nursing.	R.N. Prov. of Quebec.
		Head Nurse Roosevelt Hosp. N.Y. Anaesthetic	1921 - 1939.		

14 Particulars of active service. (See instructions on reverse side of Form).		MEDALS AND DECORATIONS
	France + Belgium 1915 - 1919	R.R.C. 1915 - 9. War + Jubilee Medals.

15

I certify that I am a British Subject and that the above particulars of myself are correct.

I am willing to accept this appointment.

Nellie Enright
(Signature of Appointee)

Date February 10th, 1940.

{Signature of O. C. / Sqn. Bty. or Coy.} .....

Date .....

{Signature of / O. C. Regt.} .....

Date .....

Recommended and Forwarded.

A.T. Goodeve
Col., D.G.M.S.
~~District Officer Commanding~~
Military District No. .....

Place Ottawa, Ontario.

Date February 10th, 1940

This space for use at National Defence Headquarters only

Extract No. 5

Date .....

Canada Gazette No. .....

Date .....

1940

(Medical Certificate on reverse side must be completed)

M. F. B. 287
10M—5-36
H.Q. 1772-39-49

INSTRUCTIONS

READ THE INSTRUCTIONS CAREFULLY

†*Strike out the term not applicable. The Squadron, Battery, Company or similar formation to which the appointee is to be posted, transferred, etc., should be shown in all cases where units of the Regiment or Brigade, etc., are not centralized.

Under appropriate Columns information in accordance with the following must be inserted.

COLUMN No. 1—Whether holding any rank in the Canadian Militia, the Military or Air Forces of the British Empire. If so, rank, unit and force to be shown.

No. 2—Christian name (or names) and surname to be clearly inserted in full (surname last), particular attention to be given to correct spelling.

No. 3—The actual profession or occupation to be stated.

No. 5—If a naturalized British subject, how naturalization was obtained to be stated.

No. 6—Accuracy is essential as to the day, month and year of birth; verification may be necessary at a later date.

Nos. 8 and 9—All qualifications to be inserted.

No. 10—If a provisional or supernumerary appointment, it must always be so stated.

No. 11—Except under very special circumstances, appointments will not be antedated prior to the date of recommendation. If an antedate is recommended the reason therefor must accompany this Form.

No. 12—How vacancy was caused must be given, i.e., vice "————" promoted, transferred or retired as the case may be. "To complete establishment" is not correct after the establishment has once been completed.

No. 14—Particulars of active service. To include information as to actual theatre of war in which services were performed, with dates.

No. 15—The person recommended must sign his name, showing that he consents to the appointment or promotion.

No. 16—Medical Certificate to be completed in compliance with paragraph 126 K.R. (Canada), 1926.

---

a—In all instances this recommendation must be sent direct by the Squadron, Battery or Company Commander to the Officer Commanding the Regiment for his recommendation to the Officer Commanding Division or District.

b—In all instances "Transfer Receipt" of Stores must accompany the recommendation for promotion, or the resignation of an Officer Commanding a unit.

c—For full instructions see "The King's Regulations and Orders for the Canadian Militia, 1926".

MEDICAL CERTIFICATE

CERTIFIED that the Candidate has been medically examined in accordance with instructions laid down in Appendix No. 6, Regulations for the Canadian Medical Service, 1923, and has been found fit for Category ..... "B"

Date 9-7-40

A. Gladwell, Capt. R.C.A.M.C.
Signature of Medical Officer

DEPT
MILITIA & DEFENCE
RECEIVED
H.Q. 392-5-4
CANADA

correct address
obtained.

106 W. 61 St.
New York. Oct: 28/14.

Secy. Militia Council
Dear Sir

Enclosed please find present address. If calling nurses for duty with second Contingent I will be ready to go at any time.

Sincerely
Nellie J. Enright.

Nurse Comright - 392-5-41

Visited Army no status

DEPT.
NATIONAL DEFENCE
SEP -8 1939
~~H.Q. 54-27-2-1~~
CANADA

Montreal Sept. 7/39

Dept: National Defence.
Medical Service.
Ottawa.

Dear Sirs

I wish to offer my service being an Army Nursing Sister from April 1915 to May 1919. I gave Anaesthetics in 17

France during the war & on my return in the Military Hospital, 'Prince of Wales' Montreal & 'Ste Anne de Bellevue' also in the 'Royal Victoria Hospital' Montreal, from 1921 to 1939.

I offer my service in Anaesthetics or Nursing Service.

Yours Sincerely.

Nellie J Enright.

Royal Victoria Hospital.

Montreal.

Que.

16

...M.

H.Q. 392-5-4.

4 D. 9-1-334.

February 5th, 1915.

From-

The Adjutant-General,
Canadian Militia.

To-

The O. C. 4th Division,
Montreal, P.Q.

Nursing Sister Nellie Josephine Enright
A.M.C.

Sir:-

I have the honour, by direction, to return herewith your recommendation dated the 1st instant, for the appointment of Miss Nellie Josephine Enright as Nursing Sister in the Army Medical Corps, and to point out that this lady has already been gazetted in General Order 143 of 1914, in accordance with your recommendation dated the 13th August 1914 under 3 D. 11-E-5.

I have the honour to be,

Sir,

Your obedient servant.

Major, A.A.G.,

for Acting Adjutant-General.

4

H. Q. _____

392-5-4

ACTIVE MILITIA OF CANADA.

Recommendation for Appointment or Promotion Canadian Militia {SQUADRON, BATTERY, or COMPANY} Army Medical Corps 5 *Regiment*

Headquarters at Ottawa *Province of* Ontario *Date* August 10th 1914

1 Present Rank.	2 (The whole Name in full, Surname last.) (IN BLOCK CAPITALS)	3 Profession or Occupation.	4 Residence and Post Office Address IN FULL	5 Native Country (If born abroad state if British Subject).	6 Date of Birth.	7 State of Health.	8 MILITARY QUALIFICATIONS. Qualified for rank of	9 Branch of Service Number and Date of Certificate	10 Rank for which Recommend'd	11 Appointment to date from	12 How Vacancy was caused.
Nil	Nellie Josephine Enright	Graduate Nurse	520 Mg[illegible] Ottawa	Canada	Sept 14 1884	Good			Nursing Sister	Aug 10th 1914	Supernumerary to Establishment.

I am willing to accept this appointment.

Nellie Josephine Enright
(Signature of Appointee.)

Date Aug 10th 1914

(1)

(Signature of Captain) _____

I certify that Miss N. J. Enright is a graduate of the Royal Victoria Hospital Montreal.

Date Recommended

(2)

{Signature of O. C. Regt.} C. W. Belton Lt.-Col. A.D.M.S. 3rd Div

Date Aug 18th 1914

Recommended and Forwarded.

L. W. Thompson Colonel.
Officer Commanding
Division or M. D.

Place Kingston Ont.

Date 13-8-14

GAZETTE No. 44
AUG 24 1914
DATE.....

THIS SPACE FOR USE AT MILITIA HEADQUARTERS ONLY.

M., Form B. 287
10m.—10-13.
H. Q. 1772-39-49.

READ INSTRUCTIONS ON BACK.

THIRD MILITARY AREA
AUG 13 1914
3.D. 11-E-5

READ THE INSTRUCTIONS CAREFULLY.

GENERAL INSTRUCTIONS.

UNDER COLUMNS 1 TO 12 THE INFORMATION, AS FOLLOWS, MUST BE INSERTED.

No. 1.—Whether holding any rank in the Militia at present or not. If so, the rank and regiment to be inserted.

No. 2.—Christian name (or names) and surname to be clearly inserted in full (surname last), particular attention to be given to correct spelling.

No. 3.—The actual profession or occupation to be always stated.

No. 4.—Residence and post office address in full.

No. 5.—If a naturalized British subject, how naturalization was obtained to be stated.

No. 6.—Accuracy is essential as to month and year of birth, as verification may be necessary at a later date.

No. 7.—State of health.

Nos. 8 and 9.—All qualifications to be inserted.

No. 10.—If a provisional or supernumerary appointment, it must always be so stated.

No. 11.—Except under very special circumstances, appointments will not be antedated prior to the date of recommendation. If an antedate is recommended the reason therefor must accompany this Form.

No. 12.—How vacancy was caused must be given, i.e., vice "....." promoted, transferred or retired, as the case may be.

"To complete establishment" is not correct after the establishment has once been completed.

NOTES.

a.—The person recommended must sign his name, showing that he consents to the appointment or promotion.

b.—In all instances this recommendation must be sent direct by the Captain to the Officer Commanding the Regiment, for his recommendation to the Officer Commanding Division or District.

c.—In all instances "Transfer Receipt" of Stores must accompany the recommendation for promotion, or the resignation of an Officer Commanding a unit.

d.—For full instructions see "The King's Regulations and Orders for the Militia of Canada, 1910."

e.—In cases of appointment, &c., in Rural Corps, the Squadron, Battery or Company must be given.

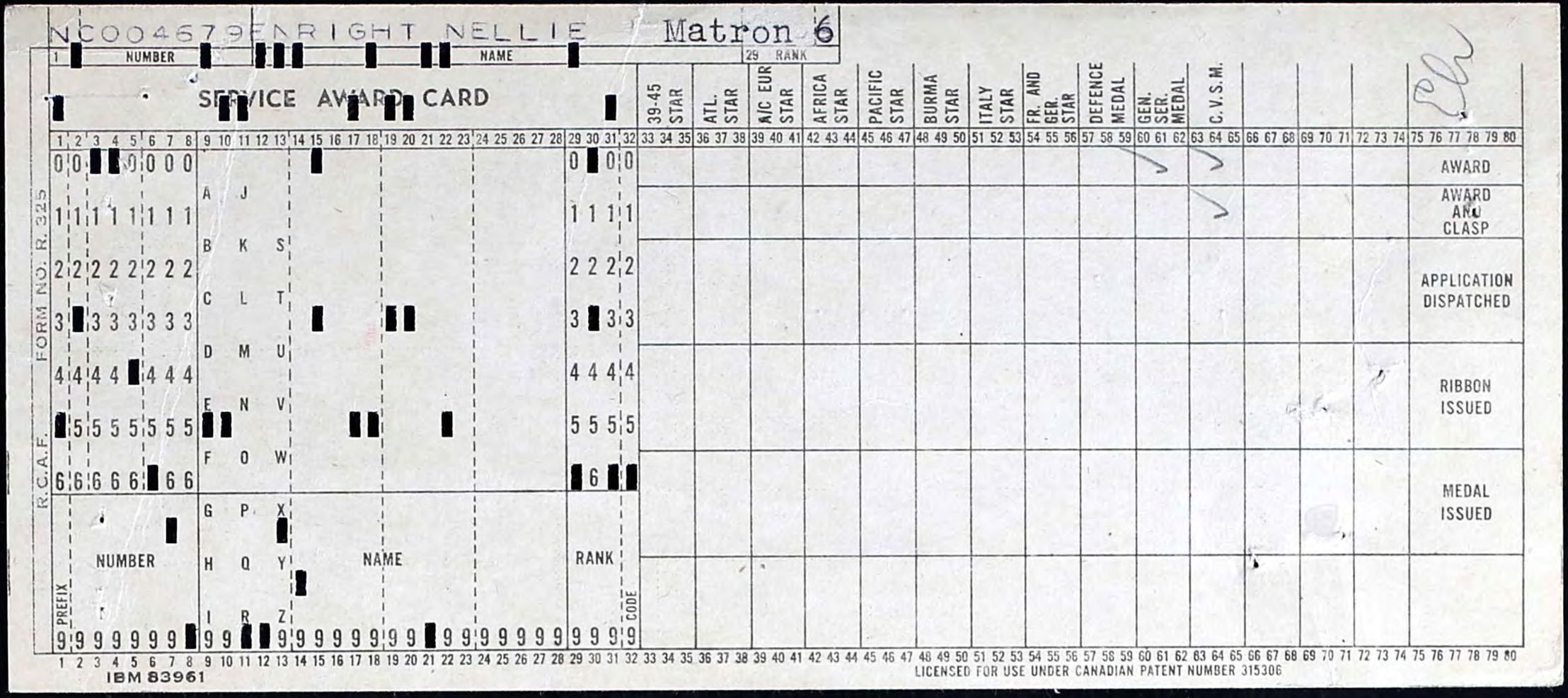
MEDICAL CERTIFICATE

CERTIFIED that the Candidate has been medically examined in accordance with the instructions laid down in Appendix No. 6, Regulations for the Canadian Medical Service, 1910, and has been found*.....

Date..... 10 Dec 1914

.....

Signature of Medical Officer.


NC004679 ENRIGHT NELLIE Matron 6
1 NUMBER
NAME
29 RANK
SERVICE AWARD CARD
R.C.A.F. FORM NO. R. 325
NUMBER
NAME
RANK
PREFIX
CODE
39-45 STAR
ATL. STAR
A/C EUR STAR
AFRICA STAR
PACIFIC STAR
BURMA STAR
ITALY STAR
FR. AND GER. STAR
DEFENCE MEDAL
GEN. SER. MEDAL
C.V.S.M.
AWARD
AWARD AND CLASP
APPLICATION DISPATCHED
RIBBON ISSUED
MEDAL ISSUED
IBM 83961
LICENSED FOR USE UNDER CANADIAN PATENT NUMBER 315306

Died 23-4-47 Post disch death

MEMORIAL BAR
DATE DESP
REGN. NO 1646

Mrs. E.J. McCluen (Sister)
714 Collier Drive,
San Leandro, California, U.S.A.

13 Mar 51

23 Apr 47 Post disch death

AWARDS—CANADIAN ARMY (ACTIVE)

M

SURNAME (IN BLOCK LETTERS) / CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT
ENRIGHT, Nellie Josephine		Matron	FILE No. 392-5-4

WAR SERVICE BADGE (CLASS) No.

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
War Medal 39-45 Trans.	to R.C.A.F. C 4679
	6008 16-3-51

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

REM. RAND LTD. 100M-9-46 (9565) H.Q. 1772-45-8

KARDEX SYSTEMS DIV. CAT. NO. K. 15332*

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS PERSON ENTITLED TO ADDRESS	(1)
(2) MEMORIAL CROSS WIDOW ADDRESS	(2)
(3) MEMORIAL CROSS MOTHER ADDRESS	(3)

K. 15332*

IN REPLY PLEASE QUOTE

FILE No. C4679

(1)

ROYAL CANADIAN AIR FORCE

18th February 1943

Personal and Confidential

Air Marshall L.F. Breadner, D.S.C.
Chief of Air Staff
R.C.A.F.
OTTAWA, Ontario

Dear Air Marshall Breadner:

(1) DMP

Please email your draft CAS' reply. P.D. Cummyn AM 16.2.43

EXECUTIVE ASSISTANT TO CHIEF OF THE AIR STAFF

I have just been retired from my position as Matron of R.C.A.F. Hospitals owing to age, having been the only Matron appointed so far, as you are no doubt aware.

It was with deep regret that I terminated my association with the R.C.A.F. and I cherish none but the pleasantest thoughts of my connection with that distinguished body, with whom it was my privilege to serve for almost three years.

During the last war I saw service Overseas for four years with the R.C.A.M.C., after which I became attached to the Royal Victoria Hospital in Montreal.

Action Note.

This folio was found to have been placed on "Open" file - At time both files were being passed to D Mn. for review and R.A.F.

2. It was transferred to "C" file and immediate action will be taken to reply to it - when CAS' personal "Thank you" letter is signed and file returned.

I should be most happy to continue my association with the R.C.A.F. in some manner, and if this could be arranged would very much like to be made an Honorary Member of the Service and to be extended the permission to wear my Air Force uniform at Service functions.

May I take this occasion to enclose copy of letter which informed me of my retirement, and at the same time assure you of my interest in all R.C.A.F. activities.

Yours sincerely,

Nellie J. Enright R.R.C.

Address -
1230 Bishop Street
Montreal, Canada

R.C.A.F. C. 32
2500M-1-41 (9122)
H.Q. 1062/9-36

228B

64

RECEIVED
FEB 26 1943
A. M. P.

27th April, 1943.

Miss N. J. Enright,
91 Gilmour Street,
Ottawa, Ontario.

Dear Madam:

I regret that arbitrary age regulations have necessitated the termination of your services with the Royal Canadian Air Force, which is proud to have had amongst its Officer personnel one with your enviable record of service.

Your faithfulness, efficiency, industry and excellent administration as a Matron have been of great value to the Royal Canadian Air Force.

The retirement of officers of your character and capabilities results in a serious loss to the Service.

The release from your heavy service responsibilities will, I hope, afford you uninterrupted opportunity to enjoy the leisure and relaxation to which your unqualified devotion to your profession entitles you.

I fully appreciate your willingness and desire to continue your associations with the Royal Canadian Air Force and I assure you that your application for appointment to Honourary Rank has received every consideration.

In the past, Honourary Rank has been granted to those from whom the Royal Canadian Air Force expects service from time to time. Inasmuch as it is not anticipated that the Service will be required to avail itself of your patriotic offer to render part-time duties, I regret that the granting of an Honourary Rank would contravene present policy.

"M"
Group Captain
D.P.C.
22-4-43

L. S. B.

(L. S. Breadner)
Air Marshal,
Chief of the Air Staff.

S/L A. S. MacKinnon:FWR
CC: C.A.S.

88 F

RECEIVED
APR 28 1943
A. M. P.

D.P.R.

1. It is understood that Miss Enright's posting away from Newfoundland became effective on 9/2/42. The remarks relative to Miss Enright's too strict supervision, over the nursing sisters do not apply only to Newfoundland. She causes a certain amount of friction wherever she goes. From hearsay it would appear that she has an irritating habit of stressing very minor details to the point of upsetting what should be an even atmosphere amongst the nursing staff. Strict supervision, however, can always act in two directions.

(R. W. Ryan)
Air Commodore
Director of Medical Services (Air)

C4679 AMP (DMS/A)
February 13, 1942

D.M.S.(Air)
noted. Posted to
R.C.A.F. Station - Dartmouth.
Eff. 9-2-42. For your info. & pa. plse.
J. Clare - Flo
for A.M.D. DRR.
17-2-42

PAY LIST # SIX

M. F. D. 930 A
350M-8-40 (6594-5)
H.Q. 1772-39-1548

C.A.S.F. & R.C.A.F.

CANADA

LAST PAY CERTIFICATE

Regtl. No..... Rank and Name MATRON ENRIGHT

of THE T.T.S. Company, etc., ROYAL CANADIAN ARMY MEDICAL CORPS. Regiment, etc., on

(Transfer, Posting or Discharge) ST. THOMAS ONT. to RETIREMENT on 15-11-40. 194
(Unit and Station)

Reason for discharge IMMEDIATE APPOINTMENT IN R.C.A.F. Authority: DO 25 d/16-4-41.

On TRANSFER OF OFFICER or WARRANT OFFICER, Class I

Outfit alowance of $ UNKNOWN has been paid by the Treasury Officer, Military District No..... or..... Air Command.

REMARKS: NIL

State (1) Date of appointment or enlistment.....

(2) If individual has dependents eligible for Dependents Allowance, has application been submitted? NO

(3) Has assignment of pay been made? NO If so, amount NIL effective date NA

(4) In the case of Officers in receipt of a Service (P. F.) Pension state monthly deduction $.....

The folowing is a statement of the account of the above named from 1-11-40 to 15-11-40. 194..... the inclusive date of transfer, posting or discharge.

DR. PARTICULARS		DR. AMOUNT	CR. PARTICULARS	CR. AMOUNT
		105 00		
Balance Dr. from last account	Nov.	111 72	Balance Cr. from last account	
		105 00		
First Monthly Payment	Dec.	118 94	Regimental Pay 15 days at $7.50	112 50
		105 00		
Casual Payments	Jan.	118 94	Trademen's Pay ..... days at $	
Payment on Transfer, Posting or Discharge			Additional Pay (Give particulars) ..... days at $	
		105 00		
Assigned Pay	Feb.	97 27		
		110 00	Allowances (Give particulars) .....days at $	
Regimental Charges	Mar.c	113 94		
Public Stoppages (Give particulars):	April	110 00	Reg. pay 16-11-40 to 31-3-41 136 days @ 7.50 = $1020.00 plus	
N.D. TAX	NOV.	8 28	April advance of $110.00 and	
"	DEC.	8 56	N. D. Tax for April 7.40	1137 40
"	JAN.	8 56		
"	FEB.	7 73		
"	MAR.	8 56		
"	APR.	7 40		
To Balance Cr. (To be paid by new unit)			By Balance Dr. (To be deducted by new unit)	
Total		$1249 90	Total	$1249 90

I certify that the above is a true and correct statement of the account of the above named on transfer, posting or discharge.

ST. THOMAS ONT.
(Place)

7-5-41.
(Date)

A. R. Brown F/OFF.
FOR COMMANDING OFFICER XXXXXXXX Paymaster.
THE T.T.S. RCAF ST. THOMAS ONT.

CANADA

IN REPLY PLEASE QUOTE

NO.....

Department of National Defence

Militia Service

WJAB

Montreal, P.Q. 14th., February 19 40.

TO CERTIFY that Miss N.J. Enright was employed on the staff of the Prince of Wales Hospital operated by the Invalided Soldier's Commission from September 1919 to the summer of 1920 and at the Ste. Anne's Hospital under the Department of Soldiers' Civil Re-Establishment from the summer of 1920 to October 1921.

During this period the undersigned served as an Administrative Officer of these departments and is in a position to state with confidence that her services with these departments as an Anaesthetist were extremely satisfactory.

(A.E. Lundon) Lt.-Col., R.C.A.M.C.,
D.M.O., M.D. No. 4.

Nat. Def. B-440

ROYAL CANADIAN AIR FORCE

CERTIFICATE OF SERVICE

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify THAT (Rank) Temporary Flight Lieutenant Number C4679

(Name in Full) NELLIE JOSEPHINE ENRIGHT, RRC

was appointed to Commissioned Rank

in the Special Reserve, Non-Flying List, Nur. Serv. and Medical (Nur. Serv.) Branches of the

ROYAL CANADIAN AIR FORCE on the SIXTEENTH day

of NOVEMBER 1940.

SERVED IN CANADA at T.T.S., St Thomas 16-11-40

R.C.A.F. Station, Gander 18-8-41

R.C.A.F. Station, Dartmouth 9-2-42

No.6 M.D., Toronto 1-12-42

R.C.A.F.Station, Dartmouth 20-12-42

and was STRUCK OFF STRENGTH on the TWENTY-FIRST day

of FEBRUARY 1943 by reason of Retirement

Dated at Ottawa this NINETEENTH day

of FEBRUARY 1943

W G Brannon S/L

Officer i/c Records
for Chief of Air Staff

R.C.A.F.—R. 188A
5M—8-41 (691)
H.Q. 885—R-188A

Photograph of

Matron N. J. Enright

Taken on Jan: 10, 1941

Certified by:

(W.S. Lighthall) Flight Lieutenant,

R.C.A.F. Technical Training School, St.Thomas.

P.T.O.

Association of Registered Nurses of the Province of Quebec

1940

2
4679

This is to certify that

Miss Nellie J. Enright

has met the requirements of the law, and is entitled to this Certificate of Registration which expires on June 1st, 1941.

Reg. No 613

E FRANCES UPTON, R.N.,
Registrar.

I, Helen Enright, do solemnly and sincerely declare that I am a natural-born British subject, and that I was born at . Ottawa . Ont. . . . on Sept. 14. 1882. Furthermore, I am desirous of changing my name, and intend and desire to be known henceforth as Nellie Josephine Enright and I make this solemn declaration, conscientiously believing the same to be true, and by virtue of the provision of an Act made and passed in the sixth year of the reign of King William the Fourth, Chap. 62, entitled "The Statutory Declarations Act, 1835."

. . . Nellie J. Enright . . .

Declared before me at St. Thomas, Ontario this twenty-eighth day of February, nineteen hundred and forty-one.

. . . . . .

(C. N. McLoughlin) Squadron Leader.
Commissioner &c.

BIRTH AND BAPTISM RECORD

2
4679

Name Recorded ..... Helen Enright,

Father's Name ..... John Enright,

Mother's Maiden Name ..... Alice McCorley

Place of Birth ..... Ottawa, Ont.

Date of Birth ..... September 14, 1882

Date of Baptism ..... September 24, 1882

God-Father's Name ..... James Mullen,

God-Mother's Name ..... Sarah Slattery,

Name of Priest Baptizing ..... M. J. Whelan.

I, the undersigned Priest, attached to St. Patrick's Church, Ottawa, Ontario, Canada, certify the foregoing Birth and Baptism record to be a correct transcript of particulars taken from the registers of the said parish.

Ottawa, Dec. 7 1920

Canon L. O. Trudel P.P.

File No.....

M E M O R A N D U M

December 22nd, 1942.

S.P.S.O.

C4679 Matron N. Enright
Retirement

1. The above named Officer has consistently carried out supervisory work of high calibre. The P.M.O. considers she is to be commended on her work while in this Command.

2. The institution of Women's Division hospital assistants has now thrown much greater responsibility on our Sister in charge of our larger hospitals. These girls (W.D's) require much more supervision and a considerable amount of teaching. This requires much greater physical activities on the part of the nurse in charge of the hospital. From personal observation the P.M.O. feels that Matron Enright has now reached an age where this is not within her physical powers. Following at least four conversations with her in the past two months, I feel that in a few more months her physical and mental health will suffer if she continues to undergo the strain of service. Consequently, I would recommend that the retirement proceedings be instituted while her services are still so highly considered. The retirement would then be carried out in such a way that Matron Enright would receive all honour and credit which is due her for her faithful service.

3. For your consideration.

(A.A.G.Corbet) Wing Commander,
P.M.O.
Eastern Air Command, R.C.A.F.

POSTING.

CONFIDENTIAL No C-4679 Name N.T. Enright Rank F/O Trade N.S.

CONFIDENTIAL PERSONAL ASSESSMENT

77

For A.F.H.Q. use only

INSTRUCTIONS

Read the statements under each heading carefully. Consider the person being assessed in relation to each "statement" enumerated below. When possible compare him with others you can call to mind who represent outstanding examples of the traits described. Under each heading place a cross in the brackets after he one statement which best describes the person being assessed. This form will prove only as dependable as the assessment is thorough.

Include PART I in all reports.
Include PART II for Officers and N.C.O.'s other than Aircrew under training.
When assessment is on a member of the Women's Division the term "he" will be read as "she", et

RCAF R.211
100M-4-42
H.Q. 885-R-211

PART I

(Include in all reports)

1. APPEARANCE & BEARING

Note - this applies not only on Parade. Observe in mess, at games, off duty.

Careless - creates an unfavourable impression.....( )
Some room for improvement.....( )
Neat - meets all ordinary requirements.....(x)
Excellent appearance - stands out among fellows.....( )

2. MENTAL ALERTNESS

Consider how readily he grasps a situation and is able to understand what is required.

Slow and confused in understanding.....( )
Requires more than ordinary explanation.....( )
No particular difficulty in understanding.....( )
Exceptionally quick to understand what is required..(x)

3. POWER OF EXPRESSION

Some men are able to speak in such a way as to hold attention and communicate ideas clearly and readily. They say what they mean simply and directly. At the other extreme is the man whose speech is slow, hesitating and ineffectual.

Difficult to follow - does not make himself clear...( )
Rather hesitant and inarticulate.....( )
States what he means clearly.....(x)
Forceful - gets ideas over.....( )

4. SELF-CONFIDENCE

Consider the extent to which he displays confidence in his ability to carry things through.

Timid, self-conscious, easily subdued.....( )
Uncertain of himself - lacks force, tries to bluff..( )
Sufficient self assurance - does not back down too easily.....(x)
Appears so competent that others have confidence in him.....( )

5. INITIATIVE

Consider the extent to which he does the right thing without being told.

Has to be told what to do - does not think for himself.....( )
Routine worker - not much initiative.....( )
Displays initiative when the course is clear.....(x)
Has excellent ideas and does not hesitate to present them.....( )

6. ENERGY & PERSISTENCE

Some put very little effort into their work. Others may work in tremendous spurts and then wilt - ideal has well controlled energy and perseverance.

Indifferent - half hearted; loses interest.....( )
Does only what is required of him.....( )
Active. Applies himself diligently.....( )
Vigorous, enthusiastic in all he undertakes.....(x)

7. ACCURACY & RELIABILITY

Consider how dependable he is. Watch for the "buck passer", the one with the ready excuse.

Too irresponsible to be entrusted with important duties.....( )
Makes some mistakes - needs to be checked up occasionally.....( )
Can depend upon him for the performance of all ordinary duties.....(x)
Can rely upon him to successfully complete the most difficult jobs.....( )

8. CO-OPERATION

Consider how well he works with a group. Does he give whole-hearted support to a common cause.

Inclined to create trouble.....( )
Rarely puts himself out to help others.....( )
Co-operative - willing to help others.....(x)
Definitely promotes harmony and good will among his associates.....( )

9. INTEREST IN STATION ACTIVITIES

Participation or interest in sports, social, recreational and other Station activities.

Indifferent - keeps to himself.....( )
Has very little interest.....( )
Usually participates in Station activities.....(x)
Active in promoting Station activities.....( )

10. LEADERSHIP

Consider the extent to which others have confidence in him and follow his direction.

Does not carry much weight with his fellows.....( )
Occasionally takes the lead.....( )
Able to provide good leadership.....(x)
Skilful in directing others - inspires confidence and commands respect.....( )

If assessment is on Aircrew under training, this side only will be completed and Assessing Officer will sign below.

This assessment is made from my personal knowledge of the individual concerned.

RCAF STN. Dartmouth N.S. ....
Station *Date* *Signature and Rank of Assessing Officer*

If other than Aircrew under training, balance of assessment is to be completed on the reverse side of this form and Assessing Officer will sign at the end of PART II only.

PART II

(To be completed in addition to PART I for officers and N.C.O.'s other than Aircrew under training)

1. SERVICE KNOWLEDGE

Does he show steady improvement and try to fit himself for greater responsibilities?

Satisfied with present knowledge.....( )
Improves his knowledge if not too much effort.....( )
Searches for ways to improve his service knowledge....( )
Surpasses others in keeping up to date with his Service knowledge.....(x)

2. TRADE PROFICIENCY

Consider how proficient he is in the discharge of his duties.

Inferior – poorly qualified – below standard.....( )
Moderate – needs more training and experience.....( )
Satisfactory – does his work as well as the average...( )
Superior – knows his work and does it well.....(x)
Exceptional – stands out unmistakably in capacity and efficiency in performance of his duties.....( )

3. ADMINISTRATIVE ABILITY

Consider the extent to which he displays organizing and supervising ability.

Confused in carrying out his work – busy without accomplishment.....( )
Does not organize things very well.....( )
Organizes effectively and gets things done.....(x)
Outstanding organizer – produces excellent results promptly.....( )

4. LOYALTY

Consider the extent to which he can be depended upon for his loyal support on all occasions.

Cannot bank upon him for whole-hearted support.....( )
Usually can count upon his loyalty.....( )
Can definitely depend upon his loyalty.....(x)
Always strengthens the hand of those under whom he serves.....( )

State any special qualifications for employment other than that on which engaged:

Due to matrons age her services would be found better value in a teaching capacity such as in School of aviation nursing or teaching nursing procedure and service necessities as given to woman's division Hospital assistants.

Any special remarks or observations not covered by this assessment:

Has a great tendency to "fuss". Causes a great deal of ill feeling and dissatisfaction among nurses and woman's division due to a rather overbearing and nagging attitude. It is therefore very difficult to "keep place".

One cannot but state that matron seems to be slipping as regards hospital administration. At present her viewpoint is that the molehill obscures the mountain.

This assessment is made from my personal knowledge of the individual concerned.

RCAF Stn. Dartmouth. N.S. — 28/11/42 — W/C
Station — *Date* — *Signature and Rank of Assessing Officer*

COMMANDING OFFICER'S STATEMENT

When assessing those other than Aircrew under training, in addition to the above assessment the following is to be completed by the Commanding Officer:

If not entirely in accord with the above assessment, which may have been made by another officer, the Commanding Officer is to submit an additional complete assessment.

Where more than one assessment on a man is being submitted from a station or unit, this section is to be completed on one only.

1. I have recently drawn to this man's attention the weaknesses which have been indicated on this assessment and I have made the following suggestions to him for his improvement:

No

3. Having thoroughly examined the Station Confidential File, Record Card and Conduct Sheets, the following "logging" and Conduct Sheet entries are noted as having been recorded within the last twelve months. (If there is no entry – write,– "none".)

NONE

4. *If an airman, N.C.O. or warrant officer, do you consider that his personal qualities and the value of his services fully justify appointment to commissioned rank?*

N.A.

2. My recommendation for his promotion is as follows:

Accelerated – Ordinary – Delayed – Not Recommended
(Encircle your recommendation)

5. He is qualified in drill up to and including.....

RCAF Stn., Dartmouth N.S. — 30.11.42 — (B.D.Hobbs) Group Captain.
Station — *Date* — *Signature of Commanding Officer*

Remarks or Recommendations by Air Officer Commanding (If Required):

Command — *Date* — *Signature of Air Officer Commanding*

R.C.A.F. R. 153
20M—7-41 (459)
H.Q. 1062-3-107

In Posting

SHORT CONFIDENTIAL REPORT

OFFICERS AND WARRANT OFFICERS

(1) R.C.A.F. Gander (Station) March 20th. (Date) 1942 Air Force No. C4679

Enright (Surname) Nursing Sister (Rank) N.J. (Christian Names in full)

Matron (Duties on which engaged) ..... (Rank allowed on establishment)

(2) NUMERICAL INDICATION OF EFFICIENCY
(See Para. 1(C) A.F.A.O.—A. 42/3)

PROFESSIONAL

1 2 3 4 (5) 6 7

ALL OTHER

1 2 3 4 (5) 6 7

Reporting Officers should bear in mind that there should be as many officers in the Service below the average (4), in both categories, as there are above it. (A ring should be placed around the applicable number in each category.)

(3) Whether recommended for promotion	Accelerated	Ordinary	Delayed
		yes.	

Whether recommended for any special employment other than that on which engaged.

.....

(OVER)

no

This Officer or W.O. reported here Aug. 1. 1941.
(Date)

(4) REMARKS

A most indefatigable worker. Has greatly improved internal management of hospital. She is very keen on disciplinary measures to nurses and orderlies. A very capable efficient matron. Lt Heggelund W/C
Signature o/c Unit Sno.

(5) REMARKS

This Hospital under Matron Enright was a "show place" at Gander I cannot speak too highly of Matron Enright's ability & devotion to duty.

G H Fox W/C
Signature Superior Reporting Officer

This form has been reduced to a minimum and it is essential that all sections be executed in full.

(To be completed in Ink or Indelible Pencil)

R.C.A.F. T.20

ROYAL CANADIAN AIR FORCE

REPORT ON COURSE OF AVIATION - NURSING

AT: No. 6 "M" DEPOT, R.C.A.F., Toronto, Ontario Course No. 1

No. C4679 Rank Flt.Lt. Name Enright, M.T. Trade Nursing Sister

Course Commenced 4-12-42 Course Ended 17-12-42

EXAMINATION RESULTS

SUBJECTS EXAMINED	MAXIMUM RESULTS	MARKS OBTAINED	PASSED OR FAILED
AVIATION NURSING	600	260	Failed
R.C.A.F. ADMINISTRATION AND ORGANIZATION	200	82	"
SUB TOTAL	800	342	"
OTHER ASSESSMENTS			
PERSONAL ASSESSMENTS (APPRAISAL SHEET)	200	148	Passed
TOTAL	1000	490	Failed

Noted 1 Feb 43
M.O. i/c

SUMMARY

AVERAGE PERCENTAGE OF MARKS 49.0% PASSED OR FAILED Failed

SIZE OF CLASS 34 ORDER OF MERIT 32 COURSE ASSESSMENT Below Average

GENERAL REMARKS

Interested in the Course. Co-operative and has initiative.

DATE 17-12-42

E. H. Kendall Section Officer
for Commanding Officer,
No. 6 "M" Depot, R.C.A.F.

Form No. 1

Register No. [redacted] 2621

Nominal Roll No. [redacted]

H.Q. File No. 392.5.4

TO: P.M. [redacted]

CANADIAN ARMY (ACTIVE)
COMPUTATION OF SERVICE
WAR SERVICE GRANT

Regt. No.	Rank When S.O.S.	Surname	Christian Name in Full
	MATRON	ENRIGHT	NELLIE JOSEPHINE

Reason for termination of Service:

1st Enlistment To R.C.A.F. CARO ( )

2nd Enlistment CARO ( )

3rd Enlistment CARD ( )

TOTAL SERVICE

1st Enlistment	2nd Enlistment	3rd Enlistment
T.O.S. 26 Feb 40	T.O.S.	T.O.S.
S.O.S. 15 Nov 40 MD 1	S.O.S. MD	S.O.S. MD
Total Days 264	Total Days	Total Days

TOTAL SERVICE 264 DAYS

	Total Service	Less Non-qualifying Service	Net Service
WESTERN HEMISPHERE	264	nil	264
OVERSEAS SERVICE	nil	nil	nil
Totals	264		
Add non-qualifying Service			
TOTAL SERVICE			264

EMBARKATION DETAILS:

1. Date S.O.S. Overseas

2. Date S.O.S. Overseas

REMARKS:

Computer's Signature B.M. Liniston

Checker's Signature D Jenner

Date Computed 8 Dec 44

Certified that entitlement to benefits under the War Service Grants Act, 1944, has been established, based on service shown herein.

(C.L. Laurin) Colonel,
Director of Records.

ROYAL CANADIAN AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

NAME HELLIE J. ENRIGHT (Christian Names) (Surname)

ADDRESS 1230 BISHOP ST. MONTREAL QUE

Register No. _____

File No. 9139

Date 26 Jan 45

Service No. C4679

Final Rank or Rating F/LT.

Date of termination of O/S service N.A. Date of Discharge 21 Feb 43

	$	¢
A. TOTAL QUALIFYING SERVICE		
No. of days 1092/30 equal to 36 complete periods @ $7.50		270.00
B. QUALIFYING OVERSEAS SERVICE		
No. of days less ineligible days, equal to days @ 25¢ per day		
SUB TOTAL		270.00
C. SUPPLEMENT FOR OVERSEAS SERVICE		
Daily Rates at Discharge		
Pay $ 6.50		
Subsistence or Lodging and Provision Allowance $ 1.20		
Additional Pay $		
$		
Dependents' Allowance 1/30 of $ $		
TOTAL $ 8.20 x 7 = $		
No. of days 183 x $		
D. WAR SERVICE GRATUITY		270.00
E. Deductions Overpayment of Pay and allowances $		
Dependents' Allowance and assigned pay $		
Other deductions $		
F. AMOUNT PAYABLE (Payable in 2 monthly instalments of $135.00 ea.)		270.00
G. MONTHLY INSTALMENT NOT TO EXCEED Daily Rate of Pay and Allowances $ 8.20 x 30	$ 246.00	

Instalment Payable	1	2	3	4	5	6	7	8	9
AMOUNT	135.00	135.00							
CHEQUE NO.									
DATE									

Instalment Payable	10	11	12	13	14	15	16	17	18
AMOUNT									
CHEQUE NO.									
DATE									

Prepared By	Checked By

R.C.A.F. A-80
50M SETS 9-44 (4812)
H.Q. 885-A80

135.00 135.00

DEPARTMENT OF NATIONAL DEFENCE
NAVY ═══ ARMY ═══ AIR FORCE

AIR 6
FILE COPY

STATEMENT OF WAR SERVICE GRATUITY

Vol

2341

NAME Hollie J. (CHRISTIAN NAMES) Enright, (SURNAME)

ADDRESS 1230 Bishop St., Montreal, Que.

REGISTER NO. 9139
FILE NO. 26 Jan/45
DATE 64679
SERVICE NO. F/Lt.
FINAL RANK OR RATING 21 Feb/45
DATE OF DISCHARGE

DATE OF TERMINATION OF OVERSEAS SERVICE N/A

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 1095 / 30 EQUAL TO 36 COMPLETE PERIODS AT $7.50 — $ 270.00 ¢

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS [illegible] LESS [illegible] INELIGIBLE DAYS, EQUAL TO DAYS @ 25c. PER DAY
SEE PAR. 2 OVERLEAF FOR EXPLANATION

SUB TOTAL 270.00

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY	$		
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	$		
ADDITIONAL PAY	$		
	$		
	$		
DEPENDENTS' ALLOWANCE 1/30 OF $ _____	$		
TOTAL	$	X7 = $	
NO. OF DAYS _____ / 183		X$	

D. WAR SERVICE GRATUITY 270.00

E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES $
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $
OTHER DEDUCTIONS $

F. AMOUNT PAYABLE 270.00

(THIS AMOUNT IS PAYABLE IN 2 MONTHLY INSTALMENTS OF $ 135.00 EACH)

THE WAR SERVICE GRANTS ACT, 1944, PROVIDES FOR YOUR RE-ESTABLISHMENT CREDIT IN THE AMOUNT SHOWN IN SUB TOTAL OF A. & B. THIS CREDIT IS AVAILABLE TO YOU IN CERTAIN CIRCUMSTANCES. INQUIRY IN THIS CONNECTION SHOULD BE DIRECTED TO **THE DEPARTMENT OF VETERANS' AFFAIRS.**

SEE REVERSE SIDE FOR EXPLANATION OF ITEMS A, B & C

G. MONTHLY INSTALMENT NOT TO EXCEED DAILY RATE OF PAY AND ALLOWANCES $ 8.20 X30 $ 246.00

INSTALM. PAYABLE	1	2	3	4	5	6	7	8	9
AMOUNT	135.00	135.00							
CHEQUE No.									
DATE									

INSTALM. PAYABLE	10	11	12	13	14	15	16	17	18
AMOUNT									
CHEQUE No.									
DATE									

CERTIFICATE I CERTIFY THAT THE AMOUNT HAS BEEN CORRECTLY COMPUTED AND IS PAYABLE IN ACCORDANCE WITH THE TERMS OF THE WAR SERVICE GRANTS ACT, 1944 AND THE REGULATIONS ISSUED THEREUNDER.

PREPARED BY	CHECKED BY
[illegible]	[illegible]

TREASURY	
CHECKED BY	DATE

SERVICE REPRESENTATIVE

ΔTR

(Above this line is for Signals use only)

R.C.A.F. MESSAGE

R. C. A. F. S. 5
(REVISED-9-41)
25M PADS OF
100-9-41 (808)
H. Q. 1062-23-5

NO. OF GROUPS [redacted]

FILE 6-64679

ORIGINAL COPY FOR ACTION AND FILE

OFFICE DATE STAMP & SERIAL NUMBER

Air Force Headquarters 109 NOV 7 1941 SIGNAL OFFICE

AMP ✓
CR

TO* AT. HQ. OTTAWA

FROM* C.O. GANDER NFLD.

ORIGINATOR'S NUMBER	DATE		REFERENCE AND DATE
A.95 A.903	7/11	MY (1)	YOUR

(Use Double Space Typing)

SECRET AND PERSONAL.

SULLY FROM EDWARDS. IN MY OPINION MATRON ENRIGHT HAS DONE EVERYTHING POSSIBLE TO DEFEAT POLICY ALL NURSING SISTERS GOING INTO UNIFORM BY FIRST NOV. I DECLARED THAT EVERYBODY NOT IN UNIFORM BY FIRST NOV. WOULD BE RETIRED. I THINK MATRON ENRIGHT SHOULD be RETIRED AND WOULD APPRECIATE STEPS TO THIS END.

(2)

D.M.S.(Air)

1. May I have your comments and recommendations, please.

P.A. Cunyn
(J.A. Sully) PCH
Air Commodore,
A.M.P.

8-11-41

This message must be sent **AS WRITTEN** and may‡.....be sent by **W/T.** Signature	This message must be sent **IN CYPHER** and may‡.....be sent by **W/T.** Signature	Originator's Instructions* Degree of Priority*	TIME OF ORIGIN 1300G/7 G. M. T.

‡Originator to insert "NOT" if message is not to go by W/T over any part of the route. (Below this line is for Signals use only)

T.O.R.

SYSTEM IN	TIME IN	READER	SENDER	SYSTEM OUT	TIME OUT	READER	SENDER	SYSTEM OUT	TIME OUT	READER	SENDER
W/T		EF/AEP									

T.H.I. 1805G/7

*The Signal Department is responsible that these details are transposed to the appropriate portion of the message form and that all possibilty of compromising distinguishing signals, etc., by omitting to remove their signification from the address, etc., is avoided. Before delivery of the message these details are to be re-inserted in

Dept. of Veterans Affairs
War Service Records
MAR 13 1951
File No. 32
officer RCAF

DEPARTMENT OF VETERANS AFFAIRS
(War Service Records)

Service Number..C.4679.....File No....HQ C 4679 (R 3D)....

Name....ENRIGHT, Nellie J.....Ottawa....2nd March 1951.....

For the purpose of record and in the event of there being any Medals or Memorials available for distribution on account of the ex-~~serviceman~~ woman above-noted, it is necessary that the following information regarding the deceased and ~~his~~ her relatives be furnished. It is essential that the ages of any surviving children brothers, or sisters be shown.

Relatives required to account for	Name in full of relatives	Address in full	(If deceased give date of death)
Widower of ~~Widow of Serviceman~~			
Servicewoman Children of ~~Serviceman~~ woman and ages			
Father of deceased	J.C. Enright		1941.
Mother of deceased	Alice McCauley Enright		1909.
Brothers of deceased and ages	James J. Enright Albert E. Enright		1942. 1916.
Sisters of deceased and ages	Mrs. E. J. McClean. (Mary E. McClean) 60 yrs. Alice Enright Hughes	714 Collier Drive San Leandro, Calif.	1938.

If the ~~serviceman~~ woman was married, please state exact date and place of marriage.

If ~~he~~ she left a Will, it is essential that the same or a certified true copy be forwarded for examination and return.

DECLARATION

I HEREBY DECLARE that the above details are correct, that the particulars given in this statement are a true and complete statement of all the relatives that the deceased ever had in the degrees enquired for, and that I am the #.....of the deceased.

#Insert degree of relationship: for example:-"Widow", "Father", "Mother", "Brother", etc..

DATE March 15. 1951

Mrs. E. J. McClean.
(Signature of Applicant)

714 Collier Drive
(Address) San Leandro. Calif.

Please complete and return as soon as possible to: Director, War Service Records, (R3d), No.8 Temporary Building, OTTAWA, Ontario.

R.3D.161

H.Q. 400-E-1
(DMS/A)

M E M O R A N D U M
"Air Force"

Ottawa, March 17th, 1941.

D.A.F.M.

Nellie J. ENRIGHT R.R.C.

1. The appointment of the marginally named to the R.C.A.F. Medical Branch is recommended in the rank of Matron with seniority from 10-2-40.

2. This Matron is presently employed at No. 1 Technical Training School, St. Thomas.

(R.W. Ryan)
Group Captain,
Director of Medical Services R.C.A.F.

RWR:R

8

THE CANADIAN PENSION COMMISSION

MEMORANDUM

To....Deputy Minister,
Department of National Defence.
From....The Canadian Pension Commission.

OTTAWA, June 5th, 1947.

Referred to... DSM
JUN 12 1947
File No.... C4679

N/S, Matron N. J. Enright.
Ch&R.C.A.F.

ATTENTION - ~~Director of Records.~~
~~Canadian Agency,~~
~~Imperial War Graves Commission.~~

C.P.C. 600759.

The marginally named died

at Montreal, P.Q.

on April 23rd, 1947.

Cause of Death Carcinoma, left breast. Generalized skin and skeletal metastases.

In the opinion of the Commission,

death was related to military service.

Noted D.R. 4(B)

Next of Kin Mrs. E. J. McCluen (Sister),
714 Collier Drive,
San Leandro, Cal., U.S.A.

per M+Ord Card

Another deceased

VM 3/3/51

Died on strength

E. Lackey.

for
Canadian Pension Commission.

Copy - Dept. of National Defence (For Air).

M-38 10M-9-46 Req. 601

CANADA

DEPARTMENT OF VETERANS AFFAIRS

IN YOUR REPLY REFER TO FILE No. C4679

C4679

Daly Bldg.,
Ottawa,

MAY 16th., 1947.

OFFICER I/C OF RECORDS,
DEPARTMENT OF NATIONAL DEFENCE.

~~XXXX~~
~~XXXX~~
AIR FORCE

Name ENRIGHT N.J. Number ..... Rank MATRON...

Please be advised that the above named EX-MATRON

is reported to have died on AORIL 23rd., 1947

at Royal Victoria Hosp. Montreal.

Noted on Record
R3/RIB.

noted in CIB

Noted
J
R1

C.Y. STEELE,

CHIEF OF CENTRAL REGISTRY
DEPARTMENT OF VETERANS AFFAIRS.

P R.19666

D.V.A. 1—800M