

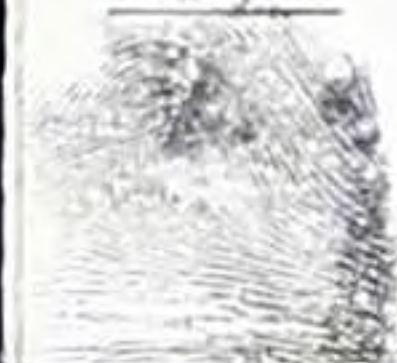
R87576
JEMMETT
JOSEPH

Do not remove documents from this folder. Prepared for digitization project. Ces documents seront numérisés. Ne pas les déplacer.

ROYAL CANADIAN AIR FORCE



Right Index
Fingerprint



Name Jemmett, Joseph R87576

Rank LAC RCAF

Age 25 Height 5 ft. 9 Weight 165

Hair Lt. Brown Eyes Blue ~~XXXX~~ Hair on face Light

Marks, scars, etc. One on little finger of right hand

Joseph Jemmett (Signature of holder)
W. Kennedy, G. (Signature of issuer)

Place No. 2 Wireless School Date 18-8-41
Calgary, Alberta.

Card serial number 50398

IF YOU LOSE THIS CARD, notify your C.O.
immediately, giving him full particulars

IF YOU FIND THIS CARD, please mail in
an envelope addressed to: "The Secretary;
Dept. National Defence (Air); Ottawa, Can-
ada; Attention P.I.B."

NO POSTAGE NECESSARY

[illegible]

4983. 27/3/50

Miss Julia A. Gemmett (sister)
156 Strachan Ave.,
Toronto,
Ont.

June 45.

MEMORIAL BAR

DATE DESP

REGN NO A4155

H.Q. FILE NO. 1022-J-1601

NAME.....JEMMETT, Joseph.....

REGT'L No.....R87576

RANK F.S. Air Gunner UNIT ~~MISSING~~ PRES. DEAD

[illegible]

R87576

JENNETT, JOSEPH

SURNAME

FULL CHRISTIAN NAMES

RE-ENLISTMENT

PLACE Vancouver 198
DATE 28-12-40

C.R. FILE
NUMBER

RECORD OF SERVICE AIRMEN

R.C.A.F. FORM R44(B)
50M-10-40 (7685)
H.Q. 1062-3-58

[illegible]

[illegible]

SPECIAL RESERVE J.A.T.P. CANADA ROYAL CANADIAN AIR FORCE

RECORD OF SERVICE AIRMEN

R 87576

A.F. No.

Jennett

Surname

Joseph

Christian Names

R.C.

Religion

Born 5-8-15 Place Montreal Country Quebec

Citizen of Canada Racial Origin

ENLISTMENT

Date 28-12-40

At Vancouver

Term Duration

CIVIL EDUCATION

High School Entrance

Jr. Mat. 1 Yr Sr. Mat.

Technical School

Corres. Courses

University

PREVIOUS SERVICE

None

RANK DATE Med. Cat. Date
AC 2 28/12/40 a 28/12/40
LAC 1 5/41
SGT(T/PWD) 8 11/41

CIVIL OCCUPATIONS AND EXPERIENCE

Shaver Helper - Mine

COURSES AND TRADE TESTS

Trade	Grp.	%	PorF	Date Rem.	Trade	Grp.	%	PorF	Date Rem.
MOALE	Std			28/12/40					
Lin. Summer			D.P.O. 240	2/10/41					
A. GUNNIER	SPEC			8/11/41					

PARTICULARS OF FAMILY

Wife

Maiden Name

Present Address (in pencil)

Children

Names

Date of Birth

Place of Birth

NAME(S) ADDRESS AND RELATIONSHIP OF PERSONS TO BE INFORMED OF CASUALTIES (in pencil)

Father Mr P J Jennett 156 Strachan Ave Toronto. Ont 5-1-42

Julia Jennett (sister) K Marys Hospital Toronto Ont

LEAVE

CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS

FROM	TO	AUTH. AND DESCRIPTION	DATE	CHARACTER	TRADE AND ASSM.	HONOURS AND AWARDS	SIGNATURE
			7-11-41			A.G. BADGE	DR0182

MOVEMENTS AND CASUALTIES

AUTHORITY	UNIT FROM	UNIT TO	DATE	AUTHORITY	UNIT FROM	UNIT TO	DATE
M.O. R 13	R.C.	No 2 M.D		DR0182 ISSUED SK.I.W	22923	7-11-41	
Dep 90	Vancouver	Brandon	28-12-40	WRD 306	Ko. Y. Dept	RAFTP	8-12-41
	Brandon	M. Jaw	5-2-41		Belifex	Emb Canada	9-12-41
76	No 32 SFTS	No 2 W.S				30RC	19-12-41
	M. Jaw	Calgary	30-3-41	000 PDR 7AGS 3PRC	3 PRC	7 AGS	20-2-42
WRD 217	Calgary Alta	Calgary Ont	12-9-41	13 (54) 42 49/42 68/42	7 AGS	air gunner	3-4-42
	Calgary	Calgary		101/42 21/20		Pool No 7	
DRD 244	Calgary	Calgary		101/42 21/20		190TV	16-4-42
DR0182	#5180G	#114 DEPT	11-10-41	101/42 21/20		190TV	16-4-42
	RAF OF SASK	HAB. N.S.	5-11-41	101/42 21/20		190TV	16-4-42

Examined Stony Down on 20-3-42 & obtained
6090 (Class B) Stony Down 72% on 15/06

J. A. T. P. CANADA

GENERAL CONDUCT SHEET

SHEET No. One SIGNATURE AND RANK OF C.O. [Signature] F/O DATE 3-1-41
(IN WORDS) For Commanding Officer, No. 2 Manning Depot, RCAF, Arena Building, Brandon, Man.

UNIT AND PLACE	Date of Offence	Rank	Cases of Drunkenness (in red)	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Initials and Rank of Officer making entry and Remarks, with Date
				CERTIFIED NO ENTRY					
				CERTIFIED NO ENTRY	H. News	ADJT. MOOSE JAW.	MAR 30 1941		
				CERTIFIED NO FURTHER ENTRY.	Lt. Evans	No ADJUTANT NO.	7 B. & G.S., R.A.F.		16/4/42
				CERTIFIED NO ENTRY	Peter Jones	Adjutant for O.C. R.A.F. Kincross.	F/LC ADJUTANT,		28/7/42
						No. 115 SQUADRON, R.A.F.			28/8/42
				To be carried over					

ROYAL CANADIAN AIR FORCE

SERVICE CONDUCT SHEET

J. A. T. P. CANADA

James, F-0

Commanding Officer

Date 3-1-41

Official No. R87576

Name and Initials..
(IN BLOCK CAPITALS)

JEMMETT J.

Date of Enlistment.....28-12-40

Sheet No.....One
(IN WORDS)

Signature.
and Rank of C

No. 2 Manning Depot,

[illegible]

ROYAL AIR FORCE

AIRMAN'S/AIRWOMAN'S RECORD SHEET (Active Service).

Official No. CA 87576 Name JEMMETT Joseph Rank T/E/Sgt
(In full in block capitals, surname first). (Or acting appointment).

R.A.F. Trade Air Gunner (✓) Special Qualifications.....
(e.g., Gas Instructor, Fire Fighter, Boxing Instructor).

Date of Birth 5.8.15 Religion B.C Occupation in Civil Life Shovel Helves in Mine

Last Enlisted.....28.12.40..... Current Engagement.....D 72V.....

If a member of the Auxiliary Air Force.....

If Reservist, which Class (" E," " F," V.R.)..... Whether Married, Single, or Widower.....

Name, address and relationship of legal next of kin (to be entered in pencil):

Miss J. Jemmett (sister) St. Mary's Hospital, Toronto, Ont. Canada

Name, address and relationship of person (or persons) to be informed of casualties (to be entered in pencil).

(If this person is the legal next of kin, it is only necessary to insert here "Next of Kin.")

Any alteration to above (e.g., Promotions) to be made by crossing out and writing above.

SECTION 1.—MOVEMENTS AND CASUALTIES.

SECTION 2.—
PROMOTIONS, ACTING APPOINTMENTS (PAID OR UNPAID),
REDUCTIONS, REMUSTERINGS.

[illegible]

* The authority to be quoted will be the serial number of the relevant P.O.R.

(To be assessed on every occasion on which an airman or airwoman is struck off the strength of a unit, e.g., on posting; admission to hospital when posted to N.E. strength; death; etc.; also on 31st December each year.)

Rank.	Character.	Trade Classification.	Proficiency.			Whether specially recommended, recommended, or not recommended for promotion or reclassification.	Date.	Signature and Rank of Commanding Officer.
			A	B	C			
1 Sgt	U.G.	AG ON STRENGTH FOR TRAINING ONLY					16/4/42	L. Evans P/O
1 Sgt	U.G.	ON STRENGTH FOR TRAINING ONLY					27/7/42	L. Evans P/O
1 Sgt	U.G.	AG SAT.	SAT.				28/8/42	L. Evans P/O
14/4/42 - 27/7/42 (9 days P. leave)		POR 168/42						L. Evans P/O
9/6/42 - 13/6/42 (5 days P. leave)		POR 154/42						L. Evans P/O
POR 102/42		Recalled on 14/4/42. 6 days unexpired						L. Evans P/O
POR 108/42		7 days P. leave 14.4.42 - 20.4.42						L. Evans P/O
POR 117/42		14 days P. leave 21.3.42 - 24.4.42						L. Evans P/O

First entry to be made at bottom of above section; subsequent entries to be made directly above in sequence.

SECTION 5.—RESULTS OF COURSES OF INSTRUCTION, RECOMMENDATIONS FOR AIRCREW DUTIES, RECOMMENDATIONS FOR COMMISSIONED RANK (K.R. 2132, (19) (A)). DECORATIONS, MENTIONS, SPECIAL COMMENDATIONS BY A.Os.C., ETC.

[illegible]

SPECIAL RESERVE

To be made out in duplicate

M.F.M. 5
200M-7-40 (6098-9)
H.Q. 1772-39-1651

J. A. T. P. CANADA

PARTICULARS OF FAMILY OF AN OFFICER OR OTHER RANK OF THE C.A.S.F. OR
R.C.A.F. (ON ACTIVE SERVICE)

INSTRUCTIONS.

- (a) This form is to be completed immediately an officer or other rank is appointed to, or enlisted in, the C.A.S.F. or R.C.A.F. (ON ACTIVE SERVICE).
- (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 other rank, to the Paymaster, or Officer acting as such. The latter will transmit one copy, through the District, Command, or Camp Paymaster, to the Officer i/c Records, N.D.H.Q., Ottawa. The other copy will be retained by the Paymaster of the unit, when transferred to another unit the copy retained by the Paymaster will be sent to the Paymaster of the individuals new unit.

(1) Name of Officer of Other Rank..... JEMMETT JOSEPH
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Air Force Number and Rank..... R.87576 AC.2

(3) Unit..... RCAF

(4) Are you married?..... NO

(5) If married, state,

(a) Full name of your wife..... NA
..... NA

(b) Present postal address of wife..... NA

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

(7) Are you a widower?..... NO

(8) Have you any children?..... NO Number of boys..... NA Girls..... NA

Names and ages..... NA
..... NA

(9) If Dependents' Allowance is claimed in respect of children—state whether you have been regularly supporting them..... NA

..... NA

Give particulars of Guardians to whom Dependents' Allowance should be paid—if authorized.

Name..... NA

Postal Address..... NA

Next of Kin..... NA [SEE OTHER SIDE]

Julia Jemmett sister.
St Marys Hospital
Toronto
Ont.

(10) Have you a common-law wife—whom you have been regularly supporting and publicly representing as your wife for at least 2 years immediately prior to appointment or enlistment?.....NO

If so, state her full name and Postal Address.....NA

NA

NA

(11) Is your father alive?.....NO

If so, state name and address, occupation.....NA

NA

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

(13) If sole or partial support of father who is a widower, totally incapacitated from earning a living—state what amount per month you have given him prior to appointment or enlistment.....NA..

NA

Also state reason he has no other means of support if partially supported by you, what is your reason for not providing full support?.....NA

(14) Is your mother alive?.....NO

If so, state name and address.....NA

NA

(15) If your mother is a widow, are you her sole or partial support?.....NA

(16) If sole or partial support of widowed mother—state what amount per month you have given her prior to appointment or enlistment.....NA

Also state reason why she has no other means of support, if partially supported by you what is your reason for not providing full support?.....NA

(17) Are you contributing to the support of any dependents, other than those shown above?.....NO.....
This may include any brothers 16 years of age or under, or any sisters 17 years of age or under, solely supported and maintained as bona fide members of your household before your appointment or enlistment.

If so, state the following particulars:—

Relationship.....NA

Full Name.....NA

Postal Address.....NA

Amount contributed monthly during the past six months.....NA

(18) Are you insured?.....NO

If so, in what Company?.....NA

(Give number of policy)

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

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.

Date.....28-12-40

(Signature of officer or man)

Officer Commanding.....

Date.....28-12-40

COMMANDING OFFICER,
K.C.A.F. RECRUITING CENTRE,
VANCOUVER, B.C.

N.B. If parent(s) of the officer or other rank concerned has (have) been replaced by foster parent(s), questions relating to fathers and/or mothers above should be altered and answered as applicable.

SPECIAL RESERVE

R.C.A.F. Special Reserve

Interview Report

Non-Flying List

Technical

Equipment Accounts

Air Crew

Pilot

Observer

Wireless Op. Air.

Air Gunner

SURNAME	CHRISTIAN NAMES IN FULL	Age	25
JIMMETT	Joseph	Height	5' 8"
		Weight	166
ACADEMIC STANDING:		Married or Single	Single
1922-30	P. S. at Timmins, Ont. and Hastings, Ont.	No. of Children	0
1932-33	Timmins H. S. and Tech. School (Day)		

FLYING HISTORY (PARTICULARLY DURING LAST YEAR)

None

EXPERIENCE AND TRAINING (INCLUDING MILITARY) USEFUL IN THE R.C.A.F.

Mine worker.

SPORTS:

EXTENSIVELY: Lacrosse, softball, hockey
MODERATELY: Swimming
OCCASIONALLY: Boxing, wrestling

HOBBIES:

APPEARANCE: HEALTHY-RUGGED-~~SLIM~~
~~TALL~~-MEDIUM-~~SHORT~~
REFINED-ORDINARY-~~COARSE~~
CLEAN - ~~UNTIDY~~ - ~~DIRTY~~

DRESS: ~~FLASHY~~-~~TASTEFUL~~-~~CONSERVATIVE~~
POORLY DRESSED BUT CLEAN AND
NEAT-~~SMART~~-~~UNTIDY~~-~~CARELESS~~

INTELLIGENCE: QUICK - ~~DELIBERATE~~ - ~~SLOW~~
ORGANIZED-ACCURATE-~~RAMBLING~~

PERSONALITY: ~~DOMINEERING~~-CONFIDENT-
~~SUBMISSIVE~~-MATURE
~~IMMATURE~~-PLEASANT
~~MOROSE~~-~~DELICIOUS~~

SUITABLE IN ALL RESPECTS FOR SERVICE IN
R.C.A.F.....YES ~~NO~~

FULLY QUALIFIED IN PERSONAL RESPECTS
FOR COMMISSIONED RANK.....~~YES~~ NO

INFORMATION ELUCIDATED FROM INVESTIGATION IN ACCORDANCE WITH A.F.M. 6/1 Para. 1 (b)

SUMMARY OF ALL OF THE ABOVE:

This boy's education is marginal. An orphan with Children's Aid start in life, he has done well to get himself one year of High School after first spending 2 yrs. on a farm. He is the type I would choose for an air gunner were I flying at the moment, regardless of what schooling he has had. He plays the rugged games and has worked in mines and he has the required fortitude for the job of air gunner. His speech is not perfect but his attitude and outlook are. He is sincere in wanting to fight. To him W.A.G. is 'opportunity' so we can be sure he won't fail. His employers speak well of his work ability and character. Is alert and intelligent. Recommended.

~~EXCELLENT~~
ABOVE AVERAGE
~~AVERAGE~~
~~BELOW AVERAGE~~
(Strike out words not applicable)

RECOMMENDED FOR:

W.A.G.

DATE: 28-10-40

RECRUITING CENTRE:
Vancouver, B. C.

A.F.M. 5

C/O

SIGNATURE OF OFFICER:
R. C. A. F. RECRUITING CENTRE
VANCOUVER, B. C.

AIR FORCE No.		R87576	JEMMETT, Joseph SURNAME		FULL CHRISTIAN NAME				ENLISTMENT/APPOINTMENT				RELIGION																
									PLACE				R.C.																
									DATE				28-12-40																
ROYAL CANADIAN AIR FORCE RECORD OF SERVICE OFFICERS, AIRMEN AND AIRWOMEN																R.C.A.F. FORM R230 100M-5-43 (3287) H.Q. 885-R-230 K. P. 75434													
BIRTH DATE		PLACE		COUNTRY		CITIZENSHIP		RACIAL ORIGIN		PARTICULARS OF FAMILY																			
5-8-15										SINGLE, MARRIED, WIDOWER, DIVORCED																			
CIVIL EDUCATION										WIFE (FULL MAIDEN NAME) OR HUSBAND																			
PUBLIC SCHOOL					JUNIOR MATRICULATION					PRESENT ADDRESS (IN PENCIL)																			
HIGH SCHOOL ENTRANCE					SENIOR MATRICULATION					PLACE OF MARRIAGE																			
TECHNICAL SCHOOL					UNIVERSITY					DATE																			
CORR./BUSINESS COURSES					LANGUAGES SPOKEN					AUTHORITY (IF AFTER APPOINTMENT/ENLISTMENT)																			
CIVIL OCCUPATIONS AND EXPERIENCE										CHILDREN																			
										NAMES		PLACE AND DATE OF BIRTH		NAMES		PLACE AND DATE OF BIRTH													
PREVIOUS SERVICE										NAME(S), ADDRESS(ES), RELATIONSHIP OF PERSON(S) TO BE INFORMED OF CASUALTIES (IN PENCIL)																			
										Mr. P.J. Jemmett (Father) 156 Strachan Ave., Toronto, Ont.																			
										EMPLOYMENT AS INSTRUCTOR OFFICER AIRMAN/AIRWOMAN																			
PLACE AND DATE OF MEDICAL		CATEGORY		PLACE AND DATE OF MEDICAL		CATEGORY		TYPE		FROM		TO		TYPE		FROM		TO											
28-12-40		A																											
OFFICERS										AIRMEN AND AIRWOMEN						OFFICERS, AIRMEN/AIRWOMEN													
RANK, BRANCH AND CATEGORY		DATE		AUTH.		DUTIES PERFORMED DURING SERVICE, E.G. ADJ.				RANK		DATE		AUTH.		TRADE		DATE		AUTH.		COURSE OR TRADE		GRP.		% PF		DATE	
										Sgt		7/11/41				Air Gunner.													
										T/F/Sgt		1/8/42																	
										T/F/Sgt		7/5/42		AFRD 11/3/44															

[illegible]

OFFICIAL ROYAL CANADIAN AIR FORCE CASUALTY NOTIFICATION

NUMBER **R87576**

RANK **F/SERGEANT**

TRADE **AIR GUNNER (SP OR)**

UNIT **OVERSEAS**

NAME **JENNETT, JOSEPH**

S	E	R	V	I	C	E
R.C.A.F.	R.A.F.	R.A.A.F.	R.N.Z.A.F.	OTHER		
X						

MARITAL STATUS **SINGLE**

WAS AIRMAN ON INDEFINITE
LEAVE WITHOUT PAY?

NO

NEXT OF KIN AS SHOWN ON
REC. OF SERV. & RELATIONSHIP

MISS JULIA JENNETT (SISTER)

ADDRESS **156 STRACHAN AVENUE,
TORONTO, ONTARIO.**

NAME
ADDRESS
D.A.B.

MR. P.J. JENNETT

**156 STRACHAN AVENUE,
TORONTO, ONTARIO.**

ADDITIONAL PERSON
TO BE NOTIFIED

ADDRESS

NEXT OF KIN AS SHOWN ON
CAS. SIG. & RELATIONSHIP

ADDRESS

RELIGION **R.C.**

CANADIAN **YES**

FRENCH CANADIAN

OTHER

PARENTS NAMES **BOTH DECEASED**

ADDRESS

FATHER LIVING ON ENLISTMENT

YES NO

MOTHER LIVING ON ENLISTMENT

NO

WAS MEMBER ATTACHED TO R.A.F. AT TIME OF CASUALTY?

YES/NO

IF SO, WAS HE A B.C.A.P.P. TRAINEE?

YES/NO

IF NOT, UNDER WHAT CIRCUMSTANCES WAS HE SO ATTACHED?

IF MEMBER WAS ATTACHED TO R.A.F. AT ANY TIME, GIVE DETAILS:

IF CASUALTY OCCURRED IN CANADA DID MEMBER HAVE SERVICE OUTSIDE CANADA DURING WAR WITH THE GERMAN REICH? YES/NO

IF SO, GIVE PERIOD OR PERIODS:

IF ON LEAVE, STATE DATE LEAVE COMMENCED AND WHETHER ON LEAVE WITH OR WITHOUT PAY?

AUTHORITY CAS. SIG. NO. **AIR MINISTRY KINGSTON - FX6059 d/31-8-42**

9213

CASUALTY DETAILS:

"MISSING" AFTER AIR OPERATIONS (OVERSEAS) 28-8-42.

LAST WILL ATTACHED TO
NOTIFICATION TO A. OF E?

YES/NO

M.F.M. 5 ATTACHED TO
NOTIFICATION TO A. OF E?

YES/NO

DATE **11-9-42**

R.C.A.F. R217
15M-4-42 (2067)
H.Q. 885 R217

7

COPY FOR DOCUMENT FILE

FOR CHIEF OF THE AIR STAFF

ROYAL CANADIAN AIR FORCE

REPORT ON PUPIL WIRELESS OPERATOR (AIR GUNNER)
OR AIR GUNNER

AIR AND GROUND TRAINING

Surname.....Jemmett,..... Christian Names.....J.....
Number.....R87576..... Rank.....LAC.....

INSTRUCTIONS

1. At the conclusion of each stage of training this report must be completed and forwarded as indicated below in sufficient time to arrive on or before the date on which the pupil reports for the commencement of the next stages of training:—

Original and Duplicate—From Wireless School to Bombing and Gunnery School.

2. On completion of training, the original is to be placed on the pupil's personal file and the duplicate forwarded to Air Force Headquarters through Command Headquarters.

3. In the event of the discontinuance of training at any stage, the duplicate is to be forwarded to R.C.A.F. Headquarters through Command Headquarters with full particulars as to the cause of discontinuance of training and instructor's report as to the reasons for the pupil's failure and the original is to be placed on the pupil's personal file.

4. A pupil will be entitled to "Pass" if he obtains not less than 60 per cent of the total marks in the Written, Practical and Oral Tests, and not less than 50 per cent in each of the separate subjects included in this Test.

PART I

WIRELESS TRAINING

1. No....2.... Wireless School. Course No....14..... To...14-9-41... From...31-2-41...

2. Flying Times—

(a) In Flying Classroom as 1st Operator.....: 35.....hours.

(b) In Flying Classroom, listening watch.....2: 10.....hours.

(c) In 2-seat aircraft as sole operator.....1: 30.....hours.

3. Assessment as Air Operator (delete categories not applicable). Unless at least 5 hours has been shown against para. 2 (a) above, no assessment is to be made and therefore all categories are to be deleted.

~~Above average~~
~~Average~~
Below average

4. Ground Training—

Subject	Maximum marks	Marks obtained	Subject	Maximum marks	Marks obtained
Theory.....	50	19 F	Signals Organization.....	150	98
Radio Equipment.....	250	Fail	Armament.....	100	61
Morse (buzzer and lamp).....	200	143	Drill and P.T.....	50	36
Procedure.....	200	136	TOTALS.....	1000	

Maximum Marks, 1000. Marks Obtained.....Percentage..... Pass or Fail.....Fail.....

Position in Class..... No. in Class.....199.....

5. Date authorized to wear Wireless Operator's Badge.....17-8-41.....

PART I—Concluded

WIRELESS TRAINING

6. ~~Comments as to suitability for Commissioned rank~~ REMARKS:—Clearly below the minimum standard required in spite of additional instruction, due to mental inability such as to preclude any useful purpose being served by continuing training in a Wireless School, or in any other School for an alternative trade. Can only be recommended for remustering to General Duties

R. L. L. L. G/Opt.
Officer Commanding
No. 2 Wireless School

Date 12-9-41

To be passed to No. B. G. S.

PART II

ARMAMENT TRAINING

1. No. 5 B. G. S. Course No. 18
2. Dates of Courses:— From 13.10.41 To 7.11.41

AIR TRAINING

GUNNERY

3. Flying Time:—

Aircraft	Day	Night	Passenger	Total	
				Hrs.	Mins.
Battle	8:40		2155	11	35

4. Air Gunnery Results—

Average percentage hits to rounds fired

- (a) Beam Test 6%
(b) Beam Relative Speed Test 5%
(c) Under Tail Test 5%

5. Total Rounds Fired—

- Ground 260%
Air to Ground 400%
Air to Air 2100%

6. Assessment—

Tracer

Marks Obtained

- (a) Written Examination (100 Marks) 57
(b) Practical and Oral Examination (100 Marks) 63
(c) Ability as Firer (250 Marks) 150
(d) Qualities as an N.C.O. (150 Marks)

Totals 450 (600 Marks) 270

7. Position in Class 29 No. in Class 38 Pass or Fail Pass

8. Date authorized to wear Air Gunner's Badge 7.11.41

Numerical Assessment as to suitability for Commissioned Rank 170

10. Remarks... This student no more than passed the required standards of this school. He is definitely below average and his successful graduation was largely due to a tremendous effort on the part of his Armament Instructor.

W. J. L. L. Chief Instructor
No. 5 B. G. S.

Date 7.11.41

AIR TRAINING

Course	Maximum Marks	Marks Obtained
Wireless School.....	1000	
Bombing and Gunnery School.....	600	... 270 ...
	450	
TOTALS.....	1600	... 270 ...
	1450	

No. in Class.....

14. Remarks.... **Concur in para. 10.**.....

Date.....7.11.41.....

~~Commander~~

DEPARTMENT OF NATIONAL DEFENCE
NAVY ===== ARMY ===== AIR FORCE
STATEMENT OF WAR SERVICE GRATUITY

4
AIR

DECEASED
MEMBER'S
NAME

Joseph
(CHRISTIAN NAMES)

Jemmett
(SURNAME)

REGISTER NO.

FILE NO.

DATE

SERVICE NO.

FINAL RANK OR RATING

DATE OF DISCHARGE

PAYEE
ADDRESS
Receiver General of Canada,
Director of Estates,
Ottawa, Ont.

DATE OF TERMINATION OF OVERSEAS SERVICE 29 Aug/42

24517
20 Sept/45
R87576
F/S
29 Aug/42

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 610 EQUAL TO 20 COMPLETE PERIODS AT \$7.50

\$ 150.00

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 265 LESS 10 INELIGIBLE DAYS, EQUAL TO 255 DAYS @ 25C. PER DAY

63.75

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY \$ 3.25
SUBSISTENCE OR LODGING
AND PROVISION ALLOWANCE \$ 1.00
ADDITIONAL PAY \$

DEPENDENTS' ALLOWANCE 1/30 OF \$

TOTAL \$ 4.25 X 7 = \$ 29.75
NO. OF DAYS 265 X \$ 29.75
183

43.08

D. WAR SERVICE GRATUITY

256.83

E. DEDUCTIONS

OVERPAYMENT OF

PAY AND ALLOWANCES \$
DEPENDENTS' ALLOWANCE \$
AND ASSIGNED PAY \$

OTHER DEDUCTIONS \$

F. TOTAL AMOUNT PAYABLE

256.83

G. YOUR PORTION OF GRATUITY IS

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$

P & A Bal. Trans. Trust Account
Journal Voucher # 6212

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 J.W.S.
CHECKED BY R.K.

TREASURY
CHECKED BY

DATE

22-7-45

SERVICE REPRESENTATIVE

AIR FORCE SERVICES
Rec'd SEP 20 1945
P. & A. SECTION

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

Section A—GENERAL INFORMATION

1. (a) Print name in full J. M. M. T. J. O. S. P. H. (b) Reg'l. No. R 87576
2. (a) Arm of service A.C.A.F. (b) Unit W. I. G. (c) Rank Lt
3. (a) Date of birth NOV 5 1915 (b) Have you any dependents? NO (c) Place of residence at time of enlistment NO
4. (a) Place of enlistment VANCOUVER B.C. (b) Date of enlistment DEC 28 1940

PLEASE
LEAVE
BLANK

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 16 (b) Were you attending school or college up to the time of enlistment? NO
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.) Technical School
7. If you attended a university, give name of university and standing or degree secured NO
8. (a) Did you ever enter upon a trade apprenticeship? YES (b) If so, for what occupation? Engineer (c) Did you finish it? YES (d) If you did not finish it, how long did you serve at it? NO
9. (a) What languages do you speak fluently? ENGLISH (b) What languages do you read well? ENGLISH

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? NONE

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? NO
12. (a) If answer to 11 be "Yes", state exact trade or occupation at which you actually worked ENGINEER (b) State how long you had worked at this trade or occupation 1 1/2
13. If answer to 11 be "No", state exact trade or occupation for which you feel qualified NO
14. If you had been employed after leaving school, state when you last worked fairly regularly before enlistment NO
15. Give details of last employer, if any: Name NO Address NO
16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) NO
17. (a) If your last employment was in a business of your own, state nature and address of business NO (b) Date of discontinuing it NO

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 NO Address NO
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) NO
20. (a) Your specific occupation NO (b) Number of years' experience at this occupation with any employer NO
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? NO

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 NO (b) Where was it located? NO
23. (a) Number of years engaged in this business NO (b) Have you made, or will you make plans to return to the same or a similar business on discharge? NO

Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war? NO (b) Do you feel competent to operate a farm? NO (c) If so, in what kind of farming? NO
25. (a) Were you born on a farm? NO (b) How many years' actual farming experience have you had? NO (c) In what provinces did you have experience? NO

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.) NO
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form NO

DATE AUG 2 1941 SIGNATURE J. M. M. T. J. O. S. P. H.

R.C.A.F. Records Office
Rec'd SEP 9 1941
O.K. C.I.B.
R.C. Am't
S.L. P.A. *[Signature]*

ROYAL CANADIAN AIR FORCE

REPORT ON PUPIL WIRELESS OPERATOR (AIR GUNNER)
OR AIR GUNNER

AIR AND GROUND TRAINING

Surname.....Jennett..... Christian Names.....J.....
Number.....R87576..... Rank.....LAC.....

INSTRUCTIONS

1. At the conclusion of each stage of training this report must be completed and forwarded as indicated below in sufficient time to arrive on or before the date on which the pupil reports for the commencement of the next stages of training:—

Original and Duplicate—From Wireless School to Bombing and Gunnery School.

2. On completion of training, the original is to be placed on the pupil's personal file and the duplicate forwarded to Air Force Headquarters through Command Headquarters.

3. In the event of the discontinuance of training at any stage, the duplicate is to be forwarded to R.C.A.F. Headquarters through Command Headquarters with full particulars as to the cause of discontinuance of training and instructor's report as to the reasons for the pupil's failure and the original is to be placed on the pupil's personal file.

4. A pupil will be entitled to "Pass" if he obtains not less than 60 per cent of the total marks in the Written, Practical and Oral Tests, and not less than 50 per cent in each of the separate subjects included in this Test.

PART I

WIRELESS TRAINING

1. No....2.... Wireless School. Course No....14.... To...14-9-41... From...31-2-41...

2. Flying Times—

- (a) In Flying Classroom as 1st Operator.....: 25.....hours.
(b) In Flying Classroom, listening watch.....: 40.....hours.
(c) In 2-seat aircraft as sole operator.....: 30.....hours.

3. Assessment as Air Operator (delete categories not applicable). Unless at least 5 hours has been shown against para. 2 (a) above, no assessment is to be made and therefore all categories are to be deleted.

R.C.A.F. Records Office
Rec'd. SEP 20 1941
O. K. C. B.
R. C. N. I.
S. Above average A.
Average
Below average

4. Ground Training—

Subject	Maximum marks	Marks obtained	Subject	Maximum marks	Marks obtained
Theory.....	50	19 F	Signals Organization....	150	98
Radio Equipment.....	250	Fail	Armament.....	100	61
Morse (buzzer and lamp).	200	143	Drill and P.T.....	50	36
Procedure.....	200	136	TOTALS.....	1000	

Maximum Marks, 1000. Marks Obtained.....Percentage..... Pass or Fail.....Fail.....

Position in Class..... No. in Class.....199.....

5. Date authorized to wear Wireless Operator's Badge.....17-8-41.....

PART I—Concluded

WIRELESS TRAINING

6. ~~Comments as to suitability for Commissioned rank~~ REMARKS:— Clearly below the minimum standard required in spite of additional instruction, due to mental inability such as to preclude any useful purpose being served by continuing training in a Wireless School, or in any other School for an alternative trade. Can only be recommended for remustering to General Duties.

.....
No. 2 Wireless School

Date 12-9-41

To be passed to No. B. G. S.

PART II

ARMAMENT TRAINING

1. No. B. G. S. Course No.
2. Dates of Courses:— From To

AIR TRAINING

GUNNERY

3. Flying Time:—

Aircraft	Day	Night	Passenger	Total	
				Hrs.	Mins.
.....					
.....					

4. Air Gunnery Results— Average percentage hits to rounds fired

(a) Beam Test %
(b) Beam Relative Speed Test %
(c) Under Tail Test %

5. Total Rounds Fired—
Ground %
Air to Ground %
Air to Air %

6. Assessment— Marks Obtained
(a) Written Examination (100 Marks)
(b) Practical and Oral Examination (100 Marks)
(c) Ability as Firer (250 Marks)
(d) Qualities as an N.C.O. (150 Marks)
Totals (600 Marks)

7. Position in Class No. in Class Pass or Fail

8. Date authorized to wear Air Gunner's Badge

9. Comments on suitability for Commissioned Rank

10. Remarks
.....
.....

.....
Chief Instructor

No. B. G. S.

Date

ROYAL CANADIAN AIR FORCE

REPORT ON PUPIL WIRELESS OPERATOR (AIR GUNNER)
OR AIR GUNNER

AIR AND GROUND TRAINING

Surname.....JEMMETT..... Christian Names.....J.....
Number.....R87576..... Rank.....LAC.....

INSTRUCTIONS

1. At the conclusion of each stage of training this report must be completed and forwarded as indicated below in sufficient time to arrive on or before the date on which the pupil reports for the commencement of the next stages of training:—

Original and Duplicate—From Wireless School to Bombing and Gunnery School.

2. On completion of training, the original is to be placed on the pupil's personal file and the duplicate forwarded to Air Force Headquarters through Command Headquarters.

3. In the event of the discontinuance of training at any stage, the duplicate is to be forwarded to R.C.A.F. Headquarters through Command Headquarters with full particulars as to the cause of discontinuance of training and instructor's report as to the reasons for the pupil's failure and the original is to be placed on the pupil's personal file.

4. A pupil will be entitled to "Pass" if he obtains not less than 60 per cent of the total marks in the Written, Practical and Oral Tests, and not less than 50 per cent in each of the separate subjects included in this Test.

PART I

WIRELESS TRAINING

1. No...2..... Wireless School. Course No...14..... To...14.9.41.. From.....31.2.41

2. Flying Times—

- (a) In Flying Classroom as 1st Operator.....:25.....hours.
(b) In Flying Classroom, listening watch.....2:40.....hours.
(c) In 2-seat aircraft as sole operator.....11:30.....hours.

3. Assessment as Air Operator (delete categories not applicable). Unless at least 5 hours has been shown against para. 2 (a) above, no assessment is to be made and therefore all categories are to be deleted.

Above average
Average
Below average

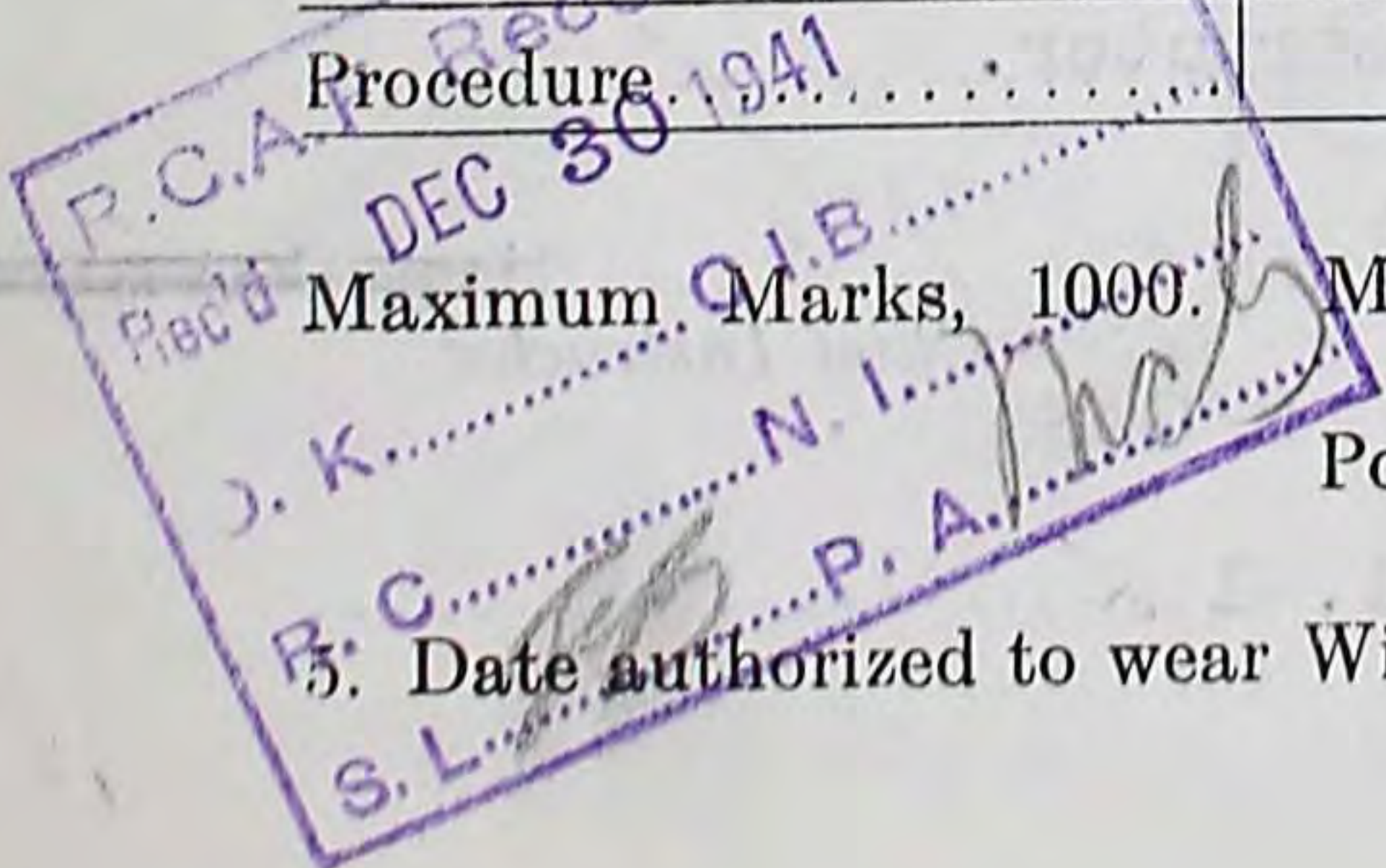
4. Ground Training—

Subject	Maximum marks	Marks obtained	Subject	Maximum marks	Marks obtained
Theory.....	50	...19F...	Signals Organization....	150	98.....
Radio Equipment.....	250	..Fail...	Armament.....	100	61.....
Morse (buzzer and lamp).....	200	...143....	Drill and P.T.....	50	36.....
Procedure.....	200	...136....	TOTALS.....	1000	

Maximum Marks, 1000. Marks Obtained..... Percentage..... Pass or Fail....Fail.....

Position in Class..... No. in Class.....199.....

5. Date authorized to wear Wireless Operator's Badge.....



PART I—Concluded

WIRELESS TRAINING

6. ~~Comments as to suitability for Commissioned rank:—~~ REMARKS: Clearly below the.....
minimum standard required in spite of additional instruction, due to mental
inability such as to preclude any useful purpose being served by continuing
training in a Wireless School, or in any other School for an alternative
trade... Can only be recommended for remustering to General Duties.....

(Signed) ... E. R. Owen..... G/Cpt.
Officer Commanding
No..... 2..... Wireless School

Date 12.9.41.....

To be passed to No..... B. G. S.

PART II

ARMAMENT TRAINING

1. No..... 5..... B. G. S. Course No..... 18.....
2. Dates of Courses:— From..... 13.10.41..... To..... 7.11.41.....

AIR TRAINING

GUNNERY

3. Flying Time:—

Aircraft	Day	Night	Passenger	Total
				Hrs. Mins.
... Battle.....	8:40.....		2155.....	11:35.....
.....				

4. Air Gunnery Results—

Average percentage
hits to rounds fired

- (a) Beam Test..... 6... %
(b) Beam Relative Speed Test..... 5... %
(c) Under Tail Test..... 5... %

5. Total Rounds Fired—

- Ground..... 260... %
Air to Ground..... 400... %
Air to Air..... 2100... %
Tracer 200

6. Assessment—

Marks Obtained

- (a) Written Examination..... (100 Marks) ... 57.....
(b) Practical and Oral Examination..... (100 Marks) ... 63.....
(c) Ability as Firer..... (250 Marks) ... 150.....
(d) Qualities as an N.C.O..... (150 Marks)

Totals..... 450..... (600 Marks) ... 270.....

7. Position in Class..... 29..... No. in Class..... 38..... Pass or Fail... Pass.....

8. Date authorized to wear Air Gunner's Badge..... 7.11.41.....

Numerical assessment as to

9. ~~Comments on~~ suitability for Commissioned Rank... 170.....

10. Remarks. This student no more than passed the required standards of this school.
He is definitely below ave age and his successful graduation was largely due to
a tremendous effort on the part of his Armament Instructor.....

W. J. Longis J. C. Wing Commander
Chief Instructor
No..... 5..... B. G. S.

Date..... 7.11.41.....

PART II—*Concluded*

AIR TRAINING

11. *Final Assessment* (to be completed at B. G. S.)

Course	Maximum Marks	Marks Obtained
Wireless School.....	1000	
Bombing and Gunnery School.....	450 600	... 270
TOTALS.....	1450 1600-	... 270

12. Percentage... 60.0. Pass or Fail..... pass..... Position in Class.....

No. in Class.....

13. Recommended for Commissioned Rank.... no..... Assessment.....
(yes or no) (ex., above average)

14. Remarks.... Concur in para. 10.....

..... *B. F. DeLong* Group Captain
..... *Officer Commanding*
No..... 5..... B. G. S.

Date..... 7.11.41.....

Certified to be a True Copy

F. Birch F/LT.
(F. Birch) Flight Lieutenant

Every item of information
should be carefully supplied.
(See reverse side for instructions)

THIS FORM MUST BE FILED FORTHWITH WITH THE
DIVISION REGISTRAR OF THE DIVISION IN WHICH
THE DEATH OCCURRED BEFORE A BURIAL PERMIT CAN BE ISSUED

WRITE PLAINLY WITH
UNFADING INK
THIS IS A PERMANENT
RECORD

FORM 6

This form if placed in an envelope, marked "Dominion Statistics—Free, penalty for improper use \$300," and properly addressed will pass through the mail "FREE"

PROVINCE OF ONTARIO—CERTIFICATE OF REGISTRATION OF DEATH

1. PLACE OF DEATH { County or District of OVERSEAS Township of
If in City, Town or Village Street House No.
(Name) (If death occurred in a hospital or institution, give the name instead of street and number)

2. LENGTH OF STAY (in years, months and days)
(a) In City, Town or Township where death occurred (b) In Province (c) In Canada (if immigrant)

3. PRINT FULL NAME OF DECEASED JENNETT JOSEPH
(Family name) (Given name or names in usual order)

RESIDENCE No. 156 Street Strachan Ave. City, Town, Village or Township Toronto Province Ontario
(Residence means usual place of abode. Post Office Address for residents in rural parts not sufficient)

4. Sex <u>Male</u>	5. Nationality (Citizenship) <u>Canadian</u>	6. Racial Origin <u>Polish</u>	7. Single, Married, Widowed or Divorced (Write the word) <u>Single</u>
-----------------------	--	-----------------------------------	---

8. BIRTHPLACE Quebec
(Province or Country)

9. DATE OF BIRTH August 5th 1915
(Month) (Day) (Year)

10. AGE in { Years 27 Months - Days 24 If less than one day old
hrs. or min.

11. Trade, profession or kind of work as Air Gunner
spinner, teamster, office clerk, etc.

12. Kind of industry or business, as cotton- R.C.A.F.
mill, lumbering, bank, etc.

13. Date deceased last worked Aug. 29/42 14. Total years spent in two
at this occupation this occupation

15. If married give name of wife
or husband of deceased

16. NAME Jennett, John

17. BIRTHPLACE Poland
(Province or Country)

18. MAIDEN NAME Pavelos, Annie

19. BIRTHPLACE Poland
(Province or Country)

20. Person giving information For R.C.A.F. Records Officer
sign here
Address
Relationship to deceased

21. Place of Burial, Cremation or Removal
Date of burial or removal

22. Burial Permit was issued by
Address

23. UNDERTAKER
(Name and address)

MEDICAL CERTIFICATE OF DEATH

24. DATE OF DEATH August 29th 1942
(Month) (Day) (Year)

25. I HEREBY CERTIFY that I attended deceased from:
..... 19..... to 19.....
and last saw h..... alive on 19.....

CAUSE OF DEATH		PHYSICIAN
I. Immediate cause Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, asphyxia, asthenia, etc.	(a) <u>Previously reported missing after air operations, now for official purposes, presumed dead.</u>	Underline the cause to which death should be charged statistically
Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).	(b) (c)	
II. Other morbid conditions (if important) contributing to death but not causally related to immediate cause.		

26. If a communicable disease is mentioned on this certificate, give { (a) Date of appearance 19.....
(b) Duration of disease days

27. If a woman, was the death associated with pregnancy?

28. Was there a surgical operation? Date of operation 19.....
State findings Was there an autopsy?

29. If death was due to external causes (violence) fill in also the following:—
Accident, suicide or homicide? Accident Date of injury Aug. 29th 1942
(State which)
Manner of injury Presumed killed during air operations
(How sustained)
Nature of injury
Specify whether injury occurred in industry, in home, or in public place public place

Signed by M.D.
Address Date 19.....

30. Division Registrar's Record No.

31. Filed 19.....
(Division Registrar)

SPECIAL RESERVE

ROYAL CANADIAN AIR FORCE

(ATTESTATION PAPER)

(Pages one and two, only, are to be completed in Applicant's own Handwriting)

1. SurnameGemmettFULL Christian NamesJoseph
2. Present Address108 Maple St. N. Timmins, Ont. Telephonenone
3. Permanent Addressnone
4. Place of BirthMontreal, QuebecCitizenshipCanadian
5. Date of BirthAug. 5, 1915Married, Single, Widower, Separated, Divorcedsingle
6. Particulars of Children

Name	Date of birth	Name	Date of birth
	N.A.		

7. OccupationShovel Helper8. ReligionCatholic (Roman)
State denomination
9. LanguagesEnglishState proficiency
10. Next of Kin (Full Name)Julia GemmettRelationshipSister
AddressSt. Mary's Hospital, Toronto Ont.
11. Father (Full Name)John GemmettBirthplacePoland
Address- - -CitizenshipCanadian
OccupationDeceased, -Miner.
12. Mother (Full Maiden Name)Annie PavelosBirthplacePoland? Died when 6 years
AddressDeceased, -CitizenshipCanadian

13. Details of any Naval, Military or Air Force Service:

Unit	Place	Rank	Trade	Date		Reason for discharge
				From	To	
None						

14. Honours, Awards, Mentionsnone
15. Are you now on any Naval, Military or Air Force Reserve?no
16. Have you previously made application to join the R.C.A.F.?yesIf so, where?North Bay Ont.
When?January 1940ResultStill waiting
17. Were you ever discharged from any branch of His Majesty's Forces as Medically Unfit?Nil.
If so, state nature of disabilityN.A.
18. Have you ever been or are you now in receipt of a Disability Pension?No.
If so, state nature of DisabilityN.A.
19. Have you ever been convicted of an indictable offence?N.A.If so state natureN.A.
20. Are you in debt?NoIf so, state particularsN.A.

21. Particulars of Education:

	Name of school	Date		Courses—Subjects, etc.
		From	To	
Primary Education—Public or Separate School.....	Central School, Holy Mary & R.R. School	Aug. 1/32	July 1/30	General
High School—Collegiate Institute, etc.....				
Technical School.....	Summerville High & Tech School	Aug. 1/32	June 24/33	General
University or School other than above.....				
Correspondence Courses, etc.....				

22. Particulars of all Civil Occupations (in full):

Employer and place	Duties, trades, positions	Date		Reason for leaving
		From	To	
Hollinger Consolidated	Surface Labourer	1934	3 mths.	Change
Gold Mines, Ltd.	Underground loader	9	"	"
	Shovel Helper	19	"	"
	General work on	34	" 1940	
	Aerial Tram			

23. Flying Experience (in Hours) Solo..... Nil..... Dual..... —..... Passenger..... →

24. Special Qualifications, Hobbies, etc., useful to the R.C.A.F..... Like Geography & study of maps & countries.

25. Sports engaged in. State: extensively, moderately, occasionally. Soft ball, hockey, Lacrosse, extensively, swimming, occasionally boxing, wrestling & base ball.

26. AIR FORCE DUTY you wish to enlist for ~~Ground Duties.~~ Flying Duties.

If for Ground Duties, state Air Force trade in which you wish to enlist. ~~Ground Duties.~~ NA.

If for Flying Duties, state preference as (a) Pilot, (b) Observer, (c) Air Gunner (d) Wireless Operator (Air Crew).
(Cross out words not applicable.)

27. Names of at least two persons who can give references as to character and ability.

Name	Address	Occupation
Mr. Macdonald	Summerville	Editor of Porcupine Advance
Mr. A. G. Carson	Summerville	Superintendent of Children's Aid Society

28. Other information that may have any bearing on this application..... none

29. Do you understand that vaccination, re-vaccination and inoculation are compulsory?..... Yes.

I HEREBY CERTIFY that the foregoing information furnished by me is correct to the best of my knowledge and belief.

Date..... June 3 1940 Signature..... Joseph Jammett

NATIONAL REGISTRATION CERTIFICATE
PRODUCED.

FOR OFFICIAL USE ONLY

Report of Interviewing Officer—

Type..... General appearance.....

Suitability for (state in what capacity).....

Date..... Signature..... Rank.....

(B) Report of Trade Test—

Trade in which tested.....

Result.....

Trade qualifications other than above likely to lead to efficient employment in the R.C.A.F.....

Date..... Signature..... Rank.....

(C)

DECLARATION MADE BY MAN ON ATTESTATION

I, Joseph Jemmett.....do solemnly declare that the foregoing particulars are true, and I hereby engage to serve on active service anywhere in Canada, and also beyond Canada and overseas, in the Royal Canadian Air Force for the duration of the present war, and for the period of demobilization thereafter, and in any event for a period of not less than one year, provided His Majesty should so long require my services.

Date December 28 19 40 Joseph Jemmett
Signature of Recruit

(D)

OATH TAKEN BY MAN ON ATTESTATION

I, Joseph Jemmett.....do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Date December 28 19 40 Joseph Jemmett
Signature of Recruit

(E)

CERTIFICATE OF ATTESTING OFFICER

The Recruit above named was cautioned by me that if he made any false answers to any of the above questions he would be liable to be punished as provided by law.

The above questions and answers were then read to the Recruit 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 and the said Recruit has made and signed the declaration and taken the Oath before me,

at Vancouver, B. C. this 28 day of December 19 40.

Signature of Officer

COMMANDING OFFICER,

Rank

Unit

R.C.A.F. RECRUITING CENTRE.

VANCOUVER, B. C.

FOR OFFICIAL USE ONLY
CERTIFICATE OF MEDICAL EXAMINATION

Part 1. Information obtained from the applicant—

1. Age. **24** 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) Gastro-intestinal.....	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.....	Thumps

3. Have you ever worn glasses? **no**

Joseph J. Gemmett
 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).....

Scar R forearm 2" x 1 1/2". 2 Scalds 1" L calf.

2. Height..... **5'** feet..... **8"** inches..... 3. Weight..... **166.** pounds.

4. Complexion..... **fair**..... 5. Color of Eyes..... **blue**..... Hair..... **light brown**

6. Development
 { Good
 Fair
 Poor
 7. Chest Measurement—Full expiration..... **38** inches

Range of expansion..... **2** inches

8. Hearing—Right..... **OK**..... Left..... **OK**..... Tympana—Right..... **Intact**..... Left..... **Intact**.....

9. Vision—Without glasses—Right..... **20/20**..... With glasses—Right.....
 Left..... **20/20**..... Left.....

10. Condition of mouth and teeth..... **good. 1 Bridge lower R. 1 cap lower left**

11. Urine—Albumen..... **neg**..... Sugar..... **neg**.....

12. Abnormalities (Congenital and Pathological) found on Examination..... **At time of examination this man has redness of inner half of canal R ear. also redness of drum & out loss of hearing.**

Part 3. The Candidate has been examined in accordance with the pamphlet, "Physical Standards and Instructions for the Medical Examination of Recruits" and he is considered fit for Category



Any special remarks of the Medical Officers.....

Iskhanov N
Reflexes N

Date..... **June 3/40**..... 19.....

President

R. M. Hitchcock
Lunt Reame

Member

Member