OCCUPATIONAL HISTORY FORM 026

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THIS FORM IS TO BE COMPLETED FOR EACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMINDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE OF MUCH

PLEASE READ CAREFULLY THE INSTRUCTIONS GIVEN ON THE INSIDE OF COVER BEFORE COMPL

	SOLET BEFORE COMPLETING FO	THE STATE OF THE S
1.	(a) Print name in full Section A—GENERAL INFORMATION	PLEASE
2.	(a) Arm of service (b) Reg'l. No. / (c) The service (c) Reg'l. No. / (c) R	BLANK
3.	(a) Date of birth	-
4.	(a) Place of enlistment any dependents? at time of enlistment	1000
	(b) Date of enlistment	
5.	(a) State are on Control B—EDUCATION AND TRAINING	
6.	State definitely highest standing or college up to the time of enlistment?	
	Matriculation", "Matriculation", "two years, High School", "Junior	
7.	If you attended a university all the printing , etc.)	
8.	university and standing or degree secured. (a) Did you ever (b) If so, enter upon a trade for what	
0	apprenticeship? occupation? (c) Did you hoffinish it, how long	+
9.	(a) What languages do you speak fluently? did you serve at it? (b) What languages do you read well?	
	Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT	
10.		
	WORKING or NOT WORK- ING at time of enlistment. (b) At time of en-	
	(Enter here only "Work- ing" or "Not Working",) Istment of what trade union or	
	as case may be; particu-	
-	word you a member?	
	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 (b) State how long you	
13.	at which you actually worked trade or occupation for which you feel qualified	
14.	If you had been employed after leaving school, state	
15	when you last worked fairly regularly before enlistment.	
16	employer, if any: Name. Address. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) (a) If your last employment was	
17	contractor", or "boot factory", or "iron foundry", or "retail store", etc.)	
17	in a business of your own, state (b) Date of dis-	
_	nature and address of business	
	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 2! Name of employer	
0000	Nature of employer's husiness (for instance, "farmer", or "building as Heat + Private	
	contractor", or "boot factory", or "iron foundry", or "retail store", etc.)	
	specific occupation. this occupation with any employer	
21	definitely to give you refuse to promise you to return to your	
	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, (b) Where was or professional practice it located?	
23	or professional practice. (a) Number of years (b) Have you made, or will you make plans to engaged in this business return to the same or a similar business on discharge?	
	Section F—PARTICULARS OF FARMING EXPERIENCE	
0.4	(h) Do you feel competent (h, fc) If so, in what	
35	in farming after the war? to operate a farm? kind of farming after the war? (a) In what provinces	
25	born on a farm?farming experience have you have experiencer	
-	Section G—MISCELLANEOUS	
	. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge?	iod.
	. It so school or have you been assured of a job, etc.).	
28	to return to sployment preference or ambition you may have, other than indicated elsewhere in this form.	

P. 64

207 7881)

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d

Mrs. Ellan Shelley, 1115 - 11th Ave. West,

Calgary, Alta.

Any further communication on this subject should be addressed to:-

THE ADMINISTRATOR OF ESTATES, DEPARTMENT OF NATIONAL DEFENCE, OTTAWA, ONTARIO.

and the following number quoted:-

H.O.N.S.113-S-2137 FD.83

DEPARTMENT OF NATIONAL DEFENCE OTTAWA, ONT.

March, 11, 194 3.

For the purpose of record and in the event of there being any balance of pay, medals or memorials available for distribution (according to law) on account of the

SHELLEY, William Henry, A.B.

V. 35255 R.C.N.V.R.

it is necessary that the requisite information regarding the deceased and his relatives should be furnished on the inside of this form in strict accordance with the printed instructions. The particulars required are to be carefully filled in and the Declaration on the back should then be signed in the presence of a Clergyman, Priest, Local Magistrate, Commissioner for Oaths or Notary Public, who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

.....

(H.R. Wade) Lieut--Cdr., RCNVR for (L.M. Firth) Lt.-Col.,

1- Weed

Administrator of Estates.



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16 17 18

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William Henry

OFFICIAL

NUMBER

27 29

> 34 35 36

ANSWER IN FULL ALL APPLICABLE QUESTIONS

STATEMENT of the Names, Ages and Addresses or Dates of Death, of all the relatives that the deceased ever had in each of the degrees specified below.

			INFORMANT'S	STATEME	NT
Degrees of Rein- tion- ship		ATIVES e accounted for	NAME IN FULL of any Relative, if any, in each degree inquired for	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the L	Deceased			
			TO AFA OF		
2	Children of the dates of their	Deceased and Births			
3	Father of the D	eccased	Shelley John J.	58	1115-11. ave W.
4	Mother of the I	Deceased	0- 1100	54	1115-11 ave. W.
5	Brothers of the Deceased	Full Blood	Hong of.	30 28 26	Vancouver Ealgary RC. N.V. I Vistoria RC. N.V. I Ealgary Caldary
		2	Richard M.	10	REOC. Overseas.
6	Sisters of the Deceased	Full Blood	mes & E. Osborne.		Calgary.
7	Names of brothers of the full or th Deceased, who a	Half Blood or sisters (whether e half blood) of the re dead, and date of	Names and ages of their children (if any)		Address of their children
	doath of each.		h. J. Sostatsea h	ma	C.S. Vison.

ONLY IF NO RELATIVES IN THE DEGREES ABOVE ARE NOW LIVING, THE FOLLOWING PARTICULARS SHOULD BE GIVEN

		NAMES OF THOSE LIVING	Age	ADDRESS IN FULL
8	Grand-Parents of the Deceased		,	
9	Aunts by marriage)	Mr. E. a. Shelley.	Age 66 68	Calgary alto
THE STREET		Mrs B. Latrarch.	57	Innisfail

-

XITTIEN

William Hemry

OFFICIAL NUMBER



FULL PARTICULARS AS TO IDENTITY

What is the full name of the deceased?	80 00 1 000. 11
Give the month and year of his birth.	Shelly William Henry.
Where and when were his parents married?	May 23 1923.
If deceased was married, state place and date of marriage. Was there a marriage contract? (Quebec)	1 1912 at Red Deer Olt
Did he leave a Will? If so, a copy should be attached hereto.	m.
Did he leave a bank account? If so, give full particulars.	yes. 95. dollars. In my name.
Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate?	no.
State your own postal address in full.	1116-11 ave West. Calgary alberta.

PARTICULARS OF DOMICILE

18	Where was deceased born?	1228-14 ave W. Calgary alta
19		Calgary alberta Canada
20	What was the nature of his employment?	mater Department
21	Did he own the premises in which he lived? If so, where?	no.
22	Did he ever state verbally, or in writing, where he intended to make his permanent home?	Tho.

OTHER PARTICULARS

23	Did the deceased after enlistment incur any debts for: (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	
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Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.

DECLARATION

I hereby declare that the foregoing particulars are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees inquired for; and that I am the

of the deceased.

Mrs. Collen Shalley Signature of Informant

CERTIFICATE

I hereby certify that, to the best of my knowledge and belief.

above described, and I believe the above Declaration and the Statement of Relatives made by the Informant and signed in my presence to be complete and correct.

algary this 19th day of March 1943 Alfred Bright Qualification Clergyman Address Grace Prestyterian Church, Calgary, alberta Dated at

NOTE.—Before granting the above Certificate, care should be taken to see that the Informant gives particulars concerning the death of any Relative stated by him or her to have died, and that the full name and address and age of each surviving Relative enquired after is stated in its proper place in the Statement opposite.

USE SPACE BELOW FOR ANY ADDITIONAL REMARKS YOU MAY WISH TO MAKE

0.2

and belief.

- (a) To serve from the date thereof for the duration of hostilities, being subject to the provisions of the Naval Service Act, and of the Regulations made in pursuance thereof for the government of the Royal Canadian Naval Volunteer Reserve, and to the customs and usages of His Majesty's Canadian Naval Service.
- (b) To report for active service if called upon in time of war or emergency, and, if called into active service, to serve ashore or afloat as may be directed, according to where my services are required.
- (c) To keep in good repair and condition the articles of uniform and any articles of outfit which may be issued to me and to return them to the nearest Divisional Commanding Officer or to Training Headquarters prior to my discharge or when required so to do by any authorized person, or to pay compensation for any loss or damage thereto other than fair wear and tear; and also not to wear such uniform or outfit (which is and remains the property of the Crown) except when on naval duty.
- (d) To undergo vaccination or re-vaccination, or inoculation, as considered necessary by the appropriate authorities.

Dated this..... 6th Signature of applicant William &

(C) CERTIFICATE OF ATTESTING OFFICER

I hereby certify that all the foregoing statements were made by the volunteer above named, in my presence, and that he has made and signed the above declaration in my presence on this 6th

February, 1942.

Signature of and rank of Attesting Officer.

(D)

OATH OF ALLEGIANCE

William Henry SHELLEY do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Britannic Majesty, His heirs and successors according to law.

Signature of Applicant Will

6th February, 1942. Date

Rank Lieutenant, R.C.N.V.R.

The Oath of Allegiance may be administered by a Commissioned Officer of the Naval Service.

(E)

CERTIFICATE OF ATTESTING OFFICER

William Henry SHELLEY having been duly enrolled to serve in the Royal Canadian Naval Volunteer Reserve Force, I have caused his name and every prescribed particular to be CALGARY recorded in the Record Book of the Division of the R.C.N.V.R. or in the appropriate official documents

Attesting Officer.

6th February,

R.C.N.V.R. Division (or other establishment) CALGARY

NOTE.—This form when completed and when the particulars on it have been noted in the Divisional Commanding Officer's Record Book, is to be forwarded to Headquarters, Ottawa, for custody.

The Certificate of medical examination, B-207, and certificates of previous service are to be sent to Headquarters, Ottawa, with this form.

Certificates of previous service will be returned after they have been examined at Headquarters, Ottawa.

This is to acknowledge that I have not been induced to enter the Seaman Branch of the Naval Service by the prospect of being transferred at some future date to another Branch.

DEPARTMENT OF VETERANS AFFAIRS D OF D 22-2-43

AWARDS NAVY

WAR SERVICE RECORDS

SHELLEY Wil

William Henry

V-35255

A.B.

FILE No.

C

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

1939-45 Star

Africa Star & Clasp

C.V.S.M. & Clasp

War Medal

REGISTRATION NUMBER AND DATE DESPATCHED

3/44

16/1/50

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

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CAMPAIGN STARS

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VERIFICATION FORM
MEDAL, WAR MEDAL, C.V.S.M. and CLASP.
AL SERVICE MEDAL (1915). QUALIFYING PERIODS IN DAYS 1939-45 ATLANTIC DEFENCE CLASP 1915 MEDAL 1 ELIGIBLE FOR AWARDS OF FROM STARS TO MEDALS ltar 1939-45 ATLANTIC FRANCE G. 2 star · class. AFRICA action" PACIFIC BURMA ITALY DEFENCE 2 a class. C.V.S.M. " CLASP WAR 1945 medal WAR 1915 "" DIR. OF PERSONNEL RECORDS.

W.J.13.

I.M.C.S"NIOB	E" (WEYBURN) at	941
Name SHELLE	Y, William Henry (Christian names in full)	
Rank of Rating	Ordinary Seaman Official No	V=35255
	algary, Alberta Date of Birth 23rd 1	
	Life Meter repairer Religion Church of	
Number of years	service in the Navy (Long Service R.C.N., or mobilized service	ice in case of R.C.N.
	or Reserve ratings) One year.	
Date of Death	22nd February, 1943 Place of Death At	862.
Cause of Death	Lost when ship was mined. (If due to accident, violence, or enemy action, particulars to be state	d briefly)
	Name Ella SHELLEY Relationship	
Nearest known relative or	Address 1115 - 11th Avenue West,	
friend.	Calgary, Alberta, Canada.	
Data on which t	he above was informed by Ship Informed by N.S.H.	
	death was registered with local Officials	
	nperial Service men, whether Active Service, Pensioner or Reser	
	eturn was rendered to the Registrar General in London, Edinbur	
ing to Nati	onality	
Place of Burial.	(if known) Date of Burial	(if known)
Location, Num	per, etc., of grave (if known)	
	(if any)	
If borne for dis	cipline only, date D.S.Q. or invalided.	H ingoley
		mmander, R.C.N.
	27th March.	10.3.

The NAVAL SECRETARY, Department of National Defence, Ottawa, Canada.

In all cases this Form is to be sent in addition to the Report by Telegraph required by the Regulations.

Distribution: File, Imp. W. G. Com., Dom. Stat., Register.

Ottawa, Canada.

1 March, 1943.

NATIONAL DEPENDE

Sir:

In accordance with Naval Order No. 839, it is notified for your information that the following casualty in the Naval Forces of Canada has been reported:

NAME, RANK/RATING NO.

PLACE, DATE & CAUSE of DEATH

· NEXT OF KIN

SHELLEY, William Henry Able Seaman, V-35255, R.C.N.V.R.

Missing, presumed killed in Mother: action to date the 22nd of Mrs. Ellan Shelley, February, 1943, when the ship in which he was serving was sunk by enemy action Overseas.

1115 - 11th Avenue West, CALGARY, Alta.

ALLOTMENTS IN FORCE

In favour of:

Amount

Initials.

1. Mrs. Ellen Shelley, 1115 - 11th Ave. West, Calgary, Alberta.

\$15.00 (stopped Feb. 28/43)

WILL: No record.

Yours truly,

SECRETARY, NAVAL BOARD.

.Administrator of Estates, Estates Branch, Department of National Defence. OTTAWA.

File Number. //3-8-2137

SERVICE

NAME: Shelley, Am., Henry

O.N. 135-255

PRESENT RANK/RATING: Ordinary Seamon

DATE TAKEN ON ACTIVE SERVICE:

SERVICE

23/3/42

SHIP OR ESTABLISHMENT

From

To

A. M. C. S. Decumseh"

6/2/42

18/5/42

A. M. G. S. Naden H. M. G. S. Cornwallis

19/5/42 7/9/42

6/9/42

N. M. C. S. Stadacona

23/10/42

22/10/42

N.M. G. S. Niobe

28/11/42

27/10/42

A. m. l. S. ninte for Skeyburn

8/11/42

7/11/42

Canada + High hers

WILL: M

NEXT OF KIN:

NAME & ADDRESS OF Mother:

mrs. Ellen Shelley 1115- 11th ave Alst Galgary, alberta

DISCHARGED PREVIOUSLY?

REASON:

DATE:

Initialled by: Last

Date: 27/2/43.

Section, B. C. M. C.

Naval Personnel Records.

(TO BE COMPLETED IN INK.)

A questionnaire for candidate \$26059

d)

For entry in the

ROYAL CANADIAN NAVAL VOLUNTEER RESERVE.

Name (in full). Walesm Henery . Thelleft
(Birth certificate, declaration by parents or affidavit as to date of birth must be attached
Permanent place of residence. 11.1.511. One Tel
Nearest town to residence (if living in country).
Are you a British subject? Zeo
Are you single, married or a widower? single.
In what capacity do you wish to enrol? O denay Jeaman. (See standards of qualification in attached pamphlet)
Present occupation or trade In eter rekaise
Do you belong to any Naval, Military, Reserve or Territorial Force 20.
Have you ever served with such forces? Give dates and details
Heye you over been de-
Have you ever been discharged from any of HM Forces as medically unfit:
Have you ever offered to serve in any of HM Forces and been rejected?
What is your weight? What is your height? 5 ft. 2 in.
What is your chart management (v.)
What is your chest measurement (Not inflated)
Are you free from all physical defects or malformation, and not sub-
Are you free from all physical defects or malformation, and not sub-
Are you free from all physical defects or malformation, and not subject to fits?
Are you free from all physical defects or malformation, and not subject to fits?
Are you free from all physical defects or malformation, and not subject to fits?
Are you free from all physical defects or malformation, and not subject to fits?

of birth.

A.O. 10-1.

DUPLICATE ONLY TORWARDED BY SEPARATE POST IN CASE ON GIRAL LOST IN TRANSIT

26th April,

43.

FROM:

The Accountant Officer. H.M.C.S. "NIOBE",

10317

c/o Canadian Fleet Mail Office, King's House, 10, Haymarket,

London, S.W.1.

The Superintendent of Naval Pay Accounting, TO:

Department of Mational Defence,

Ottawa, Ontario.

Enclosed herewith are Forms C.N.S. #46 and Statement of Account for the following ex H.M.C.S. "WEYBURN" officers and ratings:-

22nd Feb. 1943. "D.D." Lieut.Cdr. Thos.Golby 22nd Feb. 1943. "D.D." Sub.Lieut.Wilfred Bark "D.D." 22nd Feb. 1943. Richard Hall, L/Sto. V.5298 Maurice Savoie, Sto.II. V.32119 "D.D." 22nd Feb. 1943. Melvin Morrison, Sto.I. V.27470 "D.D." 22nd Feb. 1943. "D.D." 22nd Feb. 1943. Wn.H.Shelley, 0/Smn. V.35255 22nd Feb. 1943. Missing Eric Eisner, Stwd. 40756comp

All known charges against the above-mentioned officers and ratings have been debited in H.M.C.S. "NIOBE" ledgers. From information supplied by Lieutenant G.H.Doty, R.C.N.R., ex H. M. C.S. "WEYBURN", the sum of \$22.35 (Five pounds) representing January payment has been charged against the account of Sub. Lieutenant Bark. No payment for the month of January was received by Lieutenant Commander Golby.

In the case of the five ratings concerned, no information is held as to the amounts of pay received for the month of January, as the January Pay List was lost with Arhor 1 most Pay Lieut. Cdr. R.C.N.R. the ship.

ACCOUNTANT OFFICER H.M.C.S. NIOBE"

(R.W.Knox-Loet), Pay Licutenant, R.C. N. V.R. for Accountant Officer.

DEPARTMENT OF NATIONAL DEFENCE

- NAVAL SERVICE -

NAME. Shelley Hilliam H. Surname Christian Names
RATING. Ard
ACTIVE SERVICE (date of commencement). 2.3. 2
Authority.11.10.4.24.7.ch.42
Initials. In. E

DATE · of · ACTIVE SERVICE)

Noted by MAY 301942