

Ref. No.

Group Nomination No.

Commonwealth of Australia

DEPARTMENT OF IMMIGRATION, AUSTRALIA HOUSE, LONDON

Child Migration

Sections A and C of this form are to be completed by the approved voluntary organisation in the United Kingdom. Section B to be completed by the parent or guardian of the child.

SECTION A.

1. Name in full Cosgrove Oliver Joseph
(In block capitals, surname first)

2. Full Postal Address Nargareth House - Hammer Smith
London W. 6
(In block capitals)

3. Age 2 1/2 DPA Date and Year of Birth DPA 1949 Place of Birth London

4. Sex Male Weight Church Denomination Roman Catholic

5. Furnish name and address of parent, guardian or next-of-kin Mother Superior
(If father is living his name must be given)
Nargareth House - Hammer Smith W. 6

6. Is there any record of mental disease in the child? No

7. Has he or she at any time been subject to fits? No

8. Educational standard An intelligent child.

Signed S. Malachy Joseph

For and on behalf of
(Name of Sponsorship Organisation)

Date 1st November 1952

SECTION B.

PARENT'S OR GUARDIAN'S CONSENT (FATHER IF LIVING)

I, Sr. Malachy Joseph Mother Superior
(Insert full name, occupation and address)
of Nargareth House, Hammer Smith, London, W. 6
the mother of Cosgrove Oliver Joseph
(father, mother or guardian)

hereby consent to my child/ward proceeding to Australia under the Commonwealth Child Migration Scheme.

Dated this 1st day of November 1952

Signature Sr. Malachy Joseph

* Witness John Bradley Qualification Catholic Priest

Address DPA London W. 6

*The witness to the parent's or guardian's consent must be one of the following :-
A Mayor, Magistrate, Provost or Justice of the Peace
A Barrister, Advocate, Solicitor or Notary Public.