FULL NAME Surname first: Losney, Leonard David

SEX: M.

DATE OF BIRTH: 25-12-22

ENTERED JR. FIRST Mo. Yr.: Sept./30

ADDRESSES
(1) 96 Burton Ave.
(2)
(3)
(4)
(5)
(6)
(7)
(8)

DATE OF DISCHARGE (NOT TRANSFER):
NO.:
REASON:

PLACE OF BIRTH: Allandale.

PARENT OR GUARDIAN
NAME: Frederick R. Losney.
COUNTRY OF BIRTH: England
OCCUPATION: Brakeman C.N.R.
RELIGIOUS DENOMINATION: Anglican.

BASIS OF PROMOTION

| a SCHOOL When transferring write date of last attendance | b DATE OF ADMISSION To room or grade | c AGE SEPT. 1 Yrs. | Mos. | d GRADE | e ROOM NO. | f DAYS PRESENT | ABSENT | h Certificate | i ARITH. | LITER. | GRAM. | GEOG. | COMP. | HIST. | WRIT. | READ. | SPELL. | ART | HYG. | NAT. STUDY | PUPIL'S TOTAL | POSSIBLE TOTAL |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| King Edward | April/28. | 5 | 9 | K. | 8 | 220 | | | | | | | | | | | | | | | | |
| " " | Sept/29 | 6 | 9 | Pr. | 7 | Reg | | Jr I | 100 | | | | | | 38 | 40 | 46 | | | | 224 | 250 |
| " " | " /30 | 7 | 9 | I | 6 | Reg. | | H. | 87 | | | | | | 34 | 38 | 50 | | | | 209 | 250 |
| " " | " /31 | 8 | 9 | II | 5 | Reg. | | H. | 83 | 87 | | 93 | 78 | | 31 | 31 | 44 | | | | 447 | 550 |
| " " | " /32 | 9 | 9 | Jr III | 4 | " | | H. | 93 | 85 | | 84 | 85 | | 34 | 34 | 42 | | 43 | | 500 | 600 |
| " " | " /33 | 10 | 9 | Jr III | 3 | " | | H. | 81 | 95 | | 84 | 83 | | 34 | 38 | 50 | | 36 | | 501 | 600 |
| " " | " 34 | " | 9 | Jr IV | 2 | " | | H' | 81 | 74 | 90 | 78 | 70 | 82 | 34 | 40 | 40 | | 37 | | 626 | 800 |
| " " | " 35 | 12 | 9 | Jr IV | 1 | | | | | | | | | | | | | | | | | |

ALL DATES MUST BE WRITTEN DAY - MONTH - YEAR Thus 30-10-18

THIS CARD MUST FOLLOW THE PUPIL FROM ROOM TO ROOM AND FROM SCHOOL TO SCHOOL.
a, b, c, d, e must ALWAYS be kept up to date. f and h must be entered when the pupil leaves a room or grade (by promotion, transfer, etc.) and at the end of the school year. SEE DETAILED INSTRUCTIONS.

A.D.P. Card
JAS A. COOK & SON TORONTO FORM 6

NAME: Gooney Conard

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | X | S | C | P |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| VISION R | VISION L | HEARING RIGHT EAR | HEARING LEFT EAR | EYE DISEASE | EAR DISEASE | DEF. NASAL BREATHING | ABNORMAL TONSILS | ANAEMIC APPEARANCE | DEFECTIVE TEETH | DIGESTIVE ABNORMALITY | ENLARGED GLANDS | SKIN DISEASE | ORTHOPEDIC DEF. | MALNUTRITION | PULMONARY DISEASE | CARDIAC DISEASE | NERVOUS DISORDERS | | MENTALITY REF. | VACCINATION | MEASUREMENT H | MEASUREMENT W |
| 15/15 | 15/15 | ✓ | ✓ | | | | | | | | | | | | | | | | | | 48" | 57# |
| | | | | | | | | | | | | | | | | | | | | | 56" | 85# |

DISEASES CHILD HAS HAD

| A | B | C | D | E | F | G | H | I | J | K | L |
|---|---|---|---|---|---|---|---|---|---|---|---|
| MEASLES | GERMAN M. | SCARLET F. | DIPHTHERIA | WHOOPING C. | CHICKEN POX | SMALL POX | MUMPS | C.S. MENINGIT | INF. PARALYSIS | RHEUMATISM | PNEUMONIA |

| REFERRED FOR | DATE | FINDING (USE A SEPARATE LINE FOR EACH DEFECT) | H | INITIALS | AGENCY TREATING AND DATE OF TERMINATION |
|---|---|---|---|---|---|
| | 24.10.28 | 3 granulated lids | | U.C.W. | |
| S.P.2. | 14.11.30 | | G | V.a.M. | |
| | 16.11.32 | 8P | | V.a.M. | Dr Sproll 7.12.32 |
| | 26.4.33 | 8P | | " | " Sproll 24.4.34 |
| S.P.2. | 29.10.34 | | I | V.a.M. | |

NOTES: Tonsil finished 22.11.28
H. 20.2.33 absent 3 weeks.
12.4.33 Vision tested 15/15 x 15/15
22.2.34 Vision tested 15/15 x 15/15
15.11.34 re Vaccinated Slight reaction
15.11.35 annual Vision Test 15/15 x 15/15

C. P. P.—COMPLETE PHYSICAL WITH PARENT PRESENT. C.P.C. – WITH WRITTEN CONSENT. C.P.O. — WITHOUT EITHER. S.P. –SPECIAL PHYSICAL. D.S.—DENTAL SURVEY.