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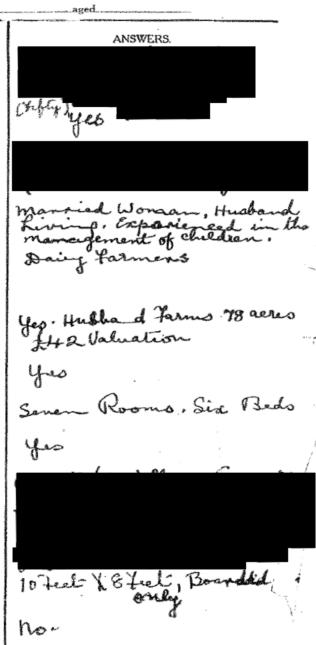
### GALWAY PUBLIC HEALTH AUTHORITY

Particulars respecting Was Joe & Como O with whom it is proposed to

Board out \_\_\_\_\_aged\_\_\_\_\_

#### QUESTIONS.

- Name and address of the proposed fosterparent.
- 2. Age. ( Fifty years
- 3. Is proposed foster-parent of the same religious persuasion as child?
- 4. Situation of residence, and whether in a town or village?
- Whether proposed foster-parent is married, single, or a widow, and whether experienced in the management of children.
- Occupation and means of livelihood of proposed foster-parent,
- 7. By whom recommended?
- Whether proposed foster-parent is the occupier of land, and, if so, acreage and valuation.
- Whether good food and milk and wholesome drinking water are easily obtainable by proposed foster-parent.
- 10. Number of rooms in proposed foster-parent's house, number of beds, and whether each bedroom is ventilated by a window that opens, or a chimney.
- Number of adults and of children in the house.
- 12. Do the arrangements admit of the sexes being completely separated?
- Size of room in which child is to sleep, with number of beds, and number of other occupants if any.
- 14. Is the proposed foster-parent or any number of the family residing in the house in receipt of home assistance?
- 15. Is the proposed foster-parent related to the child, and, if so, what relation?



No.

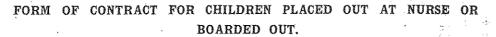
QUESTIONS.	ANSWERS.
16. Are there any other children boarded out in the house, and, if so, by whom? (State if any of such children is a brother or sister of the child now proposed to be boarded out.)	No
7. Is the house on a public road, and what distance is it from a public school?	yo. half mile
8. Is there any pig, cow, or other such animal kept in the house? Or any manure pit or accumulation of filth in dangerous proximity to the dwelling?	no
9. Is the house in a healthy situation?	yes.
20. Other Observations (if any.)	
CERTIFICATE OF	STEARCE OFFICER.
1 certify that I have visited was - of the	
hat the replies to the foregoing queries are correct,	and the face and I known
s a competent and suitable person to have the care	
	CHILDEEN'S
(Date),day	of195
-	to boarding out children in licensed premises and in.
was and villeges, and to the desirability of securing ame foster-parent.	that children of the same parents are placed with the
Recommendation of person to whom foster- parent is well known.	Certificate by Clergyman who is of the child's religious persuasion.
l am of gpinion that the proposed foster-parent,	I am of opinion that the proposed foster-parent,
an or spinion that use troubles traces	and of opinion that the proposed toster-parent,
5	of
a competent and suitable person to have the	is a proper person to have the care of the above-
are of the above-named child.	named child.
igned, & Brand	Signed,
42	Address,
Date), day of 195	(Date). 31 day of January 1963.
CERTIFICATE OF THE	MEDICAL OFFICER.
I certify that I have examined	·
child proposed to be boarded out, and I am of opi	
Other remarks (if any) as to the health of the	
	child :
THE PARTY OF THE P	child :

of the County...

(Date) day of

(Institution).





THIS INDENTURE made this 4th day of 1000 mls 1953, between the Galway County
Council (hereinafter called the Public Assistance Authority) of the first part, and Mis. Kate Reference, Colongh, Gutteen, Colongh
of the second part, witnesseth that the said Mrs Relpour (hereinafter called the foster parent) doth
hereby accept the charge of Michael Blaketty, now aged about 52 years (and hereinafter
called the child); and in consideration of the sum of \$1.5.0. her result for maintenance and \$5.0.0 a year for clothing; up to expease \$7.10.0 to 12 years to be paid to the foster parent by the public assistance authority as hereinafter mentioned, doth hereby covenent and agree to bring up the child, and to endeavour to train him (or her) in the habits of truthfulness, obedience, personal cleanliness and industry, as well as in suitable domestic and outdoor work. And the foster parent doth hereby bind himself (or herself) to observe and keep in respect of the child the following conditions, that is to say:—
1. The child shall be properly and sufficiently (nursed) (boarded), and shall be suitably lodged and clothed and kept clean in its person.
2. If the child shall at any time be suffering from illness or the effects of accident, medical assistance shall be obtained for it in the manner provided by law at or from a dispensary of the dispensary district in which the foster parent resides, and if the medical officer of such district shall advise its removal to hospital the foster parent shall allow it to be so removed.
3. The child shall be presented for inspection and examination at all reasonable times when required by the Assistance Officer or other authorised officer of the public assistance authority, or by any person having authority from the Minister for Local Government and Public Health, or from the public assistance authority, to examine and inspect it.
4. The child shall be restored to the custody of the public assistance authority and their officers at any time when the foster parent shall be required by the public assistance authority so to restore it.
5. The child, when of sufficient age to attend school, shall, subject to the approval of the chaplain of the county home of the public assistance authority of the religious denomination in which the child is registered, attend the nearest national school, or shall, subject to the approval of the public assistance authority and of such chaplain, attend some other public school, and a certificate of such attendance signed by the teacher, and showing the days of absence (if any) shall be given to the assistance officer each month; provided that if the school be not a national school, the child shall be examined annually by the inspector of the Department of Education at a convenient time and place, and the result of such examination shall be reported to the public assistance authority.
6. The child shall, when of sufficient age, attend divine worship at a place of worship frequented by the foster parent and his or her family.
And the public assistance authority doth hereby covenant and agree with the foster parent that so long as the child shall continue in his (or her) charge and shall not have attained the age of fifteen years, they Sixteen.
(the public assistance authority) will pay or caused to be paid to the foster parent the sum of the number for maintenance of Clothering allowance as follows— up to 6 years 1 age to a year; 6-12485 to 0.00 a year.  On the day of each calendar month, and a proportionate part of such monthly payment
in the event of the child being removed from the charge of the foster parent in the interval between any of the said days of payment.
And the public assistance authority hereby further covenants and agrees that the child shall from time to time be provided by them with suitable and sufficient clothing, and that due provision shall be made by them for the repair of such clothing and also for the payment of any school fees, which may lawfully become due and payable in respect of the child's attendance and education at school and of the cost of any necessary school requisites that may be required by the child.

Given under our hands the day and year first herein mentioned.

Manager for the public assistance authority.

Foster parent.

A.P.W.CO.LTD.

a.p.w.co.exp.571-51

#### Form A.

Approveso

#### GALWAY PUBLIC ASSISTANCE AUTHORITY.

Particulars respecting the K. Wyannwith whom it is proposed to rd out Michael Hally aged 5 2 400

#### QUESTIONS.

- 1. Name and address of the proposed foster-parent (Female).
- 2. Age
- 3. Is proposed foster-parent of the same religious persuasion as child?
- 4. Situation of residence, and whether in a town or village?
- 5. Whether proposed foster-parent is married, single, or a widow, and whether experienced in the management of children.
- 6 Occupation and means of livelihood of proposed foster-parent.
- 7. By whom recommended?
- 8. Whether proposed foster-parent is the occupier of land, and, if so, acreage and valuation.
- Whether good food and milk and wholesome drinking water are easily obtainable by proposed foster-parent.
- 10. Number of rooms in proposed fosterparent's house, number of beds, and whether each bedroom is ventilated by a window that opens, or a chimney.
- 11. Number of adults and of children in the house.
- 12 Do the arrangements admit of the sexes being completely separated?
- 13. Size of room in which child is to sleep, with number of beds, and number of other occupants, if any.
- 14. Is the proposed foster-parent or any member of the family residing in the house in receipt of home assistance?
- 15 Is the proposed foster-parent related to the child, and, if so, what relation?

ANSWERS.

Mrs. Role Myann To year Jos Jels of political. Villago 200 Jels of political.

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QUESTIONS.	ANSWERS.
16. Are there any other children boarded out in the house, and, if so, by whom?  (State if any of such children is a brother or sister of the child now proposed to be boarded out.)	
17 Is the house on a public road, and what distance is it from a public school?	200 yell of Tubic Facility - Harris - fix on School
18. Is there any pig, cow, or other such animal kept in the house? Or any manure pit or accumulation of filth in dangerous proximity to the dwelling?	
19. Is the house in a healthy situation?	1968.
20. Other Observations (if any.)	
premises and in towns and villages, and to the c parents are placed with the same foster-paren	
CERTIFICATE OF ASSISTANCE OFFICER.  I certify that I have made inquiry respecting	CERTIFICATE BY CLERGYMAN WHO IS OF THE CHILD'S RELIGIOUS PERSUASION.
23 Same Ma Danny or wigger	I am of opinion that the proposed foster-parent,
of Lowerfal Subject TRALINAS	or wer tale ette Lann
that the replies to the foregoing queries are correct,	or Clough, Gulter
and that so far as I know	is a proper person to have the care of the above-named child.  Signed, Rul. J. Shiel 6.6.
Address, 430 M. John J. For Ma Jamais (Date), 800 day of M. Tog al 1953	Address, & certiler (Date) 27th day of October 1953
CERTIFICATE OF TH	E MEDICAL OFFICER.
I certify that I have examined	Halands is suitable for boarding out.

Other remarks (if any) as to the health of the child:

Signed, Medical Officer.

of the County Children Hims There (Institution).

(Date), Jay of Nonembia. 195.5.

212/1

17th November, 1953.

Sr. M. Philomena, Matron, St. Brendan's Home, Loughrea.

A Chara,

Will you please arrange for the transfer of boarded out child Michael Flaherty from the Children's Home, Tuam, to Mrs. Kate McGann, Clough, Gurteen, as soon as possible.

Mise le meas,

Runai.

Matron, Children's Home - copy for your information.

212/1
2nd November, 1953.

Mrs. Kate McGann, Clough, Gurteen, Co. Galway.

A Chara,

The County Manager has approved of your application on Form A for a boarded out boy and I have sent the usual Form of Agreement to Miss M.K. Murphy to be completed by you in respect of the child, Michael Flaherty, aged 5½ years. When I receive back the Agreement I shall arrange to have the boy sent out to you by ambulance.

Mise le meas,

Runai.

Sr. Cathaldus - please get certificate of the Medical Officer completed regarding this boy.

Order	Children to be boarded out.		
9443 🚓	I hereby approve of boarding out Michael Flaherty with Mrs. M	(ate McGanr	
	Clough, Gurteen, Co. Galway.		
	Dated this 5th day of November, 1953, at the hour of	- Pm	
á :	COUNTY Manager.	1	

# GALWAY COUNTY COUNTIL HISTORY OF BOARD DOUT CHILD

1 de Maria III
WASS OF SHILD & GLOOL HOLD RELIGION. RECTORD.
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DAIN OF BAPCISH PRIESE'S NAME
PARISH OF BIPPI M.
HO MER'S NAME FALMERS Allowery Gally Gluming
MOTHER'S DATE OF BIRTH.
DAMS ADMITTED. STAFFE
DATE DIGUNDODD
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County Gentlery
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WHETHER RELEMBES OR PRISHD
MADER RELIEF OR FRIEND
AGE 5 Years
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DOCTOR'S MAIS AND ADDRESS
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DIEZ MELLETDED REHOUS. SelenGry SAMONE. MARCH. MARCH.
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Received for Mrs. Mulyan 12/6 (Poliomyeleti: Varienter. Michael Flokerty) Robbins.

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Inak. Children hacker that Alexand.

11/4/58. Cale, Chothery, Lealth, I Al Dehaol attedance

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14/4/58. Satisfactory.

14/9/68. Child is hear fed, and Clathod, bed and hid-

ce/1/08. Thick appears to be mell fed, 2 of Clad.

naccinated signific poliohytelitis Holy. hotter

advised to keep Hild is Absol daily.

21/1/59. Lea Age Lea CH Cal, Cake Jaco.

of 469. Child appears to be truel fear and Clothed. Ded. Chatters and hedroom Chem and tidy. General balth good.

30/5/59. Spended leadth ad Cono Datingsetony, hedding Clean. This lady his informed has his habet has not wery flered for Doot for holls. She heas cloo toley that it was hed chieficing to have dead that he allested whoolings.

9/4/59. a Losethy Chard, Jeretal Care Good.

General Assistance Dept., Galway County Council, County Buildings, Prospect Hill, Galway.

the training of the state of th

A Chara,

School attendance dertificate for who is boarded out with you has been received for month of \_\_\_\_\_ and I see that ste/he was absent from school for \_\_\_\_\_ days during the month. Please let me know the reason of her/his absence. If through illness and that a doctor was in attendance a medical certificate should be submitted with your reply.

Mise le meas,

M. O'Maolrunaidhe.

Runai Seal.

(10)

	Galway County Counci	1
		General Assistance Dept Galway County Council, County Buildings, Prospect Hill, Galway.
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A Chara,		
the he was absent from solution as the he was absent from solution of	e Gertificate for eived for month of days dhool for days dher/his absence. If three medical certificate shou	and I see that tring the month. Please
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M. O'Maolrunaidhe.

Runai Seal.

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#### GALWAY COUNTY COUNCIL

Dispensary District

Aday of 6 150.

Middle 7 Gally un ill in July 1960 DMC

[CO. 201000]

- michael & lakerty being from School. well michael got a fit of Sickness, I a terriable Pain in his ear, & the Side of his neck. I had bot Quin attending him for which I inclose his certificate, (hurs) Kato Mc Yum

General Assistance Dept., Galway County Council, County Buildings, Prospect Hill, Galway.

26360

Mrs. Kale Ille Garne Clarger, Gertran

A Chara,

School attendance Certificate for the the the state out with you has been received for month of the and I see that she/he was absent from school for days during the month. Please let me know the reason of her/his absence. If through illness and that a doctor was in attendance a medical certificate should be submitted with your reply.

Mise le meas,

M. O'Maolrunaidhe.

Runai Seal.

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	General Assistance Department, Galway County Council, Prospect Hill, Galway.
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A Chara,	
School attendance certificate for	
who is boarded out with you has been received for and I see that she/h@ was absent for do me know the reason of her/his absence. A medicatif the absence was due to illnews.	ays during the month. Please let
Mis	se le m <b>eas</b> ,
	L. O'Luanadgh
	Runai



		Genera County Galway	al Assistance Dept y Buildings,
		Well-come was as as assessed	8661
Dear Reverend Father,			
I should be certificates for the following c	most grateful if hildr <del>en:</del>	you woudd let u	ıs have Baptismal
Name	Date of Birth	Placeeof Birth	Mother's Name
Whiteast & Substitute		Paralachie es Surviva	Paties
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		n man man dan dan dan kang 1,50 kilah salah san dan dan dan dan dan kan kebalangan dan kelah dan dan dan dan d	es o' es come mess anné e l'ét maint. Il alors part y par d'es d'es victe des anné anné anné anné
	Thanking	you,	
	M	ise le meas,	
Very Ew. C. Sustan	ey P.P.	L.O'Luan	eaigh.
3	,	R	unai '

Albery Bellyglavin be. Salvery 9th Jane 1961

Michael Flahesty's baptism is not recorded in this Church's baptise Register on Bellyghim Post office serves Kalleron

and borofon therebes. I addition mothers name only is not sufficient unless mother was not married and of that is In lase you will get Baptismal bet. of you with to Rev. M. Geraghty, Alan.

your factifully Tuam Home, - 2.48 I. Storley, Adam. born tram Home & sent to Reg. Hosp. readmitted to Tuam 23.2.48

grandfalter Wich and Flahenly Balling, Rallegglinin.



General		
County E	Buildings	١,
Galway.	3-	10
0	ca# "	62
		TO THE SEC

Dear Reverend Father,

I should be most grateful if you would let us have Baptismal certificates for the following children:

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Name	Date of Birth	Place of Birth	Mother's Name
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Thanking you,

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