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VELLIN Roland Gerard born 11 April 1946; Marie Fernande Nicole (nee Moutia) born 15 September 1945;
Marie Gerard Denis born 11 May 1969 - Mauritian

DEPARTMENT OF IMMIGRATION
(Central Office)

M.

32424
File No. 66/

SUBJECT: VELLIN R.G.

DISPOSAL ACTION
RPA-902
21 2049

RNA

Former Papers on EACH OFFICER TO ENTER INITIALS WHEN CLEARING FOLIO
SENDING OFFICER MUST NOT INITIAL HIS OUTWARD ENTRY Later Pa

Folio No. (1)	Referred to and Date (2)	Clearing Officer's Initials and Date (3)	Folio No. (1)	Referred to and Date (2)	Clearing Officer's Initials and Date (3)	Folio No. (1)	Referred to and Date (2)
1	OBO 26/4.	gd. 1/6					
	PB						
	OBO 20/3	A 24/3					
	M/D						
	Records						
	M/R 7/4						
	P/A						
	M/D 22/11						
	MD 25/7/69	S 27/8					
	2/2 27/10						
	M/D 3/10/69	J 22/10					
	R/S 17/11						
	M/D 3/11/69	ok 8/11					
	HEALTH	Rev 14/11					
	MD	ok 18/11					
	PA						
	MD 1/12	J 8/12/69					
	P/A						

INSTRUCTIONS

- (1) In Column (1) above, the folio on which action is required will be indicated, Column (2) will indicate to whom the file is to be referred and the date.
- (2) When a folio is cleared, the officer dealing with the file will place his initials in Column (3) and indicate on next vacant line to whom the file is to be referred and the date.
- (3) All entries should be entered in ink.

32424
File No. 66/

APPLICATION
RECORDED
M.D. SUB-SECTION

INTERVIEW No. <u>2265</u>	A.
MEDICAL	
RADIOLOGICAL	
POLICE CERT.	
APPROVED NOT APPROVED ENDORSEMENT ISSUED	

*Child to be med
examined at 3 mths.*

ok (BOTH CERTIFICATES FOR (ROLAND G. VELLIN
POLICE CERT. (MARIE F. . .
CHARACTER *ok*

h 11.6.69 ok 11/26/69

X—INDEXED UNDER.....
.....
SPONSOR'S FILE No.....
SPONSOR <small>ADVERSELY NOT ADVERSELY</small>RECORDED.....
No. OF PREVIOUS NOMINEES.....



TELEGRAMS 'IMMIGRATION' CANBERRA
TELEPHONE 70412 EXT.
IN REPLY PLEASE QUOTE 66/32424

DEPARTMENT OF IMMIGRATION
CANBERRA, A.C.T. 2600

4 December 1969

Dear Sir,

I refer to your application for permission to enter Australia.

Your application has now been approved and the necessary "Authority to Enter Australia" is enclosed.

This type of authority has been issued in recognition of the fact that, at the present time, it is not possible for the necessary endorsements to be placed in your passports by an authorised officer.

Yours faithfully,

(P.R. HEYDON)

Secretary

R.G. Vellin, Esq.,
12 Dr. Duvivier Street,
BEAU BASSIN,
Plains Wilhems. MAURITIUS.

*Two (2) original P/cert's
of parents returned.*

T 3/12/69

*VN list
checked
kh 8/12*



TELEGRAMS 'IMMIGRATION' CANBERRA
TELEPHONE 70412 EXT.
IN REPLY PLEASE QUOTE

DEPARTMENT OF IMMIGRATION
CANBERRA, A.C.T. 2600

Authority No.

No. 9343

Date of Issue.

4 December 1969

Special Condition: "H"

AUTHORITY TO ENTER AUSTRALIA

Subject to possession of (or inclusion in) a valid passport and to the grant on arrival of an entry permit under the Migration Act 1958-1966, approval is given for the entry of Marie Gerard Denis VELLIN

born at Mauritius

on 11.5.1969

whose photograph is attached.

This authority is valid for twelve months from the date of issue and should be surrendered to the Immigration Authorities on arrival in Australia.

(P.R. HEYDON)
Secretary

Special Conditions: Not to precede parents.



TELEGRAMS 'IMMIGRATION' CANBERRA
TELEPHONE 70412 EXT.
IN REPLY PLEASE QUOTE 66/32424

DEPARTMENT OF IMMIGRATION
CANBERRA, A.C.T. 2600

Authority No.

No.9343

Date of Issue.

4 December 1969

Special Condition: "H"

AUTHORITY TO ENTER AUSTRALIA

Subject to possession of (or inclusion in) a valid passport and to the grant on arrival of an entry permit under the Migration Act 1958-1966, approval is given for the entry of Marie Gerard Denis VELLIN

born at Mauritius

on 11 May 1969

whose photograph is attached.

This authority is valid for twelve months from the date of issue and should be surrendered to the Immigration Authorities on arrival in Australia.

(P.R. HEYDON)
Secretary

Special Conditions: Not to precede parents.



TELEGRAMS 'IMMIGRATION' CANBERRA
TELEPHONE 70412 EXT.
IN REPLY PLEASE QUOTE 66/32424

DEPARTMENT OF IMMIGRATION
CANBERRA, A.C.T. 2600

Authority No.

No.9342

Date of Issue.

4 December 1969

Special Condition: "H"

AUTHORITY TO ENTER AUSTRALIA

Subject to possession of (or inclusion in) a valid passport and to the grant on arrival of an entry permit under the Migration Act 1958-1966, approval is given for the entry of **Marie Fernande Nicole VELLIN**

born at **Mauritius**

on **15 September 1945**

whose photograph is attached.

This authority is valid for twelve months from the date of issue and should be surrendered to the Immigration Authorities on arrival in Australia.

(P.R. HEYDON)
Secretary

Special Conditions: **Not to predece husband**



TELEGRAMS 'IMMIGRATION' CANBERRA
TELEPHONE 70412 EXT.
IN REPLY PLEASE QUOTE 66/32424

DEPARTMENT OF IMMIGRATION
CANBERRA, A.C.T. 2600

Authority No.

No.9341

Date of Issue.

4 December 1969

Special Condition: "H"

AUTHORITY TO ENTER AUSTRALIA

Subject to possession of (or inclusion in) a valid passport and to the grant on arrival of an entry permit under the Migration Act 1958-1966, approval is given for the entry of Roland Gerard VELLIN

born at Mauritius

on 11 April 1946

whose photograph is attached.

This authority is valid for twelve months from the date of issue and should be surrendered to the Immigration Authorities on arrival in Australia.

(P.R. HEYDON)
Secretary

Special Conditions: NIL.

G. R. Velline

Interview (Group 2) ✓

P/K. ✓

Med ✓

M 558 ✓

M 40 ✓

May ✓

Shall I issue to A?

Miss. McLaughlin,

Ph. issue

L's of A.

23308

MINISTRY OF HEALTH
X-RAY DEPARTMENT

CH 6421

Patients coming for X-ray examination must produce this Form properly completed by the Doctor in charge of the case.

Mr/Mrs/Miss Mrs. R. G. VELLIN Age 24

Address 12, Dr. Duwivier St., B.B.

Occupation

Occupation or that of father or husband if married, in case of female patients

Provisional clinical diagnosis

Duration of condition

Anatomical designation of part to be X-rayed Chest PA

Remarks if any

EMIGRATION PURPOSE

State if splint can or cannot be removed.....

Doctor's name..... CHEST CLINIC, PORT-LOUIS Address.....

Date 31/10/1969 Signature.....

RADIOLOGIST REPORT:

**CHEST :- No abnormality
Seen in HEART and LUNG**

Date 9/11/69 19..... Signature M. James

Copies of this form can be had free, on application to the Ministry of Health Headquarters or to the nearest Government Hospital or Dispensary.

M/O 3/11/69 66/32424



Telephone 2-2067
In reply please quote
66/32424

AUSTRALIAN VISA OFFICE,
Third Floor, Anglo-Mauritius House,
Intendance Street, Port Louis,
Mauritius.

3rd June, 1969



Dear Madam,

In order that further consideration may be given to your application for migration to Australia, it will now be necessary for you and any members of your family aged 16 years or more to have a chest x-ray.

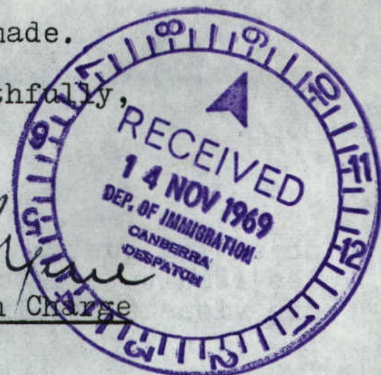
You should take this letter with you to the Government Chest Clinic, La Perouse Street, Port Louis between the hours of 9 a.m. - 11 a.m. on Fridays.

where the necessary arrangements will be made.

Yours faithfully,

Mrs. R.G. Vellin
12 Dr. Duvivier
Plaines Wilhems
BEAU BASSIN

[Handwritten Signature]
Officer in Charge



I, the undersigned, hereby state I have no objection to the Government Chest Clinic forwarding the results of my radiological examination direct to the Australian Visa Office, Mauritius.



[Handwritten Signature]
.....
(Signature of Applicant)

31.10.69..
(Date)

(traduction française - au verso)

Afin, qu'on puisse continuer à considérer votre demande pour immigrer en Australie, il sera maintenant nécessaire que vous subissiez, ainsi que les membres de votre famille ayant 16 ans ou plus, un examen radiographique thoracique.

Vous devrez montrer cette lettre en vous présentant à

où on fera les arrangements nécessaires.

Agréez nos meilleures salutations.

Chef du Bureau

Je, soussigné, déclare que je ne fais aucune objection que la Clinique Thoracique du Gouvernement transmette les résultats de ma visite radiologique directement au Bureau des visas australien a Maurice.

.....
(Signature du Demandeur)

.....
(Date)

2 NOVEMBER 1968

2 3 3 2 1
MINISTRY OF HEALTH
X-RAY DEPARTMENT

CH 6433

*Patients coming for X-ray examination must produce this Form
properly completed by the Doctor in charge of the case.*

Mr/Mrs/Miss..... Roland Gerard VELLIN Age 23..

Address 12, Dr. Duwivier, B. B......

Occupation

Occupation or that of father or husband if married, in case of female
patients

Provisional clinical diagnosis

Duration of condition

Anatomical designation of part to be X-rayed..... Chest PA.....

Remarks if any

..... EMIGRATION PURPOSE.....

State if splint can or cannot be removed.....

Doctor's name..... CHEST CLINIC, PORT-LOUIS Address.....

Date..... 31/10/1969..... Signature.....

RADIOLOGIST REPORT:

**CHEST :- No abnormality
Seen in HEART and LUNG.**

Date..... 4/11/68..... 19..... Signature..... [Signature]

*Copies of this form can be had free, on application to the Ministry of Health
Headquarters or to the nearest Government Hospital or Dispensary.*



M/D 3/11/69 66 | 32424

AUSTRALIAN VISA OFFICE,
Third Floor, Anglo-Mauritius House,
Intendance Street, Port Louis,
Mauritius.

Telephone 2-2067
In reply please quote

66/32424

3rd June, 1969

Dear Sir,

In order that further consideration may be given to your application for migration to Australia, it will now be necessary for you and any members of your family aged 16 years or more to have a chest x-ray.

You should take this letter with you to the Government Chest Clinic, La Perouse Street, Port Louis between the hours of 9 a.m. - 11 a.m. on Fridays.

where the necessary arrangements will be made.

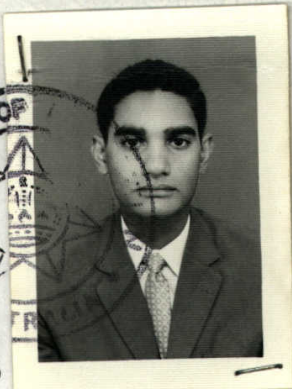
Yours faithfully,

Mr. D.G. Vellin
12 Dr. Duvivier
Plaines Wilhems
BEAU BASSIN

[Signature]
Officer in Charge



I, the undersigned, hereby state I have no objection to the Government Chest Clinic forwarding the results of my radiological examination direct to the Australian Visa Office, Mauritius.



M. 1226

[Signature]
.....
(Signature of Applicant)

31.10.69
(Date)

RECEIVED
14 NOV 1969
DEP. OF IMMIGRATION
CANBERRA
DESPATCH

TAKEN OFF SEARCH FOR ACTION
SEEN

(traduction française - au verso)

Afin, qu'on puisse continuer à considérer votre demande pour immigrer en Australie, il sera maintenant nécessaire que vous subissiez, ainsi que les membres de votre famille ayant 16 ans ou plus, un examen radiographique thoracique.

Vous devrez montrer cette lettre en vous présentant à

où on fera les arrangements nécessaires.

Agréez nos meilleures salutations.

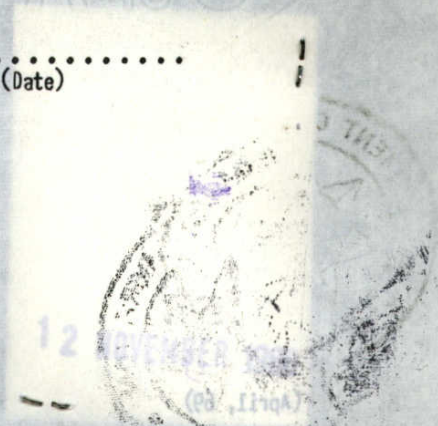
Chef du Bureau

Je, soussigné, déclare que je ne fais aucune objection que la Clinique Thoracique du Gouvernement transmette les résultats de ma visite radiologique directement au Bureau des visas australien a Maurice.

.....
(Signature du Demandeur)

.....
(Date)

PLACED ON SEARCH	19 Nov 1979
ATTACHED TO FILE	MJW 1/12
SEEN	
TAKEN OFF SEARCH FOR ACTION	



NAME : VEHKIN, R.G. + wife + child.

AGE :

RELATIONSHIP TO SPONSOR :


NATURE OF COMPLAINT :

See Med Reports.

PREVIOUSLY SEEN BY HEALTH :

REMARKS :

They could be accepted,
subject to satisfactory check + pays
for the power to.


18 NOV 1969

have been asked for "crays" - wait.

MEDICAL EXAMINATION

(For Persons Seeking Permanent Admission to Australia)

Part A. DECLARATION BY INTENDING MIGRANT

NAME VELLIN Roland Gerard
(Full name in BLOCK capitals)
 ADDRESS 12 D³ Desvignes street, Beau Bassin Mauritius
 DATE OF BIRTH 11th April 1946 Number of Identity Document or Passport

1. Have you or has any member of your family ever had any serious illness or surgical operations? Yes
 If so, give details my father had an operation for duodenal ulcer in 1967

2. Have you or has any member of your family ever suffered from or been suspected of suffering from tuberculosis? No
 If so, give details

3. Have you or has any member of your family ever suffered from mental disease, fits or epilepsy, or been treated in an institution for any kind of these diseases? No yd
 If so, give details

4. What medical attention have you required during the last twelve months? nil

I hereby certify that the information quoted above and supplied by me to the Medical Examiner is correct in every particular—

Signature of intending migrant [Signature]
(To be made in the presence of the Medical Examiner)



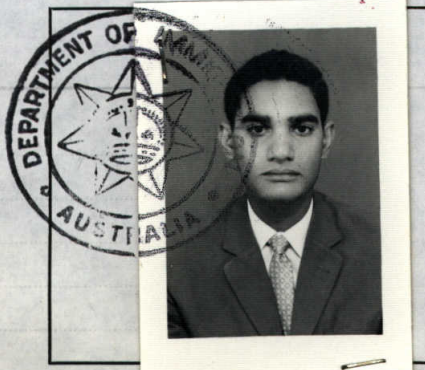
EXAMINATION RESULTS

Part B. TO BE COMPLETED BY THE MEDICAL EXAMINER who should state if 'Normal'. Any disability should be noted and commented upon under 'Remarks' showing whether it is of a temporary or permanent nature and if it is of a major or minor degree.

A Heart <u>normal</u>	J Sight
B Blood Pressure <u>100/70</u>	(a) Without glasses—R <u>6/5</u> L <u>6/5</u>
C Lungs <u>normal</u>	(b) With glasses R <u> </u> L <u> </u>
D Nervous System <u>normal</u>	(if worn)
E Mental condition and intelligence <u>normal</u>	K Genito Urinary Organs <u>normal</u>
F Digestive Organs <u>normal</u>	L Urine—Is albumen or sugar present? <u>no albumen no sugar present</u>
G Skeleton—Bones and Joints <u>normal</u>	M Teeth <u>normal</u>
H Skin <u>2 fox patches of Tinea Versicolor on chest otherwise normal</u>	N Deformities <u>none</u>
I Hearing <u>normal</u>	O If pregnant, period of pregnancy <u>not applicable</u>
REMARKS <u>MIXED DESCENT</u>	Height <u>5'9 1/4"</u> Weight <u>57 1/2 lbs</u>

4 NOV 1969

[Continue overleaf if necessary]



I CERTIFY that I have this day examined the above-named, that the results are as set forth, and in my opinion:

(i)* subject to any special observations under 'Remarks', the above-named is in good health and of sound constitution and not suffering from any mental or physical defect which would cause inability to earn a living in Australia;

(ii)* ~~the above-named suffers a mental or physical defect as quoted and/or is NOT in good health.~~

Y. Joosmye MB BS (London) Date 12/10/69
(Signature and Qualifications)
 Address 326 Royal Rd. Rose Hill Mauritius

* Delete whichever does not apply.

MEDICAL EXAMINATION

For children under 16 years of age

Name in full	Age	Heart and lungs	Skeletal and muscular systems	Nervous and mental condition, and intelligence	Hearing and condition of eardrums	Sight— (a) Without glasses (b) With glasses (if worn)	REMARKS Include particulars of any departure from normal conditions not mentioned under other headings (continue at left of form if necessary)
1.....						(a) (b)	
2.....						(a) (b)	
3.....						(a) (b)	
4.....						(a) (b)	

I HEREBY CERTIFY that the information supplied by me to the Medical Examiner is correct in every particular.

.....
(Signature of Parent or Guardian)

(Signed in the presence of the Medical Examiner) —

Date.....

I CERTIFY that I have this day examined the above-named, that the results are as set forth and in my opinion:

(i)* subject to any special observations under 'Remarks', the above-named excluding..... are in good health, of sound constitution and not suffering from any mental or physical defect which would make them unfit for earning their own living when they become of age to do so;

(ii)*..... suffers a mental or physical defect as quoted and/or is NOT in good health.

.....
(Signature and Qualifications)

Date.....

Address.....

*Delete if does not apply

PHOTOGRAPHS

1.

2.

3.

4.

MEDICAL EXAMINATION

(For Persons Seeking Permanent Admission to Australia)

Part A. DECLARATION BY INTENDING MIGRANT

NAME VELLIN Marie Fernande Nicole
(Full name in BLOCK capitals)
 ADDRESS 12 82 Duval Street, Beau Bassin, Mauritius
 DATE OF BIRTH 15th September 1945 Number of Identity Document or Passport.....
 1. Have you or has any member of your family ever had any serious illness or surgical operations? Yes
 If so, give details my father in law had an operation for dislodged valve
 2. Have you or has any member of your family ever suffered from or been suspected of suffering from tuberculosis? No
 If so, give details.....
 3. Have you or has any member of your family ever suffered from mental disease, fits or epilepsy, or been treated in an institution for any kind of these diseases? No
 If so, give details.....
 4. What medical attention have you required during the last twelve months? antematal, labour and post natal care.
 I hereby certify that the information quoted above and supplied by me to the Medical Examiner is correct in every particular—
 Signature of intending migrant M. Velin
(To be made in the presence of the Medical Examiner)

EXAMINATION RESULTS

Part B. TO BE COMPLETED BY THE MEDICAL EXAMINER who should state if 'Normal'. Any disability should be noted and commented upon under 'Remarks' showing whether it is of a temporary or permanent nature and if it is of a major or minor degree.

A Heart <u>normal</u>	J Sight
B Blood Pressure <u>105/70</u>	(a) Without glasses—R <u>6/5</u> L <u>6/5</u>
C Lungs <u>normal</u>	(b) With glasses R..... L..... (if worn)
D Nervous System <u>normal</u>	K Genito Urinary Organs <u>normal</u>
E Mental condition and intelligence <u>normal</u>	L Urine—Is albumen or sugar present? <u>no albumen no sugar present</u>
F Digestive Organs <u>normal</u>	M Teeth <u>Several filled; healthy</u>
G Skeleton—Bones and Joints <u>normal</u>	N Deformities <u>none</u>
H Skin <u>normal</u>	O If pregnant, period of pregnancy <u>not pregnant</u>
I Hearing <u>normal</u>	Height <u>5' 3 1/2"</u> Weight <u>48 kils</u>

REMARKS.....
 [Continue overleaf if necessary]



I CERTIFY that I have this day examined the above-named, that the results are as set forth, and in my opinion:

(i)* subject to any special observations under 'Remarks', the above-named is in good health and of sound constitution and not suffering from any mental or physical defect which would cause inability to earn a living in Australia;

(ii)* ~~the above-named suffers a mental or physical defect as quoted and/or is NOT in good health.~~

y. J. M. M. B. S. (London) Date 12/10/69
(Signature and Qualifications)

Address 326 Royal Rd Rose Hill Mauritius.

* Delete whichever does not apply.

MEDICAL EXAMINATION

For children under 16 years of age

Name in full	Age	Heart and lungs	Skeletal and muscular systems	Nervous and mental condition, and intelligence	Hearing and condition of eardrums	Sight—		REMARKS Include particulars of any departure from normal conditions not mentioned under other headings (continue at left of form if necessary)
						(a) Without glasses (if worn)	(b) With glasses (if worn)	
1. Marie Grand Denis VELLW	11 May 1969 5 months	normal	normal	normal	normal	(a) Not tested (b)		
2.						(a) (b)		
3.						(a) (b)		
4.						(a) (b)		

REMARKS—continued

I HEREBY CERTIFY that the information supplied by me to the Medical Examiner is correct in every particular.

[Signature]
(Signature of Parent or Guardian)

(Signed in the presence of the Medical Examiner)—

Date: 12/10/69

I CERTIFY that I have this day examined the above-named, that the results are as set forth and in my opinion:

(i)* subject to any special observations under 'Remarks', the above-named excluding is are in good health, of sound constitution and not suffering from any mental or physical defect which would make them unfit for earning their own living when they become of age to do so;

(ii)* health. suffers a mental or physical defect as quoted and/or is NOT in good

[Signature] M.B. B.S. (London)
(Signature and Qualifications)

Date: 12/10/69

Address: 326 Royal Rd. Rowville, Victoria

*Delete if does not apply



PHOTOGRAPHS

2

3

4



DEPARTMENT OF IMMIGRATION
SYDNEY

Reference No. N 69/66902

To: The Secretary
Canberra

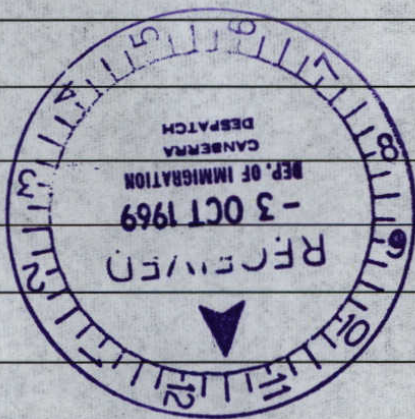
R/S 27/10

Subject: ROLAND GERARD VELLIN

Reference: 66/32424 wife and son.

Enclosed is an M40, 2 x M58
guarantees lodged on behalf of
the a/s named persons by
JOHN RAE RUPERT WILDEN of 4/71
ALBERT ST, HORNSBY 2077.

For your further action.



Awaiting
return of medical form

T 22/10/69

G. E. HITCHINS
G. E. HITCHINS,
Commonwealth Director of Migration

1/10/69.

Canberra
66/32424

NOMINATION FOR ENTRY TO AUSTRALIA.

TO THE NOMINATOR.—Please Read Carefully.

- (a) All questions in this form are asked for sound reasons connected with your desire to bring your nominees to Australia. If you will answer every question in Parts "A", "B" and "C" clearly and fully, this will shorten the time needed to deal with your application and will save you and your nominees inconvenience.
- (b) Only one person and those directly dependent on him may be nominated on this form. A separate form must be completed in respect of any other person whom it is intended to nominate for entry to Australia.
- (c) Two photographs of each person nominated on this form must be attached to this application. These photographs should be of the head and shoulders only, taken without a hat and with a plain background. They should be approximately 2½ inches x 2¼ inches in size. The back of one photograph of each person concerned should be endorsed with his or her name.
- (d) All applications for the admission of Italian nominees from Italy must be accompanied by a Certificate of Family Status (Situazione Di Famiglia) given by the local authorities in Italy, in respect of such nominees.

FOR OFFICIAL USE ONLY.	
SERIAL No.—	SPECIAL CONDITIONS—
TYPE OF VISA OR ENDORSEMENT TO BE ISSUED IF CONDITIONS SATISFIED.	
VALID FOR INITIAL STAY IN AUSTRALIA OF—	
AUTHORIZED OFFICER.....	DATE.....

THE COMMONWEALTH DIRECTOR OF MIGRATION
 I, (Given Names) JOHN DAVID RUPERT
ROLAND GERARD (Surname) VELLIN WILDEN
 of (Address) 4.71 ALBERT ST HORNSBY hereby nominate
 the person or persons detailed in this form for entry to Australia. 2077 N.S.W.

PART A. DETAILS OF NOMINEE.

1. Family Name VELLIN Given Names ROLAND GERARD
(BLOCK Letters)

2. Address MAURITIUS PLAINE-WILHEMUS
(Country) (City or Province)
BEAU BASSIN LEICHMAN 12
(Suburb or Village) (Street) (No.)

3. Nationality MAURITIAN 4. Sex MALE 5. Marital Status(1) MARRIED

6. Relationship to Nominator(2) COUSIN If Wife—Date of Marriage 18.4.1968

7. Date of Birth 11.4.1946 8. Country of Birth MAURITIUS Town or Village BEAU BASSIN

9. Details of Dependants—Required whether or not they are to accompany the nominee to Australia. If any dependants are not living in the same country as the nominee details of address should be given.

Names	Relationship to Nominee	Date of Birth	Place of Birth	Accompanying Nominee.(3)
Wife <u>NICOLE</u> <small>(Given Names)</small>	Wife	<u>SEPT. 1945</u>	<u>MAURITIUS</u>	<u>YES</u>
Maiden Name(4) <u>MOUTIA</u> Dependent Children (Given Names)— <u>DEMIS</u>	<u>SON</u>	<u>11.5.69</u>	<u>MAURITIUS</u>	<u>YES</u>
Other Dependants(5)				

Notes—(1) State whether married, single, widowed, divorced or legally separated.
 (2) State whether "son", "brother", "sister-in-law", &c., or "friend".
 (3) Answer "Yes" or "No".
 (4) Family name of wife before marriage.
 (5) Quote both Family and Given Names.

ACKNOWLEDGED
DATE 24/SEP/1968
(Part A continued overleaf.)

PART B. DETAILS OF NOMINATOR.

Name WILDEN. JOHN RAE ROBERT.
(Surname in BLOCK letters) (Given Names)

Address 471 ALBERT ST MORNSBY NSW Sex MALE
Birth—Date 15.5.1944 Country MAURITIUS Town VACUAS.
Marital Status MARRIED Nationality BRITISH
Aliens Registration Reference No. (If not Australian citizen or British subject) BRITISH SUBJECT
Date of Naturalization (if naturalized) _____ Certificate No. _____
If not born in Australia—Date of Arrival 18.8.68 Last Permanent Address
overseas 21 CHARVSEFOT RD. LONDON W.16.
Length of residence in Australia 14 MONTHS.

PART C. SUMMARY OF NOMINATION.

Nationality of Nominee MAURITIAN.

Name of Nominee—(Family Name) VELLIN (Given Names) ROLAND GERARD
Dependants Accompanying—(Names and Dates of Birth) WIFE. "NICOLE VELLIN" SEPT. 1945. "DENIS VELLIN" SON. 11.5.1969.
Dependants Remaining in Home Country NOVE
Date of Birth of Nominee 11.4.46. Relationship to Nominator COUSIN.
Country of Residence of Nominee MAURITIUS. Occupation SWORN WEIGHER.

PART A. DETAILS OF NOMINEE—continued.

- 10. Usual Occupation SWORN WEIGHER. 11. Proposed occupation in Australia ?
- 12. Special Qualifications—Has nominee any special qualifications or skills (University degree, apprenticeship to a skilled trade, &c.)? If so, give details and submit certified copies and English translations of documents indicating the type of qualifications. CERTIFICATE of WEIGHER?
- 13. Name of Nominee's Father VELLIN. (Family Name) MICHEL ALEX. (Given Names)
- 14. Previous Residence—Has nominee previously resided in Australia? (If "Yes"—give dates and places of residence) NO.
- 15. Previous Application—Has any application previously been made for the entry of the nominee or his dependants to Australia? (If "Yes"—give details of when and where application made) YES. 1968.
- 16. Disabilities—Are you aware of any disabilities suffered by the nominee or any of his dependants (e.g., loss of an eye or a limb, a history of serious illness or mental instability, or a serious criminal conviction) which would require the application to be given special consideration? If "Yes"—give details. NO.

I CERTIFY that the particulars given in this nomination are, to the best of my knowledge and belief correct, and I understand that, if my nomination is accepted, visas for travel to Australia will be granted to my nominee and his or her dependants (if any) only if they comply with the requirements for entry to Australia.

Date 23.9.69. Signature of Applicant [Signature]

FOR OFFICIAL USE ONLY.	
STATE FILE NO.	SPECIAL CONDITIONS.
SERIAL NO.	
TYPE OF VISA OR ENDORSEMENT TO BE ISSUED IF CONDITIONS SATISFIED	
VALID FOR INITIAL STAY IN AUSTRALIA OF.	
AUTHORIZED OFFICER	DATE

ACCOMMODATION DECLARATION

I, JOHN RAE RUPERT WILDEN. of
471 ALBERT ST. HORNSBY NSW 2077.

- (a) hereby undertake to provide suitable accommodation for the undermentioned person/s for a period of twelve months from the date of ~~his/her~~/their arrival in Australia.

* OR

- ~~(b) declare it to be my belief that the undermentioned person/s will be able to transfer to Australia, free of encumbrance, sufficient funds (not being less than \$A2,500 or its equivalent) to enable him/her/them to purchase adequate suitable accommodation upon arrival in Australia.~~

Person/s on whose behalf declaration is being made GERARD VELLIN
HIS WIFE AND HIS SON BABY.

Signature _____

Date _____

Witness MAULGUET CHRISTIAN.

* Delete whichever is inappropriate

ACCOMMODATION DECLARATION

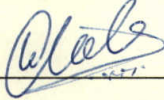
I, JOHN RAE RUPERT WILDEN. of
4.71 ALBERT ST. HORNSBY N.S.W 2077.

- (a) hereby undertake to provide suitable accommodation for the undermentioned person/s for a period of twelve months from the date of ~~his/her~~ their arrival in Australia.

* OR

- ~~(b) declare it to be my belief that the undermentioned person/s will be able to transfer to Australia, free of encumbrance, sufficient funds (not being less than \$A2,500 or its equivalent) to enable him/her/them to purchase adequate suitable accommodation upon arrival in Australia.~~

Person/s on whose behalf declaration is being made GERARD VELLIN.
HIS WIFE AND HIS BABY.

Signature 

Date 23.9.69.

Witness MAULQUET. CHRISTIAN.

* Delete whichever is inappropriate

66/32424

27th August, 1969.

Dear Sir,

I refer to your recent interview in connection with your application for admission to Australia for residence.

To enable further consideration to be given to your admission will you please arrange for your sister in Australia to lodge a Form M40 and accommodation declaration in favour of you and your family with the Commonwealth Director of Migration in the capital city of the State in which she resides.

Also attached is a medical examination form for your son who should be examined by the same doctor as you and your wife have been instructed to be examined by in our letter of 3 June, 1969.

Attached are your birth certificates.

Yours faithfully,



(E. M. ROBINSON)
for Secretary.

R. E. Vellin, Esq.,
12 Dr. Duvivier Street,
Beau Bassin,
MAURITIUS.

Lorraine

Ask applicant to have
parents or sister in Australia
Lodge 1140 and accom. declaration
in their forum with COM.

75
15
9

Department of Immigration
INTERVIEW REPORT FORM
MAURITIUS

File 66/32424
No. 2265

1. APPLICANT: VELLIN | ROLAND GERARD | 2
Family name | Given names | Group

2. BIRTH: Beau Bassin | Mauritius | 11.4.46 | 3. NATIONALITY: Mauritian
Town or City | Country | Date

4. OCCUPATION: Breadwinner: Weight bridge | Proposed
Others: attendant | In Australia:

5. DOCUMENTATION: Presented: Birth - Applicant Wife Children
Marriage Police Character other
Outstanding:

6. FAMILY COMPOSITION OF APPLICANT: Wife Margie Fernandez N. | 15.9.45 |
Name | Date of Birth | Group

Name	D.O.B.	Gr.	Name	D.O.B.	Gr.	Name	D.O.B.	Gr.
1. <u>Margie GERARD N.</u>	<u>15.9.45</u>		4.			7.		
2.			5.			8.		
3.			6.			9.		

7. DISPOSITION OF RELATIVES NOT INCLUDED IN APPLICATION:

	In Mauritius							In Australia							Elsewhere	
	No	S	M	W	D	Age/s	Has Applied Yes/No	No.	S	M	W	D	Period	Where		Details
Son																
Dtr.																
Bro																<u>Bro England</u>
Sis	<u>1</u>		<u>✓</u>			<u>25</u>	<u>✓</u>	<u>1</u>	<u>✓</u>				<u>19/5/69</u>	<u>SYDNEY</u>		
Mthr													<u>19/5/69</u>			
Fthr																

	In Mauritius							In Australia							Elsewhere	
	No	S	M	W	D	Age/s	Has Applied Yes/No	No.	S	M	W	D	Period	Where		Details
Son																
Dtr																
Bro	<u>2</u>	<u>1</u>	<u>1</u>			<u>25.19</u>	<u>✓</u>									
Sis	<u>3</u>	<u>3</u>				<u>17.14.9</u>	<u>✓</u>									
Mthr	<u>✓</u>					<u>5</u>	<u>✓</u>									
Fthr	<u>✓</u>					<u>51</u>	<u>✓</u>									

8. WORK HISTORY: Weight bridge attendant - 5 year
Wife Shorthand typist. 3 year

9. CRIMINAL CONVICTIONS: States none

10. INTERVIEWING OFFICER'S COMMENTS: Pleasant young couple who have a 15 day old child (not at interview)
Applicant is a man, weighs and his wife is a shoemaker left hand. Both speak reasonable English. Applicant's family parents are new in town since May 1969. Father is a doctor. Can provide accommodation -
Have sufficient money for fees.
Accept
Child to be seen
next after child is 3 months

11. ASSESSMENT OF FAMILY: Group 2

Falls to meet standards	Barely meets standards but acceptable	<u>meets standards</u>	above standards	Well above Standards.
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12. RECOMMENDATION: Acceptance recommended / not recommended Boulton 27/5/69
Interviewing Officer

13. APPROVED/NOT APPROVED Rayne 28/5/69



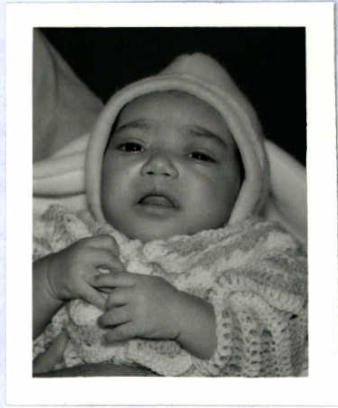
16 JUNE 1969

AM NEE STUDIO

4, DUVIVIER STREET
BEAU DASSIN
MAURITIUS

4 P.P

3.25



16 JUNE 1969



MAURITIUS

007878

Certificate from the Director of Public Prosecutions

On the application of **ROLAND GERARD VELLIN**.....

born on the **11th April, 1946**,....., in the District of **Plaines Wilhems**,

I, **MAURICE RAULT**,....., Director of Public Prosecutions

of Mauritius, have the honour to inform whomsoever it may concern that the said

ROLAND GERARD VELLIN,.....

....., whilst in Mauritius,

has not been convicted of any crime or misdemeanour.

CHAMBERS,
PORT LOUIS,

This **23rd**..... day of **June**,....., 196**9**.....



.....
Director of Public Prosecutions.

(M. RAULT).



MAURITIUS

007879

Certificate from the Director of Public Prosecutions

On the application of MARIE FERNANDE NICOLE MOUTIA, the lawful wife
of ROLAND GERARD VELLIN,

born on the 15th September, 1945, in the District of Plaines Wilhems,

I, MAURICE RAULT, Director of Public Prosecutions

of Mauritius, have the honour to inform whomsoever it may concern that the said

MARIE FERNANDE NICOLE MOUTIA,

whilst in Mauritius,

has not been convicted of any crime or misdemeanour.

CHAMBERS,
PORT LOUIS,

This 23rd day of June, 1969.



M. Rault
.....
Director of Public Prosecutions.
(M. RAULT).

2-2067

66/32424

3rd June, 1969

Dear Sir,

Dr.
Y. Joomye, Route Royale, Rose Hill, between the hours
of 9 a.m - 12 noon and 4 - 6 p.m. from Monday to Friday.

for an appointment.

Please telephone 44262

Mr. & Mrs. R.G. Vellin
12 Dr. Duvivier
Plaines Wilhems
BEAU BASSIN

2-2067

66/32424

3rd June, 1969

Government Chest Clinic, La Perouse Street, Port Louis ^{the}
between the hours of 9 a.m. - 11 a.m. on Fridays.

Mr. & Mrs. R.G. Vellin

66/32424

66/32424

3rd June, 1969

3rd June, 1969

Dear Sir,

Dear Sir,

With reference to your application for admission to Australia, it would be appreciated if you would forward to this office as soon as possible the undermentioned documents:-

Birth Certificates for yourself, your wife.
Police Certificate for yourself and your wife.

41 photos of son.

Yours faithfully,

Officer in Charge

Mr. R.G. Vellin
12 Dr. Duvivier
Plaines Wilhems
BEAU BASSIN



66/32424

66/32424

3rd June, 1969

3rd June, 1969

Dear Sir,

With reference to your application for admission to Australia, it would be appreciated if you would forward to this office as soon as possible the undermentioned documents:-

- Birth Certificates for yourself, your wife.
- Police Certificate for yourself and your wife.

A. J. J.

Yours faithfully,

Officer in Charge

Mr. R.G. Vellin
12 Dr. Davivier
Plaines Wilhems
BRAS BASIN

2-2067

66/32424

14th May, 1969

Dear Sir,

27th May, 1969
9.00 a.m.

B

Mr. R.G. Vellin,
12 Dr Duvivier
Plaines Wilhems
BEAU BASSIN

10. Particulars of previous applications and/or residences in Australia
 1st APPLICATION 9 MONTHS AGO — NOT APPROVED
11. Details of any mental illness, other serious illness, or physical disability (for any member of the family or dependants) NIL
12. Education of applicant (number of years completed):
 (a) Primary 6 years. (b) Secondary 4 years. (c) Tertiary _____ years.
13. Languages spoken (State proficiency) ENGLISH & FRENCH
14. Details of special qualifications or skills (University degree, apprenticeship to a skilled trade, etc.)
 MAURITIUS SWORN WEICHER'S CERTIFICATE
15. Particulars of ALL your employment since leaving school, including apprenticeship (if any): also state particulars of service in Armed Forces. (Continue on plain paper if necessary.)

Dates.	Name and Address of Employer.	Nature of Firm's Business.	Precise Occupation.
1 st July 1964	ALBION DOCK - PORT LOUIS MAURITIUS	SHIPPING & DISEMBARKATION OF GOODS	WEIGHING OF GOODS

16. Proposed employment in Australia WEICHER OR MECHANIC
17. Amount of capital available for transfer to Australia 500 DOLLARS
18. Relatives in Australia, if any:— MANY RELATIVES

Name:	Address:	Relationship:
MR P. WORSFOLD	36 RAYMOND ST DANDENONG 3175 VIC	COUSIN
MR K PASRAL	40 - - - do - - - do - - - do - - - do	COUSIN

19. Private accommodation will be available in Australia? (Answer yes or no) YES

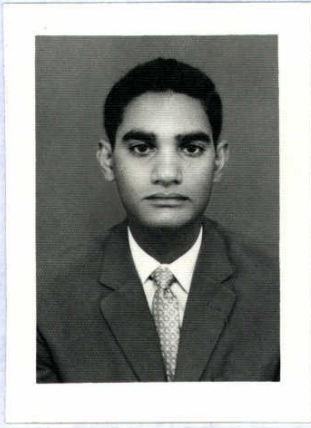
I certify that to the best of my knowledge and belief the particulars given in this application are correct.

Signature [Signature] Date 6/11/68

R

O. H. M. S.

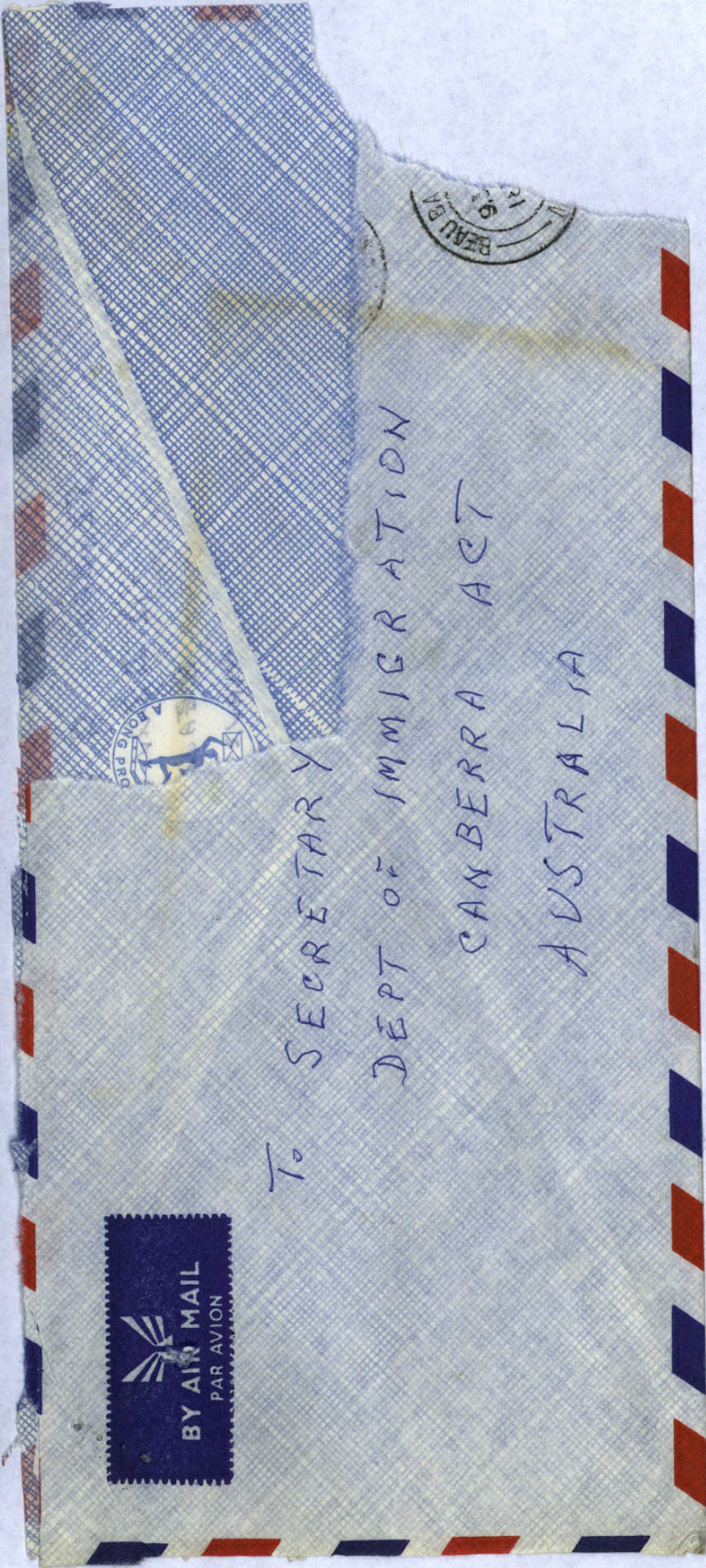
DEPARTMENT OF IMMIGRATION
CANBERRA, A.C.T.



12 NOVEMBER 1968

12 NOVEMBER 1968

THIS IMAGE IS REPRODUCED FROM A DAMAGED PAGE
WITH A PORTION OF THE INFORMATION MISSING.



SENDER : G VELLIN
12 D. DUVIVIER ST
BEAUBASSIN
NIARRETOUS

Dear Sir,

7th May 1968.

I refer to your application for entry to Australia for residence.

Your application has been duly considered but I am sorry it has not been approved.

Yours faithfully,

(P.R. HEYDON)
Secretary R.

R.G. Vellin, Esq.,
Drouviver Street,
TOWN OF BEAU BASSIN,
Mauritius.

Records please
1/A file on

Jaqueline Vellum
N/R

M. R. SUBSECTION
19 APR 1968

THIS IMAGE IS REPRODUCED FROM A DAMAGED PAGE
WITH A PORTION OF THE INFORMATION MISSING.



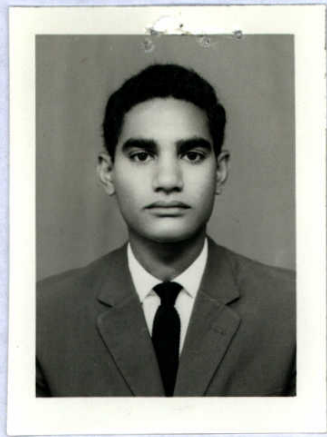
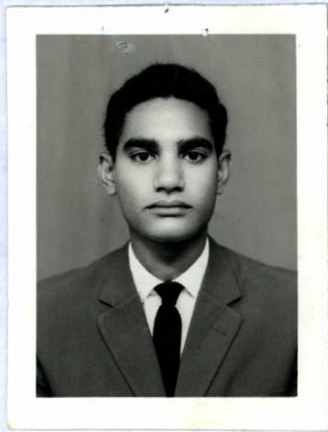
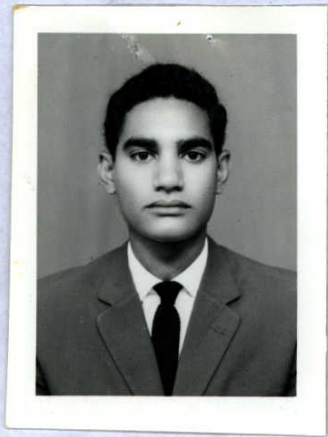


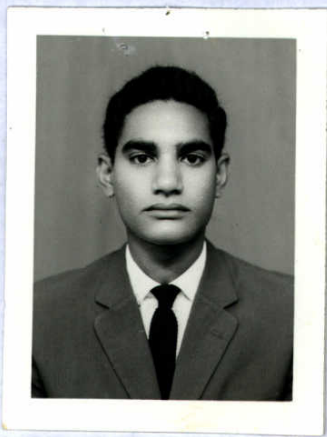
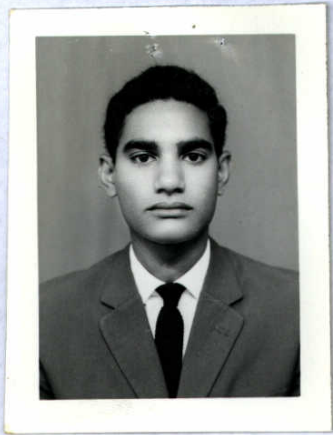
Sender: *S. W. F. S.*

New York, N.Y.
MAURITIUS

AM L. B. 1871
MASTERS

G.P.O.
NEW YORK





Roland Gérard
Velhin

10. Particulars of previous applications and/or residences in Australia NONE

11. Details of any mental illness, other serious illness, or physical disability (for any member of the family or dependants) NONE

12. Education of applicant (number of years completed):

(a) Primary 6 years. (b) Secondary 5 years. (c) Tertiary NONE years.

13. Languages spoken (State proficiency) ENGLISH AND FRENCH

FLUENT IN BOTH

14. Details of special qualifications or skills (University degree, apprenticeship to a skilled trade, etc.)

SWORN WEIGHER

15. Particulars of ALL your employment since leaving school, including apprenticeship (if any): also state particulars of service in Armed Forces. (Continue on plain paper if necessary.)

Dates.	Name and Address of Employer.	Nature of Firm's Business.	Precise Occupation.
<u>1st July 1964</u>	<u>ALBION DOCK</u>	<u>STEVEDORING AND EXPORT OF SUGAR</u>	<u>WEIGHING</u>
<u>TO DATE</u>	<u>PORT-LOUIS</u>	<u>AND OTHER GOODS</u>	<u>OF SUGAR</u>
	<u>MAURITIUS</u>		<u>AND OTHER</u>
			<u>GOODS</u>

16. Proposed employment in Australia FIRST CHOICE - WEIGHER

17. Amount of capital available for transfer to Australia \$ 200

18. Relatives in Australia, if any:—

Name:	Address:	Relationship:
<u>KARL PASCAL</u>	<u>corner of Kyrleham & Hammond</u> <u>Rds Flat no 3 Dandenong 3175</u> <u>Victoria.</u>	<u>COUSIN</u>

19. Private accommodation will be available in Australia? (Answer yes or no) YES

I certify that to the best of my knowledge and belief the particulars given in this application are correct.

Signature

Grellier

Date 17/12/68

DETAILS OF RELATIVES

Name of Applicant ROLAND GÉRARD VELLIN

Name of Relative	Country of Residence (including Australia)	Whether Applied for entry to Australia?	If so, with what result?	If relative has not applied does he/she intend to?
PARENTS OF APPLICANT:				
Father: <u>Dr. ALEX. VELLIN</u>	<u>MAURITIUS</u>	<u>NO</u>	<u>NONE</u>	<u>YES</u>
Mother: <u>ANNE VELLIN</u>	<u>MAURITIUS</u>	<u>NO</u>	<u>- " -</u>	<u>YES</u>
PARENTS OF APPLICANT'S WIFE:				
Father:
Mother:
BROTHERS AND SISTERS OF APPLICANT:				
<u>JACQUELINE VELLIN</u>	<u>MAURITIUS</u>	<u>YES</u>	<u>JUST ARRIVED</u>
<u>ANDRÉ VELLIN</u>	<u>ENGLAND</u>	<u>NO</u>	<u>NONE</u>	<u>NO</u>
<u>MICHELLE VELLIN</u> <u>17 years old</u>	<u>MAURITIUS</u>	<u>YES</u>	<u>12 YEARS old has applied but has not obtained permit of residence</u>	<u>is applying again with father and mother</u>
BROTHERS AND SISTERS OF APPLICANT'S WIFE:				
.....
.....
.....
.....
.....
.....
.....
.....

1/6/66

Dear Sir/Madam,

An application for entry for residence in Australia is attached in accordance with your recent request.

If you wish to make an application to settle in Australia, the enclosed application forms should be completed, paying attention to the instructions on the yellow form, and returned to me. Please be sure the enclosed form is fully completed and photographs required are enclosed.

It is not necessary for you to complete medical or x-ray examinations at this stage.

You are reminded that it would be in your own interest not to dispose of any property or make any firm arrangements to travel here until you have been informed of the outcome of your application.

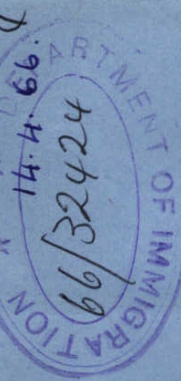
Yours faithfully,

P. R. Heydon
(P.R. HEYDON)
Secretary

12, Leishman Street

Beau Bassin
14.4.66

66/32424



To Secretary of Immigration.

Sir, I would be grateful if you could let me have 2 forms application for entry for residence and 2 medical Examination forms.
I am Sir,
your obedient servant,

Gerard Vellin

M^r Roland Gerard Vellin,
12, Leishman Street,
Beau - Bassin.
Mauritius.



21 APR 1966

AN AIR LETTER SHOULD NOT CONTAIN AN ENCLOSURE IF IT DOES IT WILL BE REJECTED OR BY ORDINARY MAIL

BY AIR MAIL

PAR AVION

AIR LETTER
AÉROGRAMME



To Secretary
Department of Immigration
Camberra A.C.T.
Australia.

←Second fold here→

Sender's name and address:

M^r Roland Gerard Velli
12, Leishman Street
Beau-Bassin
Mauritius.

←First fold here→

AN AIR LETTER SHOULD NOT CONTAIN ANY
ENCLOSURE; IF IT DOES IT WILL BE SURCHARGED
OR SENT BY ORDINARY MAIL.

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