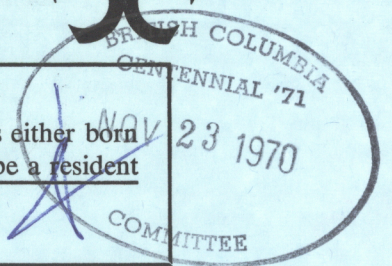




APPLICATION FOR THE PIONEER MEDALLION



ELIGIBILITY

For purposes of this award, a *Pioneer* shall be any person who was either born in Canada or a resident of Canada prior to January 1, 1897, but must be a resident of British Columbia NOW.

Award to be made during 1971.

PLEASE PRINT OR TYPE

- 1. Name in full ~~Mr.~~ ~~Mrs.~~ ~~Miss~~ MR. KNELSEN ISAAK  
(Family name.) (Given names.)
- 2. Date of birth 16 12 1893 3. Place of birth GRETNA, MAN.  
(Day.) (Month.) (Year.)
- If married—
- 4. Maiden name \_\_\_\_\_
- 5. Husband's given names \_\_\_\_\_
- 6. Wife's full maiden name \_\_\_\_\_
- 7. Occupation before retirement FARMER
- 8. If born in Canada but outside British Columbia—
  - (a) When did you first come to British Columbia 15 MAY 1941  
(Day.) (Month.) (Year.)
  - (b) Where did you first live in British Columbia GRASSY PLAINS, BC
  - (c) Where did you live immediately before coming to British Columbia WYMARK, SASK.
- 9. If born outside Canada—
  - (a) Where did you live immediately before coming to Canada \_\_\_\_\_
  - (b) When did you first come to Canada \_\_\_\_\_  
(Day.) (Month.) (Year.)
  - (c) Where did you first live in Canada \_\_\_\_\_
  - (d) When did you first come to British Columbia \_\_\_\_\_  
(Day.) (Month.) (Year.)
- 10. Names of parents in full, including maiden name of mother—
  - Father KNELSEN JACOB  
(Family name.) (Given names.)
  - Mother MILLER SUSAN  
(Maiden name.) (Given names.)
- 11. Given names of brothers or sisters ABE + JACOB  
SUSAN-MARIE-HELEN-GERTRUDE-ANNA-ELIZABETH  
KATHERINE
- 12. Any remarks you may care to make about your family background or experiences (if required, please attach separate sheet) \_\_\_\_\_
- 13. RR 2 BURNS LAKE, BC Isaac Knelsen  
(Present address of applicant.) (Signature of applicant.)  
NOV. 1971, 1970.  
(Date.)

RETURN THIS FORM IN QUADRUPPLICATE TO YOUR LOCAL CENTENNIAL COMMITTEE FOR FORWARDING TO VICTORIA. NO FORMS WILL BE ACCEPTED AFTER NOVEMBER 19, 1970.

To be completed by the local Centennial Committee

14. Edwin Braaten Southside Centennial Committee  
(Signature of local Centennial Committee Chairman.) (Name of local Centennial Committee.)

15. What, if any, verification of date of birth was available \_\_\_\_\_