

SOLLING, WILHEMINA.

WO 399/7796

NO 399/7796

Number.

From whom and Date.

2  
Res. S.

*A.M.D.*

SUBJECT.

KEPT.

1189

*Miss WILHEMINA Jelling*

11  
1.

Date of Registry— 27/5/20

Former paper.

Referred to

Date.

Referred to

Date.

*Pe*  
*65*

**CLOSED**

Referred to.

Date.

~~*A.M.D.*~~

WEEDED IN 1936

SUB-NUMBERS 65

~~*72*~~

2/6

2/11/17641 DESTROYED.

DOCTS. FROM a box ENCLOSED.

~~*A.M.D.*~~  
~~*Room 682*~~  
~~*Miss Collins*~~  
*Closed*

24/6

**CLOSED**

For authority to p.a.

*A.M.D.*  
*F.S.*



Register No.

2 Res S

Minute Sheet No.

Miss Wilhelmina Tolling

72 Will you kindly complete the attached form stating the final rate of pay received by the name & return to us as early as possible

A.M.04  
1/6/20

*W. H. Smith*  
Master-in-Chief  
G.A.M.N.S.

2 Res

S65

Ask C.P. to C. what rate was being issued

*SM*  
Fr  
14/6/20

Reply enclosed

amby

Particulars inserted

*G. H. ...*  
Fr  
14/6/20

Particulars of service forwarded to Australian Authorities

A.M.04  
23/6/20

VERIFICATION FORM  
-----

This is to certify that the undermentioned lady  
has served in the Queen Alexandra's Imperial Military Nursing  
Service Reserve and the following particulars are correct.

Rank held on termination of Service. *Sister*  
Full Christian and Surname. *WILHELMINA SÖLLING.*  
Date of appointment. *6<sup>th</sup> October 1915*  
Date of termination of service. *25<sup>th</sup> October 1919.*  
Reason for ceasing to perform service. *Demobilized as surplus to requirements.*

WAR OFFICE.

A.M.D.4.  
Date *1/6/20*

*sd. A. B. Snell*  
Matron-in-Chief,  
Q.A.I.M.N.S.

Rate of pay received.

F.2.  
Date.

*Pay £ 65. ha*  
*and Pay £ 20 ha.*

*sd. G. A. Round.*

Catalogue Reference: WO/399/7796

Encl. to 2/Res.S./65. (F.2.D.)

19 December, 1921.

Madam,

With reference to your letter of the 19th October, I am directed to acquaint you that you received a gratuity of £47.0.0. in respect of your service as Sister, Queen Alexandra's Imperial Military Nursing Service(Reserve).

I am,

Sir,

Your obedient Servant,

(Sgd.) E. D. Lloyd

for the Secretary (Finance).

Miss W. Solling,  
Fitzgerald Road,  
Ermington,  
N.S. Wales,  
Australia.



WAR OFFICE  
RECEIVED  
15 MAY 1916  
G

2  
Reserve D.  
65

Register No.

Minute Sheet No.

Australia

Mrs M. Solling  
Medical Board

Am Det  
15. 5. 16

Embarked for France 6. 10. 15

Medical Board at Loulogne 27. 4. 16

Granted 3 weeks leave to England to 17. 5. 16

~~Returns to duty 20. 5. 17~~

Arrange Return to France

31. 5. 17

Coll.

H/2 relating to pay etc in  
121/8 sess / 3661.

has  
4/7/18

To  
S.R.I.A.

Is it permitted for this lady to be issued  
with a certificate of entitlement for Australia  
via New York. & for her to take her journey  
for an indefinite period.

Will you kindly give us a ruling for  
such cases. so that we may know for  
future guidance in similar cases.

S.S. 19  
A.M.D.H.

*J. A. Smith*  
Mater. in. Chief  
Q.A.I.M.S.

A.M.D. 4.

No, ~~the~~ passages to Australia via  
New York are not permissible at the present time  
Repatriation via the overland route is  
only granted when accommodation via the  
all sea route is unavailable

*C. A. Blackburn*  
Capt

6/5/19  
S.H.A.

Certificate of entitlement to New York.  
Terminates 8 days after embarkation.

Passed to Special Military Hospital Millfield  
Being here for temporary duty pending repatriation

24/7/19



Register No.

Minute Sheet No.

Gratuity forwarded

Not insured

A.M.W4

26.7.19.

Eastern Command Paymaster informed re. pay.  
& allowances.

26.7.19.

J.H.

Sailed for America & repatriation S.S. Cedric 17.10.19.  
Temporary engagement terminated 25.10.19. i.e. 8  
days after date of embarkation

A.M.W4

27.10.19.



Casualty Form—Active Service.

2885 65

Regimental No. 8/1100 Rank Q.A.M.S. Name Solling Wilhelmina

Enlisted (a) A/Sister Terms of Service (a) \_\_\_\_\_ Service reckons from (a) \_\_\_\_\_

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N.C.Os  
 Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) Awarded R.R.C. 2<sup>nd</sup> Class. Supp to G.O. 30716 dt 3/6/18.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Lo y Gen HP			
		" Lo. HP, Calais (of Matron)		17/15	
		" HP 17 <sup>th</sup> /16			
		" Eng. Sick leave (3 weeks)		28 <sup>th</sup> /16 - 19/15	
		" 13. Gen HP (temporarily)		21 <sup>st</sup> /16	B. logue. O <sup>d</sup> /21 <sup>st</sup> /16
		" 18 Gen HP		23 <sup>rd</sup> /16	Etaples dt 29 <sup>th</sup> /16
		" 8 C.C.S.		29 <sup>th</sup> /16	" dt 30 <sup>th</sup> /16
		" Leave 12/1 - 26/17			
		" HP 3/2 3 <sup>rd</sup> 10 5H sick 4/2			
		" 3 <sup>rd</sup> 10 4 9H 1 <sup>st</sup> 2. To Eng sick 16 <sup>th</sup> /17			
		" 7 Gen HP		4 <sup>th</sup> /17	B 213 10 <sup>th</sup> /17

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) e.g., Signaller, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

To be sent to UK for report to New York CR 4/13/21/13. U.O. 11/7/19  
 To Camp Demob. 2-26 23.4-19

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A-36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		18 ccs.		16 <sup>9</sup> / <sub>17</sub>	B213 22 <sup>9</sup> / <sub>17</sub>
		55 ccs.		19 <sup>11</sup> / <sub>17</sub>	
2 <sup>14</sup> / <sub>17</sub>	49 ccs	49 ccs		26 <sup>11</sup> / <sub>17</sub>	
29 <sup>12</sup> / <sub>17</sub>		18 ccs		23 <sup>12</sup> / <sub>17</sub>	
19 <sup>1</sup> / <sub>18</sub>	18 "	Leave to Lannes 14 <sup>1</sup> / <sub>18</sub> - 29 <sup>1</sup> / <sub>18</sub>			
31 <sup>3</sup> / <sub>18</sub>	57 ccs	57 ccs		29 <sup>3</sup> / <sub>18</sub>	
14 <sup>4</sup> / <sub>18</sub>	22 "	22 ccs		12 <sup>4</sup> / <sub>18</sub>	
27 <sup>4</sup> / <sub>18</sub>	44 "	44 ccs		26 <sup>4</sup> / <sub>18</sub>	
11 <sup>5</sup> / <sub>18</sub>		3 Can ccs		7 <sup>5</sup> / <sub>18</sub>	
8 <sup>9</sup> / <sub>18</sub>	22 "	22 ccs		2 <sup>6</sup> / <sub>18</sub>	
5 <sup>9</sup> / <sub>18</sub>	Diagnosis	Adm 2 SSI (Pyrexia Myalgia)		31 <sup>8</sup> / <sub>18</sub>	Sub to 3034
2 <sup>10</sup> / <sub>18</sub>		To Con St, Etretat.		27 <sup>9</sup> / <sub>18</sub>	
21 <sup>10</sup> / <sub>18</sub>		To Duty		18 <sup>10</sup> / <sub>18</sub>	
26 <sup>10</sup> / <sub>18</sub>	2 SSI	To 2 Sty Hosp.		21 <sup>10</sup> / <sub>18</sub>	B213
9 <sup>11</sup> / <sub>18</sub>		11 Sty Hspl		5 <sup>11</sup> / <sub>18</sub>	
25 <sup>1</sup> / <sub>19</sub>	11 SSI	Leave to Lannes 23 <sup>1</sup> / <sub>19</sub> to 6 <sup>2</sup> / <sub>19</sub>			
16 <sup>3</sup> / <sub>19</sub>	32 SSI	To 32 SSI		12 <sup>3</sup> / <sub>19</sub>	
30 <sup>3</sup> / <sub>19</sub>		44 ccs		27 <sup>3</sup> / <sub>19</sub>	
5 <sup>4</sup> / <sub>19</sub>	64 ccs	64 ccs		30 <sup>3</sup> / <sub>19</sub>	



Cornwall House,  
Stamford Street,  
S.E.1.

E.R.C. 2/Reserve/S/65. (A.M.D.4.)

29 October, 1919.

Q.A.I.M.H.S.R.  
Sister.  
Miss W. Solling.  
Birmingham Special  
Military Surgical  
Hospital.  
Northfield.

Sir,

I am directed to inform you, as the marginally  
named lady has embarked for United States of America  
her temporary engagement is terminated as from the  
25th October, 1919, inclusive, i.e., 8 days after  
date of embarkation.

I am,

Sir,

Your obedient Servant,

*F. M. Hodgins*

*for*

Matron-in-Chief,  
Q.A.I.M.H.S.

The General Officer,  
Commanding,  
Southern Command.

S/65 *Wm Collins* 1919

Army Form Z. 22.

**STATEMENT AS TO DISABILITY.**

form is not applicable to Officers and Soldiers in Hospital or on leave therefrom who will be brought before a Medical Board).

On Demobilization every Officer and Soldier, whether remaining with the Colours or not, will be given an opportunity of filling in this Form. Should he not wish to put forward any claim in respect of a Disability due to Military Service he must sign the Statement hereunder to this effect, in the presence of an Officer of the Unit with which he is serving, who will witness the Signature. Whether a claim is made or not, this Form will be forwarded by the Unit Commander, in the case of every Officer, direct to the Secretary, War Office; and in the case of every Soldier, to the Record Office of his Unit.

Unit 2nd A.S.R. 64 C.C.S.  
 Regiment or Corps PAR.  
 Regtl. No. \_\_\_\_\_ Rank Private  
 Surname SOLLING  
 (Block Letters)  
 Christian Names in full Wilhelmina  
 Permanent address P.O. No. 2, Sorb  
39 The Avenue  
Strathfield, Sydney, N.S.W. Australia  
 Age last birthday 40 1/2  
 First joined for duty (Date) 6<sup>th</sup> October 1915 at (Place) General Hospital  
St. Omer  
 Medical Category or Grade in which joined A1

If the Officer or Soldier has previously been discharged from the Army, Royal Navy or the Royal Air Force, he will state:—  
 (a) Former Regiments or Corps with Regimental Numbers:—  
 (b) Dates of discharge  
 (c) Causes of discharge  
 (d) Particulars of Pension or Gratuity received (if any):—

I do not claim to be suffering from a disability due to my military service.  
 TO BE CANCELLED IF A CLAIM IS MADE  
 Place of Examination 64 C.C.S. Cologne  
 Date July 18<sup>th</sup> 1919  
 Signature of Officer or Soldier W. Solling, Sister 2 A.R.  
 Signature of Officer witnessing J. H. Hill, Major, R.F.C.

Before the claimant answers questions 1—8 the following should be read by, or to, him:—  
 "Your statement will be checked by Official Records. In answering question 2, any special matters which in your opinion caused or aggravated any unfitness from which you are suffering, must be clearly stated."  
 The claimant will answer the questions in his own words and after completing the form will sign it. The officer will witness the signature. If the claimant cannot write, he will affix his mark, such act being witnessed.

- THIS PORTION IS NOT TO BE COMPLETED IF A CLAIM IS NOT MADE.
- (a) In what countries have you served during this war and for what periods?  
(b) In what capacity?
  - If you are suffering from any disease, wound or injury, state what it is, the date upon which it started, and what in your opinion was the cause of it.  
(If more space is required a sheet of foolscap should be used and attached firmly to this form).
  - Give the names of any Hospitals in which you have been treated for the above disabilities during this war
  - Did you suffer from the disease or injury mentioned in above answer to Question 2, or anything like it, before joining the Army? If so, give details and dates.
  - Give the names and addresses, (if you know them) of any Hospitals you were in or Doctors who attended you before you joined the Army.
  - Give the name of your National Health Approved Society and, if possible, your membership number.



7. What is the name and address of your last employer before joining the Army?	
8. What was— (a) your Industrial Group occupation before joining the Army? (b) your trade or calling before joining the Army? (To be checked from A.B. 453, A.B. 64, or A.F.B. 103.)	

The above statement has been read over to me, and I agree to it and have nothing to add to it.

Place of Examination \_\_\_\_\_ Signed \_\_\_\_\_ (Claimant).

Date \_\_\_\_\_ Signed \_\_\_\_\_ (Witness).

**OPINION OF THE EXAMINING MEDICAL OFFICER.**

(i) Clear and definite answers to the following questions are to be carefully filled in by the Examining Medical Officer, as it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the applicant's claim to pension.

Expressions such as "may," "might," "possibly," &c., should be avoided.

(ii) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war, (b) due to causes not connected with the present war, viz.: (1) previous active service, (2) climatic diseases in pre-war service, (3) ordinary military service before the war. It is therefore essential when assigning the causes of a disability to differentiate between them.

(iii) When there is more than one disability the replies will distinguish between them.

9. Give Diagnosis and particulars of:—

(a) Each disability claimed or discovered.

(b) The present condition thereof.

THIS PORTION IS NOT TO BE COMPLETED IF A CLAIM IS NOT MADE

10. State whether each disability is:—	(i) Attributable to	or (ii) Aggravated
(a) Service during the present war.		
(b) Previous active service.		
(c) Climate in pre-war service.		
(d) Ordinary military service before the war		
(e) Serious negligence or misconduct on the part of the claimant.		
Give details:—		

11. (a) Is each disability in a final stationary condition?  
(b) If not, is re-examination before the expiration of the period of twelve months specially advised?

12. (a) What is the degree of disablement at which in your opinion he should be assessed at present?  
Degrees of disablement should be expressed in words in the following percentages: 100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.  
(b) In case of aggravation, what in your opinion was the degree of disablement which existed before joining the Army?

Examining Medical Officer's Signature } \_\_\_\_\_ Rank \_\_\_\_\_

Unit to which attached.

Place of Examination \_\_\_\_\_ Date \_\_\_\_\_

Army Form W. 3165.

## NURSES TEMPORARILY EMPLOYED WITH Q.A.I.M.N.S.

## CLAIM FOR GRATUITY ON CESSATION OF SERVICE.

Name (in full) of Nurse	Branch of Nursing Service, Q.A.I.M.N.S. Reserve, A.N.S. Reserve, etc.	Rank held by Nurse on last day of Service	Date of first issue of Army Pay subsequent to 4 August, 1914	Date of cessation of duty	Number of days, if any, for which released from W.O. employment and without full pay	Total period for which gratuity is admissible		Reason for ceasing to perform duty	Address to which remittance in respect of gratuity is to be sent
						Yrs.	Days		
SÖLLING Wilhelmina	Q.A.I.M.N.S. S.R.	Lister						Employed	C/o. Manager Commonwealth Bank of Australia 36 New Broad St. London

Columns 4, 6, 7 will be filled in at the War Office, the remaining columns will be filled in at the hospital.

Matron-in-Chief,

Q.A.I.M.N.S.

Miss Wilhelmina Sölling has rendered satisfactory service and is recommended for a gratuity.

Station 64 C.C.S. Cologne.Matron E. P. Bonnell  
*at Station Garrison*Date July 1st 1919.Hospital 64 C.C.S. Cologne.

Command Paymaster

Command.

The service of Miss \_\_\_\_\_ is as stated above and the issue to her of a gratuity under Art. 785, Pay Warrant, is approved.

Matron-in-Chief, Q.A.I.M.N.S.

Applications on behalf of members of Q.A.I.M.N.S. Reserve, Civil Hospital Reserve, A.N.S. Reserve, and re-employed members of Q.A.I.M.N.S. should be addressed to the Matron-in-Chief, Q.A.I.M.N.S., War Office.

This form will be attached as a voucher to the account in which the charge for the gratuity appears.



**NURSES TEMPORARILY EMPLOYED WITH Q.A.I.M.N.S.**

**CLAIM FOR GRATUITY ON CESSATION OF SERVICE.**

*C.*

Name (in full) of Nurse	Branch of Nursing Service, Q.A.I.M.N.S. Reserve, A.N.S. Reserve, etc.	Rank held by Nurse on last day of Service	Date of first issue of Army Pay subsequent to 4 August, 1914	Date of cessation of duty	Number of days, if any, for which released from W.O. employment and without full pay	Total period for which gratuity is admissible	Reason for ceasing to perform duty	Address to which remittance in respect of gratuity is to be sent
						Yrs. Days		
<i>2 Res S. 66</i>								
<i>Wilhelmina Solling</i>	<i>2a Res</i>	<i>Sister</i>	<i>6 10 15</i>	<i>23 7 19</i>	<i>1</i>	<i>3 290</i>	<i>Removal</i>	<i>Special Military Hospital Northfield Birmingham</i>

Columns 4, 6, 7 will be filled in at the War Office, the remaining columns will be filled in at the hospital.

Matron-in-Chief,

Q.A.I.M.N.S.

Miss *W. Solling from Cologne* has rendered satisfactory service and is recommended for a gratuity.

*Australian Address of Mrs. S. K. 39 The Avenue Southfield Sydney Australia*

Station *War Office*

Matron *(Sd.) F. M. HODGINS*

Date *26-7-19*

Hospital *Matron-in-Chief,*

Q.A.I.M.N.S.

Command Paymaster,

*Eastern* Command.

The service of Miss *W. Solling* is as stated above and the issue to her of a gratuity under Art. 735, Pay Warrant, is approved.

*War Office  
Amd 4  
26-7-19*

*(Sd.) F. M. HODGINS  
Matron-in-Chief, Q.A.I.M.N.S.*

Applications on behalf of members of Q.A.I.M.N.S. Reserve, Civil Hospital Reserve, A.N.S. Reserve, and re-employed members of Q.A.I.M.N.S. should be addressed to the Matron-in-Chief, Q.A.I.M.N.S., War Office.

This form will be attached as a voucher to the account in which the charge for the gratuity appears.

*220565 Miss Solling 3.5*

QUEEN ALEXANDRA'S IMPERIAL NURSING SERVICE RESERVE

CONFIDENTIAL REPORT.

Rank and Surname *a/SISTER SÖLLING (AUSTRALIAN.)*  
Christian names (in full) *WILHELMINA*  
Hospital *XI STATIONARY HOSP.* Date of report *10-1-19*

state of health, and if fit for active service.  
(This to be filled in by a medical officer)

*Health good. fit for active service*  
*W. Sulzgruber Capt. R.A.M.C.*

REPORT BY MATRON.

*Miss Solling has served under me since 6-11-18  
She is in charge of the operating Theatre. Her  
professional ability is above the usual standard -  
Her power of initiative is good - Her ability to  
train orderlies good -  
She is quiet tempered - and tactful under  
difficult circumstances - She is reliable and  
most anxious and conscientious in her work. She is  
Common sense and punctual. Her influence is  
good -*

Date *10.1.19* Signature of *a/* Matron *M. Ram 2a 9mms*



Signature of Principal Matron *M. Ram 2a 9mms*

*27 PA*



Opinion of Commanding Officer, R.A.N.C.

I concur

Date 19/1/19

Signature of Commanding Officer *J. C. Jamieson*  
Stationary Dept.

I concur

Date 21/1/19

Signature of D.D.S. *J. C. Jamieson*

A valuable worker and an excellent needle worker who came to France 7.2.15

Date 12-2-19

Signature of Matron-in-Chief *E. M. Cully*  
R.A.N.C.

(Father), J.S. SÖLLING ESQ.  
LORN. WEST MAITLAND  
N.S. WALES.

Name and address of nearest relative (stating relationship) for reference in case of emergency.

I do hereby certify that to the best of my knowledge and belief this statement is in all respects correct and true.

Date 17-1-19

Signature of Sister or of Staff Nurse *W. Sölling*

# DISPERSAL CERTIFICATE (WOMAN)



Surname (Block letters) SOLLING

Christian Names Wilhelmina

Corps No. QAR Railway Station to which proceeding after Dispersal

Home address C/o Mrs. M. E. Sorh.  
39 The Avenue.  
Strathfield Sydney N.S.W. Australia

\*Medical Category \_\_\_\_\_ \*Employment Category a/ Sister

Whether Insured under National Health Act or not No †Date and Port of Disembarkation 23/7/19.  
**FOLKESTONE**

Date of Dispersal \_\_\_\_\_

§ Dispersal Hostel or Accounting Unit Dispersing Folkestone

Date 23.7.19 (Signed) L. E. Mackay Q.A.M.N.S.

\* Complete where applicable.  
† To be completed in the case of Medical Women only by the Disembarkation Officer.  
§ In the case of Officials (Q.M.A.A.C.), the Command or H.Q., Q.M.A.A.C., will be inserted instead of the Hostel or Unit, as the case may be.

GD1446 200,000 11/18 HWV(P)

Catalogue Reference: WO/399/7796



War Office,

Adastral House,

Victoria Embankment,

E.C. 4.

Any further communication on this subject should be addressed to:-  
The Secretary,  
War Office,  
Adastral House,  
Victoria Embankment, E.C. 4.,  
and the following number quoted.

2/Reserve/S/65

(A.M.D.4.)

7<sup>th</sup> May 1919.

To the Officer in Charge  
Repatriation Records  
Winchester.

Certificate of entitlement to return passage

to New York on behalf of

- (1) Name Miss W. SOLLING
- (2) Rank Sister
- (3) Nursing Service. Q.A.I.M.N.S.R.
- (4) Date of arrival in ~~United Kingdom~~. Egypt April 1915.
- (5) Date of termination of service. 8 days after embarkation
- (6) Cause of termination of service. demobilization
- (7) Place from which applicant came. Australia
- (8) Town & Country to which applicant wishes to return. New York U.S.A.
- (9) Postal address of applicant whilst awaiting repatriation.

64. C.C.S.  
Army of the Rhine  
Colony.

(Signed) A. B. SMITH,  
for

Matron-in-Chief,  
Q.A.I.M.N.S.



W11985—H2535 15,000 12/16 HWV(P2030) H16/2278

Army Form W. 3538.

*2/10/65*

**Form of Agreement for serving Members Queen Alexandra's Imperial Military Nursing Service Reserve who are willing to continue to serve for so long as their services are required during the present emergency.**

TO HIS MAJESTY'S PRINCIPAL SECRETARY OF STATE FOR  
THE WAR DEPARTMENT.

I

*Wilhelmina Solling*

of

*L. A. I. M. N. S. R.*

hereby offer and agree, if accepted by you, to serve at home or abroad as a nurse to His Majesty's Forces, and I understand and accept the following conditions of service:—

1. The period of my service hereunder shall commence as from the date on which I sign this agreement, and shall continue for so long as my services are required during the present emergency.

2. The contract under which I am serving at present shall be considered cancelled as from the date on which I sign this agreement, but service already given under it shall count towards increments of pay and towards gratuity on completion of satisfactory service as below.

3. My pay and allowances shall be at the same rate as those paid to members of Queen Alexandra's Imperial Military Nursing Service, with the exception that if I have given twelve months or more continuous service in a military hospital as a member of Queen Alexandra's Imperial Military Nursing Service Reserve on 31st October, 1916, I shall, when serving in a rank below that of Matron (or acting Matron), be entitled to receive as from 1st November, 1916, an increase of pay at the rate of £20 per annum; or, if my continuous service in a military hospital as a member of Queen Alexandra's Imperial Military Nursing Service Reserve on 31st October, 1916, is less than twelve months, or if I commenced such service on a date subsequent to 31st October, 1916, then I shall, when serving in a rank below that of Matron (or acting Matron) be entitled to receive an increase of pay at the rate of £20 per annum as from the day following that on which I shall complete twelve months' continuous service in the Queen Alexandra's Imperial Military Nursing Service Reserve.

4. In addition to such pay I shall receive a free passage to any country abroad to which I may be sent, and a similar free passage back to England. I shall also receive a warrant on return to my home in the United Kingdom on expiration of contract, but if I am discharged under para. 6 of this agreement or otherwise (except on account of unavoidable illness or accident)

[P.T.O.]



fail to serve so long as required, I shall not be entitled to the warrant to my home, or, if serving abroad, to the passage to England.

5. During the said period I will devote my whole time and professional skill to my service hereunder, and will obey all orders given to me by superior officers.

6. If I shall in any manner misconduct myself or shall be (otherwise than through unavoidable illness or accident) unfit in any respect for service under this agreement, of which misconduct or unfitness you or your authorized representative shall be the sole judge, you shall be at liberty from and immediately after such misconduct or unfitness to discharge me from further service hereunder and thereupon all pay and allowances hereunder shall cease.

7. If I complete my service under this agreement to your satisfaction in all respects, I shall receive on such completion of my service a gratuity at the rate laid down in Article 735, Royal Warrant for Pay, but if I am discharged under para. 6 above or otherwise (except on account of unavoidable illness or accident) fail to serve so long as my services are required, I shall have no claim to such gratuity.

Dated this fourteenth day of June 1917

Wilhelmina Solling (here sign).  
of Sister, QAIMNSR

Witness to the signature of the said Wilhelmina Solling

Ethel Keene (Witness)  
of Matron, QAIMNSR

On behalf of the Secretary of State I accept the foregoing offer.

Sheila Keene Matron-in-Chief,  
Q.A.I.M.N.S.  
for Director-General, Army Medical Department.

Nearest Relative:— FATHER

Name J.S. SOLLING Relationship FATHER

Address LORN. WEST MAITLAND  
NEW SOUTH WALES



CONFIDENTIAL

Army Form A. 45.

2/Rec 8/65

PROCEEDINGS OF A MEDICAL BOARD

assembled at Millbank S.W. on 30.4.17.

by order of G.O.C. London Dist

for the purpose of examining and reporting upon the present state of health of  
(Rank and Name) Miss W. Solling (Corps) Q.A.I.M. N.S.R.

Age 37 Service 1 1/2 Disability Fract. L. humerus.

Date of commencement of leave granted for present disability \_\_\_\_\_

Date on which placed on half-pay for present disability \_\_\_\_\_

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

*She had an accident slipped on-ice + fractured L. Humerus at junction of upper + middle-thirds. Bone has united + firm callus.*

787

*C/o manager  
Commonwealth Bank of Aus.  
36-38 New Broad St.  
S.E.*

The opinion of the Board upon the questions herein is as follows:—

- (1.) a. Is the officer fit for "General Service"? yes
- b. If not so fit, how long is he likely to be unfit? \_\_\_\_\_
- (2.) a. If unfit for General Service, is he fit for service at home? yes
- b. If not so fit, how long is he likely to be unfit for service at home? \_\_\_\_\_
- c. If unfit for General Service at home, is he fit for light duty at home? yes
- d. If not so fit, how long is he likely to be unfit for light duty at home? \_\_\_\_\_
- (3.) Was the disability contracted in the service? yes
- (4.) Was it contracted under circumstances over which he had no control? yes
- (5.) Was it caused by military service? yes
- (6.) If caused by military service, to what specific conditions is it attributed? \_\_\_\_\_
- (7.) If the disability was not caused by military service, was it aggravated by it? \_\_\_\_\_

Signatures { W. Fulver James, Surg. Col. President.  
Robt. Capt R. Allen C.V. Members.



**Instructions.**

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1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

7917/36/16  
30-4-16

Army Form A. 45.

CONFIDENTIAL

PROCEEDINGS OF A MEDICAL BOARD

assembled at Burton on 27.4.16

by order of Dods Burton

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) Sister W. Solling (Corps) R.A.M.S.N.

Age 35 Service 6 Disability German Measles

Date of commencement of leave granted for present disability -

Date on which placed on half-pay for present disability -

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named <sup>lady</sup> officer and find that

she has been suffering from German Measles which has left her somewhat debilitated & unfit for duty at present.

The Board recommend her for 3 weeks sick leave to be granted.

The opinion of the Board upon the questions herein is as follows:—

- (1.) a. Is the <sup>lady</sup> officer fit for "General Service"? No
- b. If not so fit, how long is he likely to be unfit? Three weeks
- (2.) a. If unfit for General Service, is he fit for service at home? -
- b. If not so fit, how long is he likely to be unfit for service at home? -
- (3.) Was the disability contracted in the service? Yes
- (4.) Was it contracted under circumstances over which he had no control? Yes
- (5.) Was it caused by military service? Yes
- (6.) If caused by military service, to what specific conditions is it attributed? Missing infectious cases at Calais.

Approved.  
Surgeon General,  
D.M.S., L of C.

Approved.

H.Q., I.G.C.  
30-4-16

(8 27 21) W 12286 - 2164 150,000 2/15 H W V (P)

Forms  
A. 45  
24

J. K. ... President.

J. G. Dods, Lieut. ... Members.

Approved.

[P.T.O.]

H.Q. I.G.C. Hunter Col. ...

2nd ... 1916



### Instructions.

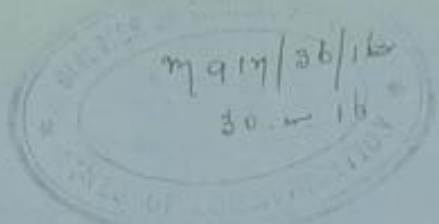
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1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Question 2 is only to be answered by the Board, when specially instructed by the convening authority.

4. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.



Army Form A. 45.

CONFIDENTIAL.

PROCEEDINGS OF A MEDICAL BOARD

assembled at Banlogue on 27. 4. 16

by order of D. D. M. S. Banlogue Barr

for the purpose of examining and reporting upon the present state of health of  
(Rank and Name) Sister W. Solling (Corps) A. A. I. M. N. S. R.

Age 35 Service 6 Disability German measles

Date of commencement of leave granted for present disability -

Date on which placed on half-pay for present disability -

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named ~~officer~~ <sup>lady</sup> and find that

she has been suffering from German measles which has left her somewhat debilitated temporarily at present.

The Board recommended her for 3 weeks sick leave at home.

The opinion of the Board upon the questions herein is as follows:—

- (1.) a. Is the ~~officer~~ <sup>lady</sup> fit for "General Service"? No
- b. If not so fit, how long is he likely to be unfit? Three weeks
- (2.) a. If unfit for General Service, is he fit for service at home? -
- b. If not so fit, how long is he likely to be unfit for service at home? -
- (3.) Was the disability contracted in the service? Yes
- (4.) Was it contracted under circumstances over which he had no control? Yes
- (5.) Was it caused by military service? Yes
- (6.) If caused by military service, to what specific conditions is it attributed? Nursing infectious cases at Colaba.

Approved. W. B. ...  
Surgeon General,  
D.M.S., L of C.

D. Kinross President.  
J. G. Dods Member.  
R. ... Member.  
Approved.

H.Q. I.G.C.  
30-4-16.

Signatures  
...  
...

W 12286 - 2164 150,000 2/15 H W V (P)

Forms A. 45

H.Q. I.G.C. ... [P.T.O.]  
... Col. Adq.



### Instructions.

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1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Question 2 is only to be answered by the Board, when specially instructed by the convening authority.

4. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

2  
Reserve

Register No.

7641

Minute Sheet No.

Miss W. Solting



Informed of rejection 25.9.15

Cheque + found sent 1.10.15.

Write Command, this lady to  
be recognized as Sister.

amoy.  
29-10-15.

Dove  
✓



*Please return both forms.**Please turn over.*

To His Majesty's Principal Secretary of State  
for the War Department.

I Wilhelmina Sölling  
of 1<sup>st</sup> Australian Auxiliary Hospital Harefield  
hereby offer and agree if accepted by you to serve at home or abroad as a  
nurse to His Majesty's Forces:—

1. The period of my service hereunder shall commence as from the day on which I shall commence duty, and shall continue until the expiration of 12 calendar months thereafter, or until my services are no longer required, whichever shall first happen.

2. My pay and allowances shall be at the same rates as those paid to members of Queen Alexandra's Imperial Military Nursing Service.

3. In addition to such pay, I shall receive a free passage to any country abroad to which I may be sent, and (subject as hereinafter appears) a similar free passage back to England.

4. I shall receive free rations while in the field.

5. During the said period I will devote my whole time and professional skill to my service hereunder, and will obey all orders given to me by superior officers.

6. In case I shall have completed my service hereunder to your satisfaction in all respects, I shall receive at the end of the said period a gratuity at the rate laid down in Article 682, Royal Warrant for Pay, but in case I shall in any manner misconduct myself, or shall be (otherwise than through illness or unavoidable accident) unfit in any respect for service hereunder, of which misconduct or unfitness you or your authorised representative shall be sole judge, you shall be at liberty from and immediately after such misconduct or unfitness to discharge me from further service hereunder, and thereupon all pay, allowances and gratuity hereunder shall cease.

Dated this 2<sup>nd</sup> day of October 1915.

Wilhelmina Sölling (here sign)

Witness to the signature of the said

[Signature]

Capt R. H. M. C. A. I. F. (Witness)

On behalf of the Secretary of State I accept the foregoing offer.

Director-General, Army Medical Department.

(9. 26. 20) G. D. 5289 5000 5/15 H W V (P 1445)  
W 8609—3315 5000 8/15

Min W. Sölling.

France.

NEAREST RELATIVE.

Name W. J. S. Sölling

Address Loon - West Maitland  
N. S. W  
Australia



## Queen Alexandra's Imperial Military Nursing Service Reserve.

## FORM OF APPLICATION.

1. Name in full *Wilhelmina Sölling*
2. Date of birth *January 1898*
3. Place of birth *N.S.W. Australia*
4. Profession or occupation of father *School-Master*
5. Whether parents are living, and address *Yes - West Maitland N.S.W. Australia*
6. Whether single or widow (if a widow, profession or occupation of late husband) *Single*
7. Where educated *High School, West Maitland N.S.W. Australia*
8. State of health (attach Medical Certificate) *Good - Passed medical examination in Australia before joining Army Nursing Service*
9. In what hospital trained, and for what period—giving dates *Sydney Hospital, Sydney - N.S.W. Australia - April 1903 - Aug. 1907*
- When did you leave? *August 1907*
- What position did you hold? *Sister*
10. If you have had further nursing experience, state its nature, giving dates *Assistant Matron Perth Public Hospital  
Matron Bowral Hospital 1908-1910  
Matron Women's Hospital 1914-1915*
11. State name and address of one lady, not a member of your own family, to whom reference can be made *Miss Creal, Sydney Hospital  
Macquarie St. Sydney, N.S.W. Australia*
12. Names and addresses of the Matron under whom you were trained, and of other Matrons under whom you have served *Miss Creal, Sydney Hospital - N.S.W.  
Miss Gray, Harfield, Australian Auxiliary Hospital*
13. What experience have you had in the nursing of Enteric Fever? *Three months in charge of Fever ward in Sydney Hospital*
14. Are you a Candidate for any other Nursing Service? *No*



DECLARATION.

(To be in the Candidate's own handwriting.)

I, Wilhelmina Sölling

a candidate for appointment to Queen Alexandra's Imperial Military Nursing Service Reserve, do hereby declare that I have answered the preceding questions to the best of my knowledge and belief, that I am fully aware of the terms and conditions of service under which I seek appointment, and accept the same; that I am willing to serve under the Rules laid down in the Regulations for the Army Medical Services, and in the Standing Orders for Members of the Queen Alexandra's Imperial Military Nursing Service, and am prepared to serve abroad when required to do so.

(Signature of Candidate) Wilhelmina Sölling

(Address) 1<sup>st</sup> Australian Auxiliary Hosp.  
Harefield Park Middlesex

(Date) August 5<sup>th</sup> 1915.



Telephone No.: HAREFIELD 9.

AUSTRALIAN AUXILIARY HOSPITAL No. 1.

HAREFIELD PARK,  
HAREFIELD,  
MIDDLESEX.



*For Home*

I have this day examined Sister  
Wilhelmina Solting at present acting on  
our staff + I understand to be transferred  
to the Queen Alexandra Staff. She is  
in perfect health.

*W. S. Swanwick*  
Major.

*M.C. 107 Australian Aux. Hosp.*

29.9.15