

# World War I Draft Registration Card

## Alexander Skowronski

Form 1 **11909** REGISTRATION CARD No. **272**

|    |  |                           |
|----|--|---------------------------|
| 1  | Name in full <i>Alexander Skowronski</i><br>(Given name) (Family name)   | Age, in yrs.<br><b>30</b> |
| 2  | Home address <i>16 Dorchester St. WORCESTER, MASS.</i><br>(No.) (Street) (City) (State)  |                           |
| 3  | Date of birth <i>2860 February 2 1886</i><br>(Month) (Day) (Year)  |                           |
| 4  | Are you (1) a natural-born citizen, (2) a naturalized citizen, (3) an alien, (4) or have you declared your intention (specify which)? <i>declared intention</i>      |                           |
| 5  | Where were you born? <i>Grony, Sonja, Russia, Poland</i><br>(Town) (State) (Nation)  |                           |
| 6  | If not a citizen, of what country are you a citizen or subject? <i>Russia</i>  |                           |
| 7  | What is your present trade, occupation, or office? <i>Moulder in Foundry</i>   |                           |
| 8  | By whom employed? <i>Whitcomb Foundry</i><br>Where employed? <i>Worcester Mass.</i>  |                           |
| 9  | Have you a father, mother, wife, child under 12, or a sister or brother under 12, solely dependent on you for support (specify which)? <i>Wife and four children</i> |                           |
| 10 | Married or single (which)? <i>Married</i> Race (specify which)? <i>Caucasian</i>   |                           |
| 11 | What military service have you had? Rank _____; branch _____<br>years _____ Nation or State _____  |                           |
| 12 | Do you claim exemption from draft (specify grounds)? _____   |                           |

I affirm that I have verified above answers and that they are true.

*Alexander Skowronski*  
(Signature of registrant)

*222*

If person is of African descent, tear off this corner

**20-2-17. A**

REGISTRAR'S REPORT

|   |  |
|---|--|
| 1 | Tall, medium, or short (specify which)? <i>Tall</i> Slender, medium, or stout (which)? <i>medium</i> |
| 2 | Color of eyes? <i>gray</i> Color of hair? <i>dark</i> Bald? <i>No</i>                                |
| 3 | Has person lost arm, leg, hand, foot, or both eyes, or is he otherwise disabled (specify)? <i>No</i> |

I certify that my answers are true, that the person registered has read his own answers, that I have witnessed his signature, and that all of his answers of which I have knowledge are true, except as follows:

Ward **5** *F. Chester Maumowicz*  
(Signature of registrar)

Precinct **2**

City or County **Worcester,**

State **Mass.**

**6/5/17**  
(Date of registration)