

93709

OFFICE OF
Indian Affairs
Rec. OCT 24

1906

88/97

Ref:- 91448-1906
91806-1906

INTERIOR DEPARTMENT
October 24, 1906.

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Granting two (2) days sick lea
Cora B. Hawk, Teacher, and three
(3) days sick leave, John F.
McKey, Clerk, Carlisle School.

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Wrapper *5* Inc.

To Rept. 10/26/06

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91448

OFFICE OF
Indian Affairs
Rec. OCT 17

1906

69

93709

Indian Office,
Incl. No. 2

1906

Indian Industrial School,

Carlisle, Pa., Oct 15 1906

Mercer, W. A.

Major 11th Cav. Supt.

Physician's Certificate as to sick leave of J. F. Mackey

12

Encl. Recy 10/22/06

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REFER IN REPLY TO THE FOLLOWING:

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Education
91448 - 1906
91806 - 1906

DEPARTMENT OF THE INTERIOR,
OFFICE OF INDIAN AFFAIRS.
WASHINGTON.

October 22, 1906.

To The Honorable,
The Secretary of the Interior.

Sir :

I have the honor to recommend that the absence from duty of the following employes of the Carlisle Indian School, Pennsylvania, be approved as sick leave with pay, in accordance with the enclosed applications, and physician's certificates :

- John F. McKey, Clerk: October 8th and 9th - 2 days .
- Cora B. Hawk, Teacher: October 10th to 12th - 3 days .

The records of absence are as follows :

Miss Hawk.		Mr. McKey.	
1904	20 days annual;	1903	---
1905	30 days annual ;	1904	23 days annual ;
Total	50 days annual.	1905	---
1906	----	Total	23 days annual ;
Entered Nov. 6, 1903.		1906	5 days annual.

Very respectfully,

W. J. Farnley
Acting Commissioner.

F.I.P.

91806

India, Office,

Incl. No.

1906

RECEIVED AT THE DEPARTMENT OF THE INTERIOR
FROM THE SECRETARY'S OFFICE

Handwritten notes in cursive script, including the word "Receipt" and other illegible text.

1-013

93209

India, Office,

Incl. No.

1906

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Handwritten word, possibly "Receipt".

Handwritten notes in cursive script, including the word "Receipt" and other illegible text.

FORM OF PHYSICIAN'S CERTIFICATE
 APPROVED BY THE DEPARTMENT OF THE INTERIOR,
 TO ACCOMPANY APPLICATION FOR SICK LEAVE.

Carlisle, Pa
 Washington, D. C., Oct. 16, 1896.

I, the undersigned, a duly qualified practitioner of medicine, do hereby certify that Miss Cora B. Hawk was sick from Oct. 10th to Oct. 12th inclusive, and during that period was wholly unable by reason of sickness to be present at the ^{her school} Department or to perform ^{teacher's} office work. I personally attended the said patient in my professional capacity on account of the sickness in question, and I make this statement of my own knowledge.

Signed, F. Shoemaker, M.D.

Office address, Carlisle, Pa

	DEPT. OF THE INTERIOR.	RECEIVED JC
	APPOINTMENT DIVISION.	OCT 23 1906

Indian Office.
Oct. 22, 1906.

Asks sick leave with pay for
Cora B. Hawk, Teacher -2 days;
John F. McKey, Clerk, -3 days;
Carlisle Indian School.
Enc. appln. & cert.

W.S.T.
APPROVED OCT 24 1906

E. Dawson
Chief Clerk of the Department.

J.M.

93709

Indian Office,

Incl. No. /

1906

DEPARTMENT OF THE INTERIOR,

INDIAN INDUSTRIAL SCHOOL.

OFFICE OF SUPERINTENDENT.

CARLISLE, PA. Oct. 12, 1906

I hereby certify that John F. MacKey was sick October 8th and 9th, 1906, and during that period was wholly unable by reason of sickness to be present in the office or perform his duties. I personally attended said patient in my professional capacity on account of the sickness in question, and I make this statement of my own knowledge.

J. Shoemaker.

Physician.

91448

Indian Office,

Incl. No. /

1906

93709

Indian Office,

Incl. No. 3

1906

Department of the Interior,

DEPT. OF THE INTERIOR	RECEIVED
APPOINTMENT DIVISION	OCT 23 1906

Carlisle, Pa.

[Indian agency or school.]

Oct. 12, 1906

I respectfully apply for leave of absence
 for 2 days, from Oct. 8
 to Oct. 9, both inclusive.

Intervening SUNDAYS AND HOLIDAYS are counted in sick leave and leave without pay, but are omitted in a period of annual leave. Annual leave must be applied for *in advance*. Failure to do so must be explained in writing. Cause of absence without pay should be stated. Employees who have served less than one year are entitled to annual leave at the rate of only 2½ days for each month of service.

Sick leave can not be granted in advance, and application therefor must be accompanied by certificate of physician or other competent evidence. The failure to apply for sick leave immediately upon return to duty will be sufficient ground to charge the absence to annual leave, and in case that is exhausted, to leave without pay.

sickness

[If on account of sickness, so state.]

John F. Mackey
 [Sign full name, with Miss or Mrs., if appropriate.]

Clerk.

[Grade and salary.]

Leave heretofore granted this year: { ⁵
 { 4 days' annual.
 { _____ days' sick.
 { — days' without pay.

Approved and respectfully submitted to
 the Commissioner of Indian Affairs.

M. W. ...
 Major 11th Cavalry
 [Title of office, agent, or superintendent.]

Office of Indian Affairs,

Washington, D. C., _____, 190

Approved for { _____ days' annual.
 { _____ days' sick.
 { _____ days' without pay.

Commissioner.

Notice of action sent _____

93709

Indian Office

Incl. No. 5

1906

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91806

OFFICE OF

Indian Affairs

5-244

1906

Cora B. Hawk

Department of the Interior,

Carlisle, Pa.

[Indian agency or school.]

DEPT. OF THE
INTERIOR.
APPOINTMENT
SECTION.

15, 1906

RECEIVED
OCT 20 1906

I respectfully apply for leave of absence
for three (3) days, from Oct 10,
to Oct 12, 1906, both inclusive.

Intervening SUNDAYS AND HOLIDAYS are counted in sick leave and leave without pay, but are omitted in a period of annual leave. Annual leave must be applied for *in advance*. Failure to do so must be explained in writing. Cause of absence without pay should be stated. Employees who have served less than one year are entitled to annual leave at the rate of only 2½ days for each month of service.

Sick leave can not be granted in advance, and application therefor must be accompanied by certificate of physician or other competent evidence. The failure to apply for sick leave immediately upon return to duty will be sufficient ground to charge the absence to annual leave, and in case that is exhausted, to leave without pay.

On account of sickness

[If on account of sickness, so state.]

(Miss) Cora B. Hawk

[Sign full name, with Miss or Mrs., if appropriate.]

Teacher @ \$660 per annum.

[Grade and salary.]

Leave heretofore granted this year: {
..... days' annual.
..... days' sick.
..... days' without pay.

*Approved and respectfully submitted to
the Commissioner of Indian Affairs.*

W. S. Mercer

[Title of officer, head of Bureau, etc.]
Major, Indian Cavalry, Supt.

Office of Indian Affairs,

Washington, D. C., 190.....

Approved for {
..... days' annual.
..... days' sick.
..... days' without pay.

.....
Commissioner.

1/2
Notice of action sent.....

P.