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Name... *Thomas Rowland* ... Tribe... *Cheyenne* ... Age... *15* ...
Entered... *Feb 28 1907* ... Address... *Busby, Mont* ...
Trade... *Carpenter* ... Size of allotment... *None* ...
Nature of allotment... *—* ...
How much under cultivation? *—* ... How much can be cultivated? *—* ...
When you leave Carlisle do you expect to return home? *Yes* ...
What do you expect to do for your livelihood? *Trade - Carpenter* ...
Have you previously worked at farming? *No* ...
Where? *—* ... How long? *—* ...
Have you worked at a trade? *Yes* ... What trade? *Carpenter* ...
Where? *At Shaw School* ... How long? *3 yrs* ...
Remarks ...
Date... *March 15 1907* ...

TRADE RECORD, CARLISLE.

PUPIL

Thomas Rowland

TRADE

baker

ABILITY

fair

CONDUCT

fair

REMARKS

INSTRUCTOR

Roy Smith

NAME **Rowland, Thomas** TRIBE **Cheyenne.** PARENT OR GUARDIAN **Willis Rowland (Father)**
 DATE ENROLLED. **Feb. 28, 1907.** TERM. **5 Years.** AGE **16.** HOME ADDRESS. **Lame Deer, Mont.**

DATE OF RECORD	ACADEMIC DEPARTMENT.			INDUSTRIAL DEPARTMENT.			DORMITORY.			OUTING		SPECIAL REMARKS.
	ROOM NO.	Scholarship	Conduct.	Shop.	Ability.	Conduct.	Room No.	Neatness	Conduct	Ability.	Conduct	
Apr. 08	3	Good	Medium							Poor	Good	
Jan. 09	4	Medium	Good	Hand work	Fair	Fair	204	Fair	Fair	Fair	Good	
July 09	4	Poor	Good	Dairy	"	"	323	"	Poor			
Jan. '10	4	Med.	Good	Farm	"	Good	Farm	"	Fair			
July '10	4 1/2	M.	Good	Mason	"	Fair		"	"			
Jan. 11	4 1/2	Poor	V. & G.	Baker	Fair	Good		Good	Good			
July '11	4 1/2	Poor	Good									
Dec. '11				Baker	F.	F.						

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DEPARTMENT OF THE INTERIOR,

UNITED STATES INDIAN SERVICE,

Application for Enrollment in a non reservation school.

Full name of child Thomas Rowland Indian name is 6666666666

Name of Father Willis Rowland
 Name of Mother Ellen Rowland Tribe Northern Cheyenne
 Reservation Tongue River, Degree of Indian blood of child 3/4
 is either parent white, if so no, which? 3/4 are either or
 both allotted? No On what reservation? None
 Age of child? 16 What reservation school attended
Tongue River How long? 17 Mon If ever en-
 rolled in a non reservation school, name of school, Rapids City S.D.
St. Shaw Mont When? 1901-1904 How long. 6 years
 If ever dis missed from a school, where, _____ When
 and for what reason? _____

Signed

Thomas Rowland

The above blank is to be signed by the child, if old enough
 to understand its import: if not, by the parent, guardian, or other
 person cognizant of the fact.

Consent Blank.

I, Willis Rowland parent, guardian, or next of
 kin of the above named child, Thomas Rowland, do hereby
 consent to his transfer or enrollment for a period of
8 years (five years in the Indian school at Carlisle, Penn
 Dated at Tongue River Agency, Montana. on the 23rd day of February
 1907.

Witness

Ellen Rowland

Signed;

Willis Rowland

Parent, guardian or next of kin.

Physicians Certificate.

I hereby certify that I have personally examined the above named
Thomas Rowland and have found his physically
 sound and recommend the transfer so far as his health conditions
 are concerned. Dated at Tongue River Training School, on the
 23rd day of February 1907.

Signed;

B. B. Kelly M.D.

Agents or superintendents Indorsement.

Tongue River Agency, Mont.

February 23rd, 1907

The statements concerning the above named Thomas Rowland
 are beleived by me to be correct and I hereby re-
 commend the transfer.

Signed;

J. R. Eddy

Superintendent & S.D.A.

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Powland Thomas DATE Mar 22/1910

AGE 17 YEARS { NEW STUDENT. TRIBE Shayene STATE Mont.

DEGREE OF INDIAN BLOOD + nee

INSPECTION Good development. Right side of chest deformed. Result of trauatism

PALPATION normal

PERCUSSION normal

AUSCULTATION { RESONANCE normal
RESP. MURMUR normal

HEART SOUNDS

MENSURATION { INSP. 36
EXP. 34 RESPIRATION 24 PULSE 80

TEMPERATURE 99 degs. HEIGHT 5 FT 6 IN. WEIGHT 153 1/2 LBS.

VISION VACCINATION good

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER	<u>yes</u>	<u>good</u>		
MOTHER	<u>yes</u>	<u>good</u>		
BROTHERS {	<u>3</u>	<u>good</u>		
SISTERS {	<u>1</u>	<u>good</u>	<u>1</u>	<u>?</u>

PERSONAL HISTORY:

REMARKS:

HOSPITAL RECORD.....

EXAMINATION FOR OUTING:

DATES:

CONDITION:

5 Mch. 24 - 1910

Good

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PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Rowland Thomas DATE 12/17/08 1908AGE 16 YEARS { NEW { STUDENT. TRIBE Cheyenne STATE Mont

DEGREE OF INDIAN BLOOD.....

INSPECTION

PALPATION

PERCUSSION

AUSCULTATION

RESONANCE.....

RESP. MURMUR.....

HEART SOUNDS

MENSURATION

INSP.

EXP.

RESPIRATION

PULSE

TEMPERATURE

deg.

HEIGHT

FT

IN.

WEIGHT

LBS.

VISION

VACCINATION

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER.....	yes	good		
MOTHER.....	yes	good		
BROTHERS {	3	good		
SISTERS {	1	good	1	?

PERSONAL HISTORY:

REMARKS:

(over)

HOSPITAL RECORD.....

TRADE RECORD, CARLISLE.

Jan. 1, 1915 to June 30, 1915.

PUPIL Thomas Bolland

TRADE maron.

ABILITY Fair

CONDUCT Fair

REMARKS

INSTRUCTOR N. B. Lemason.

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TRADE RECORD, CARLISLE.

JUL 1 1910 JAN 1 1911

Jan. 1, 19..... to June 30, 19.....

PUPIL..... Thomas Rowland

TRADE..... Baker

ABILITY..... fair

CONDUCT..... good

REMARKS.....

INSTRUCTOR..... R. Smith

563757 3M-2-11

NAME AT CARLISLE

Thomas Cowland

PRESENT NAME

Rowland, Thos. 481
Father, Willis Rowland

Ex-stu.

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