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THE SHAW-WALKER CO., MUSKEGON. 79104

Church,

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APPLICATION OF

Lucy Smith

FOR THE ENROLLMENT OF

IN THE INDIAN SCHOOL AT

NAME OF AGENCY FROM WHICH PUPIL CAME:

Date of enrollment, _____, 191

Term of enrollment, _____ (_____) years.

NAME OF COLLECTING AGENT:

Position, _____

APPLICATION FOR ENROLLMENT IN A NONRESERVATION SCHOOL

(For a child enrolled at an Agency.)

For and in consideration of the Government of the United States assuming the care, education, and maintenance in the United States Indian School at _____

Carlisle, Pa.,

of Lucy Smith; Female; date of birth August 1, 1897
(Name of child.) (Sex.)

Chippewa
(Tribe.)

NAME OF FATHER. (Both Indian and English.)	LIVING OR DEAD.	TRIBE.	BAND.	DEGREE OF INDIAN BLOOD.
<u>Charles Smith</u>		<u>Chippewa</u>	<u>Mississippi</u>	<u>1/2</u>
NAME OF MOTHER.	<u>L.</u>			
<u>Frances Smith</u>		<u>Chippewa</u>	<u>Mississippi</u>	<u>1/2</u>
	<u>L.</u>			

I, Frances Smith, do hereby voluntarily consent and agree to her
(Parent, guardian, or next of kin.)

enrollment in said school for a period of five years, and also obligate myself to abide by
(Not less than 3.)
 all the rules and regulations for Indian schools.

The said child has been enrolled in the following schools:

NAME OF SCHOOL.	DATE OF ENROLLMENT.	DATE OF DISCHARGE.	CAUSE.	GRADE.
1. <u>White Earth Bdg.</u>	<u>1907</u>	<u>1908</u>	<u>Exzema</u>	<u>First</u>
2.				
3.				
4.				

her
Frances Smith
(Parent, guardian, or next of kin.)

P. O. address: White Earth, mark

Minnesota.

Two witnesses:

L. G. Peterson.
W. West

GOVERNMENT PHYSICIAN'S CERTIFICATE.

I hereby certify that I have this day carefully examined the above-named child herein proposed for transfer and find her to be in proper physical condition to attend school, and not afflicted with tuberculosis or any disease which would be a menace to the health of other pupils.

This 30 day of Aug, 1915

P. Richard
Physician at White Earth Agency

RESERVATION BONDED SUPERINTENDENT'S CERTIFICATE.

I hereby certify that the statements made in the foregoing application and certificate, to the best of my knowledge and belief, are true; that the consent of _____
(Parent, guardian, or next of kin.)
was voluntary, and I recommend the transfer of the said child. The economic conditions of this pupil's home are (here state facts which will enable the Superintendent of the nonreservation school to give the pupil such instruction and training as may best prepare him to meet these conditions, if he is to return to them):

This _____ day of _____, 1915

Superintendent.

NONRESERVATION SCHOOL PHYSICIAN'S CERTIFICATE.

I hereby certify that on _____, I made a careful examination of the physical condition of _____
(As soon after arrival as possible.)
the child named in the foregoing application, and found _____ to be _____

I therefore recommend that the said child be _____ enrolled in this school.

This _____ day of _____, 1915

Nonreservation School Physician.

SPECIAL NOTE.

This form must be executed in duplicate when a child is transferred from a reservation to a nonreservation school. The Superintendent of the nonreservation school shall be furnished with the original of this form for his files, and the duplicate shall be deposited in the office of the superintendent in charge of the reservation. The Reservation Superintendent will then send to the Commissioner of Indian Affairs his certificate as provided by law. All the blanks must be properly filled in every case.

If the information called for on any part of the blank is not known, that fact should be stated. No space should be left unfilled. Whether the parents are living or dead, their names must be given.

The person who signs the blank as consenting to the transfer should indicate his relation to the applicant by marking out the word "parent," "guardian," or "next of kin," leaving unmarked only the title appropriate to the signer.

INDORSEMENTS.

The laws relating to the transfer of Indian children from reservations and schools are as follows:

That hereafter no Indian child shall be sent from any Indian reservation to a school beyond the State or Territory in which said reservation is situated without the voluntary consent of the father or mother of such child if either of them are living, and if neither of them are living without the voluntary consent of the next of kin of such child. Such consent shall be made before the agent of the reservation, and he shall send to the Commissioner of Indian Affairs his certificate that such consent has been voluntarily given before such child shall be removed from such reservation. And it shall be unlawful for any Indian agent or other employee of the Government to induce, or seek to induce, by withholding rations or by other improper means, the parents or next of kin of any Indian to consent to the removal of any Indian child beyond the limits of any reservation. (28 Stats., p. 906.)

Provided, That hereafter no Indian child shall be taken from any school in any State or Territory to a school in any other State against its will or without the written consent of its parents. (29 Stats., p. 348.)

That no Indian pupil under the age of fourteen years shall be transported at Government expense to any Indian school beyond the limits of the State or Territory in which the parents of such child reside or of the adjoining State or Territory. (35 Stat. L., 781.)

The rules provide that—

A pupil who has been regularly enrolled in a nonreservation school must not be taken to any other nonreservation school without the consent of both Superintendents and the Commissioner of Indian Affairs, and superintendents will be held to strict accountability for such pupils taken to their schools.

An Indian boy or girl 18 years old and over may, without the consent of parents or others, personally sign the application form on its being changed to suit the case; but in all cases where the parents are living they should first be consulted.

This form is to be used only in transfers from reservations or Indian schools to nonreservation schools.

NAME Lucy Smith Sex ☒ Male ☐ Female
 Tribe Chipp State Minnesota Aug 28, 1911
 Age 14 years Respiration normal Condition of, Eyes good
 Height 5 ft. 8 1/2 ins. Mensuration { Insp. 36 Ears negative
 Weight 152 lbs. { Exp. 33 Throat "
 Temperature normal Vaccination yes Cervical glands enlarged
 Pulse " Vision good Skin Eczema, face & hands
 Inspection Eczema, face, fore arms & hands
 Palpation negative
 Percussion "

Auscultation "

Heart "

(Menstruation) normal

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	<u>1</u>	<u>Good</u>		
Mother	<u>1</u>	<u>"</u>		
Brothers	<u>3</u>	<u>"</u>	<u>1</u>	<u>gross old - unknown</u>
Sisters	<u>1</u>	<u>"</u>	<u>1</u>	<u>"</u>

Personal history negative

Present condition good except eczema & enlarged cervical glands

P. Richards, M. D.

This form is for the record of the physical condition of pupils of boarding or nonreservation Indian schools. It should be filled in by the school physician at the time of the admission of the pupil.

Physicians in the field should use this form to record the examination of pupils for transfer to nonreservation schools. It should accompany the pupils' transfer blanks.

The reverse side is intended as a card-index case-record for use by all Service physicians.

Name _____

Age _____ Sex { Male.
Female. } Tribe { Full
1/ } _____ Residence _____

(On _____, 19____)

[illegible]

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NAME.

Lucy Smith

TRIBE.

Chippewa

PARENT OR GUARDIAN.

Frances Smith

DATE ENROLLED.

Sept. 8, 1911

TERM.

Five years

AGE.

14

HOME ADDRESS

White Earth, Minn.

DATE OF RECORD

ACADEMIC DEPARTMENT.

INDUSTRIAL DEPARTMENT.

DORMITORY.

OUTING

SPECIAL REMARKS.

ROOM
NO.

Scholarship

Conduct.

Shop.

Ability.

Conduct.

Room
No.

Neatness

Conduct.

Ability.

Conduct.

Dec. '11

Gen.

7.

U. G.

P.

U. G.