DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT Clellan Sowlax THE SHAW-WALKER CO., MUS"EGON-CHICAGO 33877 Months in school before Carlisle, Frade entered at Carlisle, ... /st. Grade at date of Discharge,..... Trade or Industry, General Work, attends Meth. S. S & Presty miles to sch

PHYSICAL RECORD,

NAME OF PUPIL	Powel	as michel	lan	DATE 715 19 08						
AGE// YEARS RE	NEW STUD	ENT. TRIBETEL	da	STATE MY.						
DEGREE OF INDIAN BI	.00D			V						
INSPECTION (CO.	ud p	fouldire	d.							
PALPATITION N	ma	(
PERCUSSION	PERCUSSION Normal									

Auscultation Resp.	MURMUR 7	omal								
HEART SOUNDS										
		RESPIRATION								
- 9	8	HEIGHT 4 FT	8/1	WEIGHT 78 LBS.						
TEMPERATURE 7			J.Y.IN.	WEIGHT / O LBS.						
VISION	0//o degs.		ood	WEIGHT 78 LBS.						
	2/10	Vaccination 9								
VISION			Dead.	Cause of death.						
VISION	2/10	Vaccination 9								
VISIONFAMILY HISTORY:	2/10	Vaccination 9	Dead.							
VISIONFAMILY HISTORY:	2/10	Condition of Health.								
VISIONFAMILY HISTORY:	2/10	Vaccination 9	Dead.							
VISIONFAMILY HISTORY: FATHERMOTHER	2/10	Condition of Health.	Dead.							
VISIONFAMILY HISTORY: FATHERMOTHER BROTHERS	Living. Ges	Condition of Health. Good Good Good	Dead.	Cause of death.						
VISIONFAMILY HISTORY: FATHER	Living. Ges	Condition of Health. Good Good Good	Dead.	Cause of death.						
VISIONFAMILY HISTORY: FATHER	Living. Ges	Condition of Health. Good Good Good	Dead.							
VISION	Living. Ges	Condition of Health. Good Good Good	Dead.	Cause of death.						

(over)

HOSPITAL RECORD.	
•	

EXAMINATIO	N FOR OUTING:
	TON OCTING.
	1
Dates:	Conditions:
	Conditions:
	Conditions:
	Conditions:
DATES:	Conditions:
	Conditions:
april 6,1909	Conditions:
april 6,1909	Conditions:
april 6,1909	Conditions:

McClellan Powlas is one of our 12 year old boys in the country. 180 Carlisle Pa. Dec. 16, 09. Indian Industrial School Alear Sir. I changed the report where I made the mistake. I sorry that I caused you to have to send then back. mcclellan is getting along fine in school the does better work than some of the white boys in his grade, He is in the second reader and will be all to take up the third before the year is up as he has part of the third grade work now

he usually studies in the evenings. Hal has not mirred any apelling words this month and is very proud of it. He also has part in the Senday School bahristmas entertainment. very truely yours mrs. D. W. Line Carlisle, R. U * 5

1081																
NAME.			3 3		TR	IBE.		/	PA	RENT OR GU	ARDIAN					
F	Powlas, McClellan · Ononda							AGE. HOME ADDRESS.								
DATE ENROL	LED.			TERM.			1	AGE.	HC	OME ADDRES	SS.	2014				
A	ug.	25,	1907						10	Syracuse, N.Y. R.F.D.No.5						
DATE OF REC	COPD		DEMIC DEPA		INDUS	STRIAL DEPA	RTMENT.		DORMITO	RY.	OUT	TING	SPECIAL REMARKS.			
DATE OF REC	COKD	ROOM NO.	Scholarship	Conduct.	Shop.	Shop. Ability.		Room No.	Neatness	Conduct	Ability, Conduct					
jupi. o	8.	nov	Good	Good.							Fair	Good.				
Jan.	09	nor.	Good	Good	Farm		Grod	39	Pour	Good	Fair	Good				
aprily o	9	nor.	1 ((1	Ten.	11	19		9000	11	V. Sd.	Gova				
gui.	10								10		V. Sd	y. Ld				
July	10										4000	Jo02				
0 '																
									•							

5-192

BRIEF.

STATE OF THE PARTY
APPLICATION OF Isaac Poulass
The Clellan Powlars
IN THE INDIAN SCHOOL AT CARLISLE, PA.
Carterolle, PA.
POST-OFFICE ADDRESS OF APPLICANT: RFS No 5 Syracuse My Date of enrollment, AIIG 25 1907 , 190
Term of enrollment, Five (5) years.
Ressie & Beach

Position, ...

APPLICATION FOR ENROLLMENT IN A NONRESERVATION SCHOOL.

(For a child not enrolled at an Agency.)

For and in consideration of t	he United States assuming t	he care, ed	lucation, a	nd mainter	nance in
the United States Indian School	at Carlsole,	Pen	e hui	~ .	, of
Mc Clellan 9 (Name of child.)	owlers, I,	I (Pare	Saocx nt, guardian, or n	Powla ext of kin	e.
6	16		hereby vo		consent
and agree to the enrollment	in said school for a period	of fm(years	, and also	obligate
and bind myself to abide by all to	he rules and regulations for				
I further say that the said ch	ild was born at Ononda	199	on <u>N</u>	or 3	(189, 2)
that the father, I look (Name of	Powlass, is a t	Tell Ind	lian of the	Onos	rdoga
Tribe located at Mondag			bout	(Approximate d	, oto)
that the mother, Eliza F	volass, nor a	Full In	dian of the	10 -	da
Tribe located at	Agency, and left t	the tribe a	bout	proximate date.)	; that
the said child was born and reare	d in the United States, and	now actua	, , ,		and that
he has attended the following s	chools:				
NAME OF SCHOOL-PUBLIC, GOVERNMENT, OR MISSION.	LOCATED AT—	DATE OF ENROLLMENT.	DATE OF DISCHARGE.	Cause of Discharge.	GRADE.
Government	Onondaga				3d
	J .				No. 400 No. 500 No. 50
This 24 day of au	equal, 1907				
Two witnesses:			hie		
Mrs & U Pr	eseo	Isa	aexp	owhas	A
Bannia B F	30000 -	00	guardian, or next	of kip.)	and h
(Note.—Every blank in this applica	tion must be properly filled out by	v the applica	nt, in his ow	n handwritin	g, if pos-
sible. The signature, whether by mark	or otherwise, must be attested by	two witnesse	s.)		
	AFFIDAVIT.				
I, Ssaar Poros	less do hereby	swear that	the states	ments mad	e in the
above application are true.			Tenn	hip	Anna
OR NICH	(Signature o	of applicant.)	(Parent	, guardian, or ne	xt of kin.)
Sworn to and subscribed before	ore me this 24 day of	ang	ust-	, 190 7	
TOTARY :	Qu	win	nus	holo	
(Note: This application and affidar parent with whom the child is living; if	vit must be executed before some the parents are dead, by the guard	officer auth	orized that	ny vister pat	Behy Sheci
Aye limits, fourteen to twenty years.	NOTE			,	
Aye limits, fourteen to twenty years. It ferably full Indian. Special cases beyond to and the term reduced to three years, in exceptions.	he age limit will be given consider	ation. An i	ndustrial cou	rse only can	be taken

CERTIFICATE OF PHYSICIAN.
I, I collection e, a practicing physician of Coronda (a
halle, do hereby certify that I have carefully examined Mo Clellan How, less
the child named in this application, and find that his in proper physical condition to attend
school, and is not afflicted with tuberculosis or other disease which would be a menace to the health
of other pupils. This 24 day of August, 190 7 Ablucamen D.
VOUCHER OF SOLICITOR FOR SCHOOL.
I hereby certify that I was present and witnessed the execution of the foregoing application
made by Jack Powlass; that its contents were explained or interpreted to (Parent, guardian, or next of kin.)
by; that I believe understood the purport
thereof; that I was present at the medical examination of the child named herein; that L.
resides with Isaac Poulass, in or near the town of Ononday, a (Name of person-parent, guardian, etc.)
that the child can not have adequate and proper educational facilities at home for the reason that
D. D. D. A.
Dated at Ovendaga Bessie B. Beach
this 24 day of August, 1907 Librarian (Official title.)
(Note.—This voucher must be executed by the official representative of the nonreservation school to which application is made. Pupils and Indian solicitors will not be accepted.)
VOUCHERS OF DISINTERESTED PERSONS.
VOUCHER NO. 1.
I, Fred Waterman, a Student, of (Business, calling, or profession.) Sarlisle, , Ca., do hereby certify that I am personally acquainted with
I saac Powlass who makes the foregoing application; that I believe his state-
ments therein are true; that I am acquainted with Mc Clelland Powlass; that
he is known and recognized in the community in which he lives as an Indian; that in my opinion
he can not receive proper and adequate schooling at home for the reason that.
This 24 day of angust, 1907 Fred Watermann
6-871 auman

VOUCHER No. 2.

I, Mrs E. a. Piesel, a (Business, calling, or profession.)
(Business, calling, or profession.) , do hereby certify that I am personally acquainted with
Isaac Powlass, who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with McClellan Powlass; that
he is known and recognized in the community in which he lives as an Indian; and that in my
opinion he can not receive proper and adequate schooling at home for the reason that
This 24 day of august, 1907 Mrs & a. Presies
CERTIFICATE OF SCHOOL PHYSICIAN.
I hereby certify that on
nation of the physical condition of, the child named in
the foregoing application, and found to be
A DESCRIPTION OF THE PROPERTY
I therefore recommend that the said child be enrolled in this school.
This, 190
School Physician.

INDORSEMENT.

A child showing one-sixteenth or less Indian blood, whose parents live on an Indian reservation, Indian fashion, who, if debarred from the Government schools, could not obtain an education, may be permitted in the reservation day and boarding schools, but it is preferable that it be not transferred to a nonreservation school, without special permission from the Office. Children showing one-eighth or less Indian blood, whose parents do not live on an Indian reservation, whose home is among white people where there are churches and schools, who are presumed to have adopted the white man's manners and customs, and are to all intents and purposes white people, are debarred from enrollment in the Government nonreservation and reservation schools. Superintendents, in all cases where doubt exists as to the degree of Indian blood of a child proposed for transfer, should fully satisfy themselves of the facts by affidavits from reliable persons, which affidavits must be kept on file at the school.

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.

A pupil dismissed from school for cause must not be enrolled in any other school without the permission of the Commissioner of Indian Affairs. Full facts must be submitted with each request.

Name of Student Mc Clellan Powlas Ho	ARLISLE	Sac	STRI	Pow	choc	Syr	R.J.	D#5	, n.	у, т	ribe (mo,	749 nda	2 igs
Age at Entrance Oug_27_1907Shop		1910 JAN.	FEB.	MAR.	APR.	MAY	JUNE	JULY	AUG.	SEPT.	ост.	NOV.	DEC.	TOTAL OR AVERAGE
Mrs. D. W. Line	Days in School	20	19	18								18	20	
Patron Mrs. D. W. Line Address Carliste Ga, R. F. D. Ab Carliste Ga, Recommended by Recommended by	Conduct	yd.	9	18 9. m 9.	4.	9	y	Yd	4.	4.	G.	9.	9	
School	Ability	Sd	9	m	9,	y	y	Ex.	En	Ex	G.	y.	y	
Grade of Home Church Methodist	Health	gd	9	9.	G.	4	y	Gd	. g.	g.	9.	g.	g	
Date of Outing Outr-8-1909 Date Returned -14-16 Wages	Earnings				2	2.2	57.00	89,	2	2.				
WANTER A FORE MED. CO. DOOMETED N. V.														

		OUTIN	IG RECORD -	CARLISLE	INDU	STR	IALS	СНО	OL								
Name of Student Home Address Tribe																	
Age at Entrance	Date of Entrance	Shop			JAN.	FEB.	MAR.	APR.	MAY	JUNE	JULY	AUG.	SEPT.	ост.	NOV.	DEC.	TOTAL OR AVERAGE
Patron) L	ocality	Days in School													
Address		R. R.	Station	Conduct													
Recommended by			Grade in School	Ability													
Grade of Home		Church	,	Health													
Date of Outing	Date Returned	Wages		Earnings													
•																	
YAWMAN & ERBE MFG. CO., ROCHESTER,	N. Y.															441037	3M. 4-00

1689, REPORT AFTER LEAVING CARLISLE Mc Clellan Rowlas.

441037 3M-4-09

PRESENT NAME

FRESI	ENT NAME				
DATE .	INFORMATION THROUGH	ADDRESS	OCCUPATION	ITEMS OF INTEREST	GRADE
1911		Tyroouse n.y.	ot, la b		
7711		granis,	sudenr		
,					

Powlas M. Cleffan 1087 Patron- Mrs. D. Mairo, file Correspondence Ex-stu. 5228