

Patient Druce Gooseback Carlisle, Pa. May 17 1918 Physician Tralie & Allen
 Address _____ Nurse Delia Edwards

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
					May 17-18				
					Lead water			7.00	Foot dressed.
					and Laudanum				
					on foot.				
					May 18-18				
7.00	97.2	74	20		Lead water &				
5.00	98.1	72	18		Laudanum on				
					Foot.				
					May 19-18			10.00	Foot dressed.
7.00	97	72	18						
5.00	97.2	72	18						
					May 20-18				
7.00	97	74	20						
					May 22-18			10.30	Foot dressed
7.10	97	72	18						
5.00	98	72	18						
					May 23-18				
7.00	98	74	20						
6.00	98	72	18						
	98?	74	20						
7.00	97	60	20		May 24-18				

TRADE RECORD, CARLISLE.

PUPIL

TRADE

ABILITY

CONDUCT

REMARKS

INSTRUCTOR

Bruce Goes-back
Carpenter & Foot-Ball Player
Pretty Hair
Good
John A. Herr

Case No. _____

DIAGNOSIS

Revise

Notes of Case

Name Bruce Gooseback M.F.

Age _____ S.M.W. _____

Nativity.

Occupation.

Residence

Date of admission. May 17. Qm

Diet

Full

Treatment

Result

[illegible]

NO.

United States Indian School Hospital,
Carlisle, Pennsylvania.

YEAR 1913.

TRIBE

FULL. ONE

NAME Bruce Gusback.

AGE

DIAGNOSIS Sprained Ankle.

ADMITTED May 17.

DISCHARGED May 27

RESULT Good

VISITING PHYSICIAN:

RESIDENT PHYSICIAN:

A. R. Allen

H. B. Fraley

REMARKS:

Patient. *W. J. Woodhouse*

Carlisle, Pa.

Nov. 1

19

Physician

Address

Nurse

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
7:15	98					6:30	Pat meat, cream bread butter.		
4:00	98-60					12:00	meat, gravy and coffee potatoes meat bread butter		
							Lincoln's Soap and water,		
						5:30	Potatoes, meat, sauce, bread, butter & tea		
Dec. 2 - 11									
7:15	98					6:30	Pat meat cream meat, gravy, bread butter and coffee.		

[illegible]

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C.
42°

-41°

-40°

-39°

-38°

 -37°

-36°

 L_{35°

PUPIL'S HEALTH REPORT.

This blank is issued so that the school authorities may keep in touch with the health of the pupil. The patron is requested to fill this blank out on the first of MAY, JULY, SEPTEMBER, NOVEMBER, JANUARY, and MARCH, and send it to the school with the outing report for the month.

Patron's name and address.....

Pupil's name.....

General health of the pupil.....

Has pupil been ill the past two months?.....

Name of disease.....

Name and address of the physician in attendance.....

Does the pupil have a cough?.....

For how long has he had it?.....

Give the pupil's weight.....

Has the pupil any trouble with the eyes?.....

Are the eyelids inflamed?.....

Remarks:.....

Date.....

In cases of serious illness, notify the school at once and have the physician in attendance send in a written report of the case.

PUPIL'S HEALTH REPORT.

This blank is issued so that the school authorities may keep in touch with the health of the pupil. The patron is requested to fill this blank out on the first of MAY, JULY, SEPTEMBER, NOVEMBER, JANUARY, and MARCH, and send it to the school with the outing report for the month.

Patron's name and address.....

Jay W. Seaver

Pupil's name.....

Bruce Grosbeck

General health of the pupil.....

Excellent

Has pupil been ill the past two months?.....

No

Name of disease.....

- -

Name and address of the physician in attendance.....

Does the pupil have a cough?.....

No

For how long has he had it?.....

Give the pupil's weight.....

about 135

Has the pupil any trouble with the eyes?.....

No

Are the eyelids inflamed?.....

No

Remarks:.....

Grosbeck is O.K.

Date.....

Jay W. Seaver, M.D.
Aug. 12, 1912

In cases of serious illness, notify the school at once and have the physician in attendance send in a written report of the case.

Patient Bruce Goesbeck

Carlisle, Pa.

191 ³Physician Allen and MengerNurse Minnie B. Hawk

Address _____

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
Nov. 3-1913									
7 AM	99	69	20	8 AM	Salol and Phen. gr.				
				11 AM	" " "				
				2 PM	" and "				
4 PM	100.2	60	25	5 PM	" and "				
				6 ³⁰	Calomel gr. $\frac{1}{4}$.	} = gr. i.			Ice Cap to head.
				7 ¹⁵ PM	Calomel gr. $\frac{1}{4}$.				
				7 ³⁰	Calomel gr. $\frac{1}{4}$.				
				8 ^{PM}	Calomel gr. $\frac{1}{4}$.				
8 ^{PM}	101 $\frac{4}{5}$	60.	24.	8 ^{PM}	Salol gr. v.				Alcohol rub.
8 AM	100	68	18		Phenactine Cap. 1.				
11 AM	99 $\frac{4}{5}$	80	20	11 AM	Salol gr. v.				Ment = 4 - 13.
					Phenactine capl.				
Nov 4. 1913									
5 PM	100.2	64	24						
7 AM	97.4	64	20.						
Nov. 5									
8 AM	101	66	24						
Nov. 6									
7 AM	101	68	24	8 AM	Salol and Phen. gr. v.				

Patient Bruce Goetsch Carlisle, Pa. Nov. 6 1913 Physician Allen & Menger
 Address _____ Nurse Minnie Blackhawk

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
					Nov. 6				
				11 AM	Salol and Phos. grs				
					Nov. 7				
7 AM	98	64	18	8 AM	Salol and Phos. grs				
					Nov. 8				
7 AM	97	60	18	8 AM	Salol and Phos. grs				
5: PM	97	64	18	4:30	Salol and Phos. grs				
8 PM	96	70	18						
					Nov. 9				
7 AM	98	58	20	11:00	Salol & Phenol @. 8-11-2-5-8.				
12:00 AM	98	56	18	2:00	Salol & Phenol				Liq. Diet: @. 7-10-12-3-5 ³⁰ #8.
4:00 PM	98	60	22		Tr. Nux. Vomica. grs X @. 6 ³⁰ , 11 ³⁰ , & 5.				
					Nov. 10				
7 AM	97	60	22		Salol and Phos. @. 8-11-2-5-8				
5: PM	98	60	18		Tr. Nux. Vomica grs X @ 6:30, 11:30 and 5:00				
				8:30	Satts				
				2:00	Salol & Phen				
				8:00	Salol & Phen				

Patient Bruce Goestebach Carlisle, Pa. Nov. 11 1913 Physician Allen and Menger
 Address _____ Nurse Cora Ehn and Minnie Bhawk

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
7:00	97.4	62	20	6:30	Tr. Nux. Vomica gtt. X a.c.				
				8:00	Salol and Phen. grs. V.				
5:00	98	48	21	5:00	Salol & Phen grs. V				
					Nov. 12				
7:00	98	64	20	6:30	Tr. Nux. Vomica gtt. X a.c.				
				8:00	Salol & Phen. grs. V.				
5:00	98	68	21	2:00	Salol & Phen. grs. V				
				3:00	Tr. Nux. Vomica gtt				
					Nov 13				
7:00	98	72	20	6:30	Tr. Nux. Vomica gtt. X a.c.				
				8:00	Salol and Phen. grs. V				
				11:00	Salol and Phen. grs. V				
				11:30	Tr. Nux. Vomica gtt. X a.c.				
				2:00	Salol & Phen. grs. V				
				3:00	Tr. Nux. Vomica gtt. X a.c.				
5:00	97	60	18		Salol & Phen.				
				6:00	" "				
				8:00	" "				
					Tr. nux Vomica X a.c.				

Patient Bruce Goetsbeck Carlisle, Pa. Nov. 14, 1913 Physician Allen and Menger
 Address _____ Nurse Cora Elm & Minnie B. Hunt

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
7:00	98.2	68	20	6:30	Ir. Nux. Vomica gtt. X a.c.				
				8:00	Salol and Phen. grs. V				
				11:00	" " " "				
				11:30	Ir. Nux. Vomica gtt. X a.c.				
				2:00	Salol and Phen. grs. V				
				5:00	" " " "				
5				5:00	Ir. Nux. Vomica gtt. X a.c.				
					Nov. 15				
8 P.M.	101.2	92	20.	8 P.M.	Ir. Nux. Vom. gtt. X a.c. ^{gr. i. d.}		Soft diet @ 7. 12.		
					Calomel gr. $\frac{1}{4}$ @ 5:30				
					Calomel gr. $\frac{1}{4}$ @ 5:45 P.M.				
					Calomel gr. $\frac{1}{4}$ @ 6 P.M.				
					Calomel gr. $\frac{1}{4}$ @ 6:15 P.M.				
9 P.M.	100.0	82	20				Albumin @ 3:15 P.M. ^{5. P.M.}		Ice cap to head.
							Egg nog @ 8 P.M.		Alcohol Rub.
					Nov. 16				
7:00	98.	60.	20.		Ir. Nux. Vomica gtt. X a.c. ^{gr. i. d.}				
12 m.	94 $\frac{3}{10}$	60.	18.		Mag. Sulph. $\frac{1}{2}$ glass @ 10: ^{coffee +}				
4.	76 $\frac{3}{10}$	64	20		Salol gr. $\frac{1}{4}$ @ 9.		Albumin @ 10.		
					Phen. gr. $\frac{1}{4}$				

Patient Bruce Goesbeck Carlisle, Pa. Nov. 17 1913 Physicians Allen and Menger.
 Address _____ Nurse Cora Elm

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
					Nov. 17				
7:00	97	58	18		Tr. Nux. Vomica gtt. X a.c. T.i.D.				
5:00	97	68	18	5:00	" " " "				
					Nov. 18				
7:00	97	72	18		Tr. Nux. Vomica gtt. X a.c. T.i.D.				
5:00	97	64	18						
7 AM	96	64	20		Nov. 19				
5:00	98	80	18		Tr. Nux. Vomica gtt. X a.c. T.i.D.				
					20				
5 PM	98	78	18	4:30 PM	Tr. Nux. Vomica gtt. X a.c. T.i.D.				
					Nov. 21				
7:00	96.2	72	18		Tr. Nux. Vomica gtt. X @ 6:30 - 11:30 - 5:30				
4 P.m.	98.2	72	20						
					22				
7	97	60	18		Tr. Nux. Vomica gtt. X				

DIAGNOSIS

Notes of Case

Age _____ S.M.W.

Nativity.....

Occupation_____

Residence.....

Date of admission Oct. 31st 1913.

Diet

~~Salt~~: Liquids.
R6-9-12-3-6

Treatment / 1/2 doz

~~Calone el. gr. $\frac{1}{4}$ = gr. 1st~~

Salal & Pinacitins)
gr. v. Ev. 3 hrs. --

Temp. Pulse + Resp.
ev. 4 hrs. (8-12-4-81-

In Mex. Dom. gets 8 Tid. "ac

Result.....

[illegible]

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1151
NO.

United States Indian School Hospital

Carlisle, Pennsylvania

YEAR 1913

TRIBE

FULL. ONE

NAME Bruce Gustafson

AGE

DIAGNOSIS Paratyphoid Fever

ADMITTED Oct 31

DISCHARGED Nov. 22

RESULT Good

VISITING PHYSICIAN:

RESIDENT PHYSICIAN:

A. B. Allen

Edward F. Menger

REMARKS:

NO.

United States Indian School Hospital,
Carlisle, Pennsylvania.

YEAR 1911

TRIBE

FULL. ONE

NAME Bruce Goes Back

AGE

DIAGNOSIS Contusions of the back
(foot-ball)

ADMITTED Dec. 1

DISCHARGED Dec. 2.

RESULT Cured

VISITING PHYSICIAN:

RESIDENT PHYSICIAN:

A. Hallen

Chas. E. Dively

REMARKS:

[illegible]

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

THE SHAW-WALKER CO., MUSKOGEE, 79104

Church, 1911-1912 1913-1914 1915-1916 1917-1918 1919-1920 1921-1922 1923-1924 1925-1926 1927-1928 1929-1930 1931-1932 1933-1934 1935-1936 1937-1938 1939-1940 1941-1942 1943-1944 1945-1946 1947-1948 1949-1950 1951-1952 1953-1954 1955-1956 1957-1958 1959-1960 1961-1962 1963-1964 1965-1966 1967-1968 1969-1970 1971-1972 1973-1974 1975-1976 1977-1978 1979-1980 1981-1982 1983-1984 1985-1986 1987-1988 1989-1990 1991-1992 1993-1994 1995-1996 1997-1998 1999-2000 2001-2002 2003-2004 2005-2006 2007-2008 2009-2010 2011-2012 2013-2014 2015-2016 2017-2018 2019-2020 2021-2022 2023-2024 2025-2026 2027-2028 2029-2030 2031-2032 2033-2034 2035-2036 2037-2038 2039-2040 2041-2042 2043-2044 2045-2046 2047-2048 2049-2050 2051-2052 2053-2054 2055-2056 2057-2058 2059-2060 2061-2062 2063-2064 2065-2066 2067-2068 2069-2070 2071-2072 2073-2074 2075-2076 2077-2078 2079-2080 2081-2082 2083-2084 2085-2086 2087-2088 2089-2090 2091-2092 2093-2094 2095-2096 2097-2098 2099-2100 2101-2102 2103-2104 2105-2106 2107-2108 2109-2110 2111-2112 2113-2114 2115-2116 2117-2118 2119-2120 2121-2122 2123-2124 2125-2126 2127-2128 2129-2130 2131-2132 2133-2134 2135-2136 2137-2138 2139-2140 2141-2142 2143-2144 2145-2146 2147-2148 2149-2150 2151-2152 2153-2154 2155-2156 2157-2158 2159-2160 2161-2162 2163-2164 2165-2166 2167-2168 2169-2170 2171-2172 2173-2174 2175-2176 2177-2178 2179-2180 2181-2182 2183-2184 2185-2186 2187-2188 2189-2190 2191-2192 2193-2194 2195-2196 2197-2198 2199-2200 2201-2202 2203-2204 2205-2206 2207-2208 2209-2210 2211-2212 2213-2214 2215-2216 2217-2218 2219-2220 2221-2222 2223-2224 2225-2226 2227-2228 2229-2230 2231-2232 2233-2234 2235-2236 2237-2238 2239-2240 2241-2242 2243-2244 2245-2246 2247-2248 2249-2250 2251-2252 2253-2254 2255-2256 2257-2258 2259-2260 2261-2262 2263-2264 2265-2266 2267-2268 2269-2270 2271-2272 2273-2274 2275-2276 2277-2278 2279-2280 2281-2282 2283-2284 2285-2286 2287-2288 2289-2290 2291-2292 2293-2294 2295-2296 2297-2298 2299-2300 2301-2302 2303-2304 2305-2306 2307-2308 2309-2310 2311-2312 2313-2314 2315-2316 2317-2318 2319-2320 2321-2322 2323-2324 2325-2326 2327-2328 2329-2330 2331-2332 2333-2334 2335-2336 2337-2338 2339-2340 2341-2342 2343-2344 2345-2346 2347-2348 2349-2350 2351-2352 2353-2354 2355-2356 2357-2358 2359-2360 2361-2362 2363-2364 2365-2366 2367-2368 2369-2370 2371-2372 2373-2374 2375-2376 2377-2378 2379-2380 2381-2382 2383-2384 2385-2386 2387-2388 2389-2390 2391-2392 2393-2394 2395-2396 2397-2398 2399-2400 2401-2402 2403-2404 2405-2406 2407-2408 2409-2410 2411-2412 2413-2414 2415-2416 2417-2418 2419-2420 2421-2422 2423-2424 2425-2426 2427-2428 2429-2430 2431-2432 2433-2434 2435-2436 2437-2438 2439-2440 2441-2442 2443-2444 2445-2446 2447-2448 2449-2450 2451-2452 2453-2454 2455-2456 2457-2458 2459-2460 2461-2462 2463-2464 2465-2466 2467-2468 2469-2470 2471-2472 2473-2474 2475-2476 2477-2478 2479-2480 2481-2482 2483-2484 2485-2486 2487-2488 2489-2490 2491-2492 2493-2494 2495-2496 2497-2498 2499-2500 2501-2502 2503-2504 2505-2506 2507-2508 2509-2510 2511-2512 2513-2514 2515-2516 2517-2518 2519-2520 2521-2522 2523-2524 2525-2526 2527-2528 2529-2530 2531-2532 2533-2534 2535-2536 2537-2538 2539-2540 2541-2542 2543-2544 2545-2546 2547-2548 2549-2550 2551-2552 2553-2554 2555-2556 2557-2558 2559-2560 2561-2562 2563-2564 2565-2566 2567-2568 2569-2570 2571-2572 2573-2574 2575-2576 2577-2578 2579-2580 2581-2582 2583-2584 2585-2586 2587-2588 2589-2590 2591-2592 2593-2594 2595-2596 2597-2598 2599-2600 2601-2602 2603-2604 2605-2606 2607-2608 2609-2610 2611-2612 2613-2614 2615-2616 2617-2618 2619-2620 2621-2622 2623-2624 2625-2626 2627-2628 2629-2630 2631-2632 2633-2634 2635-2636 2637-2638 2639-2640 2641-2642 2643-2644 2645-2646 2647-2648 2649-2650 2651-2652 2653-2654 2655-2656 2657-2658 2659-2660 2661-2662 2663-2664 2665-2666 2667-2668 2669-2670 2671-2672 2673-2674 2675-2676 2677-2678 2679-2680 2681-2682 2683-2684 2685-2686 2687-2688 2689-2690 2691-2692 2693-2694 2695-2696 2697-2698 2699-2700 2701-2702 2703-2704 2705-2706 2707-2708 2709-2710 2711-2712 2713-2714 2715-2716 2717-2718 2719-2720 2721-2722 2723-2724 2725-2726 2727-2728 272

Over.

Months in school before Carlisle, 80

Grade entered at Carlisle, 5th

Grade at date of Discharge, 7th

Trade or Industry, *Turner*

Episcopal

Conduct —————

Mrs. Henry Goes back,
Ft. Washakie,
Wyo.

1911
Bruce Goesback, who left here a year ago, is now at his home in Fort Washakie, Wyoming. He intends to return to Carlisle in the fall. 1737

It is now nearly two years since Bruce Goesback left Carlisle; during this time he has been interpreter, and now he is both interpreter and coach at Wind River School, Wyoming. 1737 (1911)

Flandreau, South Dakota

Weekly Review.

Bruce Goesback arrived last Saturday and has taken up the duties of assistant disciplinarian. 1914

NAME

377
Bruce GrossbeckSex { Male.
Female.

Tribe

{ Full
+ }

Arapahoe

State

Wyoming

Sept 14, 1911

Age

21

years

Respiration

18

Condition of, Eyes

OK

Height

5 11

ins.

Mensuration

Insp.

41

Ears

OK

Weight

148 1/2

lbs.

Exp.

36

Throat

OK

Temperature

98

Vaccination

Sept 14 - 11

Cervical glands

OK

Pulse

78

Vision

Skin OK

Inspection

Supra clav. fossae prominent

Palpation

OK

Percussion OK

Auscultation

Rales at L. apex

Heart

OK no murmur

(Menstruation)

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	yes	were		
Mother	yes	"		
Brothers			1	
Sisters				

Personal history

Stomach trouble

Present condition

good

Elmer Hess, 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.

CASE RECORD, 5-354.

Name _____

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

(On _____, 19____)

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Goesback, Bruce DATE 12/3 1908

AGE 19 YEARS { NEW { STUDENT. TRIBE Arapaho STATE Wyo

DEGREE OF INDIAN BLOOD.....

INSPECTION Good development. Hallow beneath left clavicle.

PALPATION Normal

PERCUSSION Normal

AUSCULTATION { RESONANCE.....
RESP. MURMUR Normal

HEART SOUNDS.....

MENSURATION { INSP. 38
EXP. 32 1/2 RESPIRATION 18 PULSE 60

TEMPERATURE 97 degs. HEIGHT 5 FT 9 1/2 IN. WEIGHT 158 1/2 LBS.

VISION 10/10 VACCINATION None Rec. 12/23/08

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>1</u>	<u>Consumption</u>
SISTERS {				

PERSONAL HISTORY: Good health

REMARKS:

HOSPITAL RECORD.....

EXAMINATION FOR OUTING:

DATES:

CONDITIONS:

1737.

Record of Graduates and Returned Students.

U. S INDIAN SCHOOL, CARLISLE, PA.

NAME Bruce Groesbeck January 11, 1914.

1. Are you married and if so to whom? I'm not married.

2. What is your present address? Wind River, Wyo.

3. Did you attend or graduate from any other schools after leaving Carlisle? No. Give names of schools and dates if possible

4. What is your present occupation? My occupation was

Painting But I am an Interpreter

5. Tell something of your present home Have no home yet.

6. What property in the way of land, stock, buildings or money do you have? I have
eighty acres of Land.

7. Have you been in the Indian Service? In what positions? How long in each? I

have been in the Indian Service
as an Interpreter, and been in
the Service nine months.

8. What other positions have you held since leaving Carlisle? I have held the position as a Coach at the Wined River Indian School, and Interpreter the same time.

9. Tell me anything else of interest connected with your life:

I have been away for almost two years, and am getting along fine, battling the world for myself.

I have held the position as a Coach here at this School for four months, and the people in charge of this school seem to be satisfied so far.

and am helping the Indians along in every way I can on this place, the Shoshoni and Cragato Indian Reservation, and the school also.

CARLISLE INDIAN SCHOOL

No.

5016

NAME.

Bruce Groesbeck

AGE.

23

TRIBE.

Гражданское

DEGREE
OF
INDIAN
BLOOD.

Full

NAME OF AGENCY AND RESER-
VATION, IF ENROLLED; IF NOT,

2 POST OFFICE OF FAMILY.

POST OFFICE OF FAMILY.
Wind River, Wyo.

DATE ENTERED.

Sep. 24, '13

Months
in
school
before
enroll-
ment
here.

108

IN WHAT GRADE
OR ROOM.

On
entering
here.

At date
of this
report.

Distance
to nearest
public
school
from
pupil's
home.

REMARKS.

(Temporarily absent, outing, deserters, on sick leave,
special authorities for enrollment, etc.)

TO COUNTRY

12- 12- 13

FROM COUNTRY

Reported to be
on pay roll

DATE DISCHARGED

Dec. 1, '13

Episco

Progress from _____, to _____,
 (Date) (Date)

FIRST YEAR IN THIS SCHOOL	SEPT.	OCT.	NOV.	DEC.	JAN.	FEB.	MAR.	APR.
Class or grade								
Academic.....standing*								
Industrial.....standing* (Department)								
Musical: Band.....standing*								
Vocal.....standing*								
Orchestra.....standing*								
Department.....standing*								
Physical condition								

Remarks:

Bruce Goesback.

GRADE

1916.

Wind River, Wyo. Laborer

NAME AT CARLISLE *Bruce Goenbock*

PRESENT NAME

377

BRIEF.

Application of

Bruce Groesbeck,

FOR THE ENROLLMENT OF

Himself,

IN THE INDIAN SCHOOL AT

Carlisle, Pennsylvania

NAME OF AGENCY FROM WHICH PUPIL CAME:

Shoshoni School, Wind River, Wyo.

Date of enrollment..... 191.....

Term of enrollment..... (.....) years

Printed by Carlisle Indians.

Application for Enrollment in a Non-reservation 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, Penna......

of Bruce Groesbeck; male; date of birth Sept. 16, 1890.
(Name of Child) (Sex)

Arapaho.

(Tribe)

NAME OF FATHER (Both Indian and English)	Living or Dead	TRIBE	BAND	DEGREE OF INDIAN BLOOD
<u>Ward Groesbeck;</u>	<u>Living;</u>	<u>Gros Ventre;</u>		<u>Full;</u>
NAME OF MOTHER				
<u>Belinda Groesbeck;</u>	<u>Living;</u>	<u>Arapaho;</u>		<u>Full;</u>

I, Bruce Groesbeck, do hereby voluntarily consent and agree to my enrollment in said school for a period of three years, and also obligate myself to abide by all the rules and regulations for Indian Schools.
(Not less than 3)

The said child has been enrolled in the following schools:

NAME OF SCHOOL	DATE OF ENROLLMENT	DATE OF DISCHARGE	CAUSE	GRADE
1. <u>Shoshoni, Wyo.</u>	<u>1897.</u>	<u>1904.</u>	<u>To Carlisle,</u>	<u>4th.</u>
2. <u>Carlisle, Pa.</u>	<u>1904.</u>	<u>1909.</u>	<u>Term expired.</u>	<u>8th.</u>
3.				
4.				

Bruce Groesbeck
(Parent, guardian, or next of kin)

P. O. address:

Two Witnesses:

PHYSICIAN'S CERTIFICATE.

I hereby certify that I have this day carefully examined the above-named child herein proposed for transfer and find him 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 7th day of September, 1911

Calvin K. Smith

Physician at Shoshone Agency.

CERTIFICATE OF AGENT OR SUPERINTENDENT.

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 not necessary
(Parent, guardian, or next of kin.)
was voluntary, and I recommend the transfer of said child.

This 9th day of Sept, 1911

H. G. Graheworth

Agent or Superintendent.

SPECIAL NOTE.

This form must be executed in duplicate when a child is transferred from a reservation to a non-reservation school. The Superintendent of the nonreservation school will retain the original for his files, and the duplicate shall be deposited in the Agency records. The agent 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.

NOTE.—Age limits, fourteen to twenty years. Preferably fourteen to eighteen. Students must be at least one-fourth Indian, preferably full Indian. Special cases beyond the age limit will be given consideration. An industrial course only can be taken and the term reduced to three years, in exceptional cases.

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 is living, and if neither of them is 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.)

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.

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

NAME

Goesback, Bruce

TRIBE.

Shoshone

PARENT OR GUARDIAN.

Goesback

DATE ENROLLED.

June 25, 1904

TERM.

5 years

AGE.

15

HOME ADDRESS.

Ft. Washakie, Wyo.

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. '07	8	V. Good	V. Good							V. Good	Good.	
Apr. '08	9	Medium	Ex.							V. Good	V. Good	
Jan. '09	10	V. Good	Ex.	Paint	Good	Ex.	108	Good	V. Good			
July '09	11	Good.	Ex.	"	"	Good	109	Fair	Good			
Dec. '11				Carp	7.	Good		Es.	V. Es.			