

OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

291

Name of Student *Anna Ducharme* Home Address

Tribe

Age at Entrance
Date of Entrance
Shop
Patron
Locality
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

JAN FEB MAR APR MAY JUNE JULY AUG SEPT OCT NOV DEC TOTAL OR AVERAGE
July Aug. Sept Oct. Nov Dec Jan Feb Mar Apr May June

C. H. Stock

Gettysburg, Pa.

*4 4
7 7
4 4
4 3*

*4
4
4
3*

OUTING RECORD — CARLISLE INDUSTRIAL SCHOOL

Name of Student

Home Address

Tribe

| Age at Entrance | Date of Entrance | Shop | Home Address | JAN. | FEB. | MAR. | APR. | MAY | JUNE | JULY | AUG. | SEPT. | OCT. | NOV. | DEC. | TOTAL OR AVERAGE |
|-----------------|------------------|-----------------|----------------|------|------|------|------|-----|------|------|------|-------|------|------|------|------------------|
| Patron | | Locality | 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 | | | | | | | | | | | | | |

1921

NAME.

Anna Ducharme

TRIBE.

Pend O'Reille

PARENT OR GUARDIAN.

Ben Ducharme

DATE ENROLLED.

March 2, 1911

TERM.

Three years

AGE.

17

HOME ADDRESS

Polem, ^{son} 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

1221

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL *Ducharme Anna* DATE *Feb 2 1911*

AGE *17* YEARS NEW ~~RETURNED~~ STUDENT. TRIBE *Poncaville Mont*

DEGREE OF INDIAN BLOOD *1/4*

INSPECTION *Family well developed.*

PALPATION *normal*

PERCUSSION *normal*

AUSCULTATION { RESONANCE *normal*
RESP. MURMUR *normal*

HEART SOUNDS *Good*

MENSURATION { INSP. *31* RESPIRATION *20* PULSE *90*
EXP. *33 1/2*

TEMPERATURE _____ degs. HEIGHT *5* FT. *2 1/4* IN. WEIGHT *105* LBS.

VISION _____ VACCINATION *Good scar*

MENSTRUATION *regular*

FAMILY HISTORY:

| | Living. | Condition of Health. | Dead. | Cause of death. |
|----------|------------|----------------------|-------------|-----------------|
| FATHER | <i>Yes</i> | <i>good</i> | | |
| MOTHER | | | <i>Yes</i> | <i>accident</i> |
| BROTHERS | { <i>3</i> | <i>1</i> | | |
| SISTERS | { <i>2</i> | <i>2</i> | <i>good</i> | |

PERSONAL HISTORY: *General health good*

REMARKS:

HOSPITAL RECORD.....

EXAMINATION FOR OUTING:

DATES:

Apr 20 - 11

CONDITION:

Good

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 *Mrs C. Stock, Gettysburg, Pa*

Pupil's name *Anna Ducharme*

General health of the pupil *good*

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 the same as when she came here.*

Has the pupil any trouble with the eyes? *no*

Are the eyelids inflamed? *no*

Remarks: *—*

NAME Mary Ann Stagg Blacharme Sex ~~Male~~ Female.

Tribes ^{East} _{1/2} Kootenia State Montana Feb 26th, 1911

Age 17 years Respiration 21 Condition of, Eyes good

Height 5 ft. 3 ins. Mensuration { Insp. 31 1/2 Ears good

Weight 105 lbs. { Exp. 28 Throat good

Temperature 98 1/2 Vaccination yes Cervical glands normal

Pulse 82 Vision good Skin normal, healthy

Inspection Great Semibritical & healthy

Palpation normal

Percussion normal

Auscultation normal

Heart normal

(Menstruation) Regular & natural

FAMILY HISTORY.

| | LIVING. | CONDITION OF HEALTH. | DEAD. | CAUSE OF DEATH. |
|-------------------|------------------------|-----------------------------|------------------------------|---|
| Father | <u>53</u> | <u>good</u> | | |
| Mother | | | <u>38</u> | <u>Accidentally shot.</u> |
| Brothers <u>3</u> | <u>20</u> | <u>good</u> | <u>2 yo.</u> <u>9 mo.</u> | <u>Diphtheria</u> <u>don't know.</u> |
| Sisters <u>2</u> | <u>16</u> <u>12</u> | <u>good</u> <u>good.</u> | | |

Personal history has had disease of child hood.

Present condition Healthy

John H. Fridman, 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.

1221

5-192 a.

BRIEF.

APPLICATION OF

Ben Sucharme

FOR THE ENROLLMENT OF

Mary Ann Staga Duscharme

IN THE INDIAN SCHOOL AT

Carlisle, Penn.

NAME OF AGENCY FROM WHICH PUPIL CAME:

Flathead

Date of enrollment, *Feb 25*, 19*08*

Term of enrollment, *Three (3)* years.

NAME OF COLLECTING AGENT:

Karl Knudsen

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, Penn.

of Mary Ann Stoyaduscherra Female; date of birth Sept. 8, 1893;
(Name of child.) (Sex.)
Kootenai
(Tribe.)

| NAME OF FATHER. (Both Indian and English.) | LIVING OR DEAD. | TRIBE. | BAND. | DEGREE OF INDIAN BLOOD. |
|---|--------------------|----------------------|-------|----------------------------|
| <u>Ben Duscherra</u> | <u>Living</u> | <u>Band O'Reille</u> | | <u>one fourth</u> |
| NAME OF MOTHER. | | | | |
| <u>Caroline Ashley Duscherra</u> | <u>Dead</u> | <u>Kootenai</u> | | <u>one half</u> |

I, Ben Duscherra, do hereby voluntarily consent and agree to her
(Parent, guardian, or next of kin.)
 enrollment in said school for a period of Three 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>Genoa Neb.</u> | <u>1906</u> | <u>July 1908</u> | <u>Served time</u> | <u>5th</u> |
| 2. <u>Polson Mont</u> | <u>1909</u> | <u>May 1910</u> | <u>Home work</u> | <u>6th</u> |
| 3. | | | | |
| 4. | | | | |

Ben Duscherra
(Parent, guardian, or next of kin.)

P. O. address: Polson

Montana

Two witnesses:

Isaac Hawley
W. G. Brown

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 26 day of February, 1901

John H. Heidelman
Physician at Plathead Agency.

CERTIFICATE OF AGENT OR BONDED 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 _____
(Parent, guardian, or next of kin.)
was voluntary, and I recommend the transfer of the said child.

This 26 day of February, 1901

Ed C. Morgan
Agent or Superintendent.

CERTIFICATE OF SCHOOL PHYSICIAN.

I hereby certify that on _____, I made a careful examination of the physical condition of _____, 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 _____, 190

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 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.

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.)

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.