

CARLISLE INDIAN INDUSTRIAL SCHOOL
 DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

1314

NUMBER 2297 2672	ENGLISH NAME Julia Yellowwood	AGENCY Puni Ridge	NATION Soux
BAND	INDIAN NAME	HOME ADDRESS Puni Ridge, S.D.	
PARENTS LIVING OR DEAD	BLOOD	AGE 19	HEIGHT 5-1/2
FATHER	MOTHER	WEIGHT 115	FORCED INSP. 3 2/3
ARRIVED AT SCHOOL Sep. 17, '11	FOR WHAT PERIOD	DATE DISCHARGED Dec. 8, 1911	FORCED EPXR. 29
TO COUNTRY 11-1-11	PATRONS NAME AND ADDRESS J. B. Craighhead, Lansdowne, Pa.		CAUSE OF DISCHARGE Pregnant
			SEX. F.
			FROM COUNTRY 12-2-'11

THE SHAW-WALKER CO., MUSKEGON, 79104

Months in school before Carlisle,

Grade entered Carlisle, 3rd

Grade at discharge, 3rd

Trade or Industry,

Church,

Miles to sch. -

Ed. Sch.

84224-1910

92614-1911

JPA

NAME Julia Yellowwood Sex Male Female.

Tribes Full } Sioux State So. Dak 9-19, 1911

Age 18 years Respiration _____ Condition of, Eyes Ok

Height 5 ft. 1 1/2 ins. Mensuration { Insp. 32 1/2 Ears Ok

Weight 115 lbs. { Exp. 29 Throat Enlarged Tons.

Temperature 98 Vaccination 9-19-11 Cervical glands Ok

Pulse 80 Vision _____ Skin Ok

Inspection Good

Palpation Tac. Trem. Inc. at R.

Percussion Imp. note R. Apex to 3rd Rib.

Auscultation Exp. prolonged at R. Apex

Heart Ok

(Menstruation) Painful

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father			<u>Yes</u>	<u>Heart.</u>
Mother	<u>Yes</u>	<u>T. B.</u>		
Brothers	<u>1</u>	<u>T. B.</u>		
Sisters	<u>1</u>	<u>Good</u>	<u>1</u>	<u>T. B.</u>

Personal history Measles Losing weight and coughing

Present condition S Unfavorable

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.

OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

498

Name of Student *Julia Yellow Hood* Home Address *Pine Ridge, S. D.* Tribe *Sion*

Age at Entrance *19* Date of Entrance *9-16-'11* Shop _____

Patron _____ Locality _____ Days in School _____

Address *J. B. Craighead* R. R. Station _____ Conduct _____

Lansdowne, Pa. Recommended by _____ Grade in School _____ Ability _____

Grade of Home _____ Church _____ Health _____

Date of Outing *11-1-'11* Date Returned *12-2-'11* Wages _____ Earnings _____

JAN.	FEB.	MAR.	APR.	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.	TOTAL OR AVERAGE
7	8	9	10	11	12	1	2	3	4	5	6	

*E
G
G*

TREATMENT.

Cultural & Falls -
set up 2/6

DIET.

Liquid
Fruit

October

Date	Hr.	P.	R.	T.
4	4:00	76		922
5	8:00	72		98
"	4:00	82		99
6	8:00	82		98
7	8:00	82		98
9	8:00	82		98

Carlisle Indian School Hospital.

1319
Name

Julia Yellow Wood

Age _____

Sec. _____

Diagnosis

Admitted

Oct 4 -

Discharged

Days in Infirmary

Result

E. J.

Resident Physician.

(OVER)

498

REPORT OF Julia Zellweger pupil of Carlisle Indian School, who went Nov. 1 (Date) to live with J. B. Craghan (Patron) of Lansdowne (Post Office), Lancaster (County), Pennsylvania, Lansdowne Pa - Railroad Station (State)

Conduct Et

Health has gone much stouter

Ability Good

Cleanliness "

Economy "

Situation of Room 2nd

Condition of Room Good

Condition of Clothing "

Wages

Are careful accounts kept by patron?

Are careful accounts kept by pupil?

Number of days at school

Distance to school 3 blocks

Grade or quality of school best in school

Name and address of teacher

Qualifications of teacher

In what grade was pupil at Carlisle? 5th

In what grade is pupil at present? 5th

Attends what church and Sunday school? Cath.

Distance to church 3 blocks

Is there a Catholic church in locality? Yes

Who compose patron's family? Mr. + Mrs. C. involved with + child 4

What other help is employed? Ind. nurse + woman 4 weeks

Locality of home Zone

Home life and environments Good

Trade at school

Nature of work Gen. helper

Pupil's age 20 Experience 1 year

Any general statement or wishes of patron or pupils, together with Agent's estimate of place, people, and pupil:

Secundus vult-

Patron says Julia came to her Nov. 1. entered school following Monday. She is a good girl - quiet, seems to be worried about something, she fears something is wrong with her - she is gaining in flesh so rapidly. Patron wrote asking me to come out to see her again. Julia also wrote me a letter saying she was married two years ago to a full breasted by name of Sebastian Garcia of Ray Bunch of Leok. Day 6 or 7 was a good husband died & that she was persuaded to come to Coahuila by person who bought her being at the time she did not know there was any thing wrong with her. Julia requests to be returned to her home at once.

M. S. Gaither
Field Agent

Nov. 27-1911.

1314

5-192 a.

BRIEF.

APPLICATION OF

Mary Yellow-wood

FOR THE ENROLLMENT OF

Julia Yellow-wood

IN THE INDIAN SCHOOL AT

Haskell,

Carlisle, Pa

NAME OF AGENCY FROM WHICH PUPIL CAME:

Date of enrollment, 1911., 190

Term of enrollment, three (3) years.

NAME OF COLLECTING AGENT:

Voluntary, or Mrs. Louie Deon.

Position, _____

Carlisle
Julia Yellow-wood

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. Haskell Institute, Pa.

of Julia Yellow-wood ; Female ; date of birth Sept. 1889 ;
(Name of child.) (Sex.)

Sioux
(Tribe.)

NAME OF FATHER. <small>(Both Indian and English.)</small>	LIVING OR DEAD.	TRIBE.	BAND.	DEGREE OF INDIAN BLOOD.
<u>Fellow-wood</u>	living dead	<u>Sioux</u>	<u>Oglala</u>	<u>full</u>
NAME OF MOTHER.				
<u>Mary White-horse</u> <u>formerly Yellow-wood</u>	<u>living</u>	<u>"</u>	<u>"</u>	<u>full</u>

I, Mary (Yellow-wood) White-horse hereby voluntarily consent and agree to her
(Parent, guardian, or next of kin.)
 enrollment in said school for a period of 3 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. # 28 day school	1897	1898		
2. Flandreau	1899	1903		
3. Rapid City	1903	1905		
4. Flandreau	1906	1909	Age	5th

Mary White-horse
(Parent, guardian, or next of kin.)

P. C. address: Osage Ridge, S.D.

Two witnesses:

J. J. Dameson
Julia Yellow-wood

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 day of August, 1911, 190

Gas B. Waechter MD
Physician at Pine Ridge 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 Julia White-horse was voluntary, and I recommend the transfer of the said child.
(Parent, guardian, or next of kin.)

This day of August, 1911, 190

John R. Newman
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

(As soon after arrival as possible.)

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.

BRIEF.

APPLICATION OF

Mary Yellow-wood

FOR THE ENROLLMENT OF

Julia Yellow-wood

IN THE INDIAN SCHOOL AT

~~Shoshone~~
Carlisle, Pa.

Carlisle, Pa

NAME OF AGENCY FROM WHICH PUPIL CAME:

Date of enrollment, 1911, 190

Term of enrollment, three (3) years.

NAME OF COLLECTING AGENT:

Voluntary, or Mrs. Louie Deon.

Position,

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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. Haskell Board, Pa.

of Julia Yellow-wood ; female ; date of birth Sept. 1889 ;
(Name of child.) (Sex.)

Sioux

(Tribe.)

NAME OF FATHER. <small>(Both Indian and English.)</small>	LIVING OR DEAD.	TRIBE.	BAND.	DEGREE OF INDIAN BLOOD.
<u>Yellow-wood</u>	<u>living</u> <u>dead</u>	<u>Sioux</u>	<u>Oglala</u>	<u>full</u>
NAME OF MOTHER.				
<u>Mary White-horse</u>	<u>living</u>	<u>"</u>	<u>"</u>	<u>full</u>

I, Mary (Yellow-wood) White-horse, do hereby voluntarily consent and agree to her
(Parent, guardian, or next of kin.)

enrollment in said school for a period of 3 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.
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<u>4. Flandreau</u>	<u>1906</u>	<u>1909</u>	<u>Age</u>	<u>5th</u>

Mary White-horse
(Parent, guardian, or next of kin.)

P. O. address: Prime Ridge
S.D.

Two witnesses:

J. J. Durson
Julia Yellow-wood

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 day of August, 1911, 190

Jas B. Waeser M.D.
Physician at Pine Ridge 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 Julia White-horse (Parent, guardian, or next of kin.) was voluntary, and I recommend the transfer of the said child.

This day of August, 1911, 190

John A. Morrison
Agent or Superintendent.

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