

CARLISLE INDIAN INDUSTRIAL SCHOOL

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

1529

NUMBER 4758		ENGLISH NAME Arthur Nephew			AGENCY		NATION Seneca		
BAND		INDIAN NAME			HOME ADDRESS Percy Nephew Perryburg N.Y.				
PARENTS LIVING OR DEAD		BLOOD	AGE	HEIGHT	WEIGHT	FORCED INSP.	FORCED EXPR.	SEX.	
FATHER, L.		MOTHER, D.	Full 1/2	17	5'9 1/2"	137	36 1/2	32	M.
ARRIVED AT SCHOOL		FOR WHAT PERIOD		DATE DISCHARGED		CAUSE OF DISCHARGE			
Aug. 30, 1912		Five years		Feb. 8, 1915		Undesirable			
TO COUNTRY		PATRONS NAME AND ADDRESS						FROM COUNTRY	
4-30-13		J. C. Sauer Lambertville N. J.						N.	
6-3-13		W. S. Torbert, Newtown, Pa.						8-30-13	
7-22-13		Claude Neely, Newtown, Pa.							
5-30-14		Ran Returned to school						9-22-14	

THE SHAW-WALKER CO., MCKEESPORT, PA. 15207-1

36

Miles to school - 36

Grade entered at Carlisle,

Grade at date of Discharge,

Trade or Industry,

Church, Methodist

Miles to school - 3.

1529

CARLISLE INDIAN SCHOOL

No. 4758	NAME.	AGE.	TRIBE.	DEGREE OF INDIAN BLOOD.	NAME OF AGENCY AND RESERVATION, IF ENROLLED; IF NOT, POST OFFICE OF FAMILY.
	Arthur nephew	17	Seneca	1/2	New York

DATE ENTERED.	Months in school before enrollment here.	IN WHAT GRADE OR ROOM.		Distance to nearest public school from pupil's home.	REMARKS. (Temporarily absent, outing, deserters, on sick leave, special authorities for enrollment, etc.)		
		On entering here.	At date of this report.		TO COUNTRY	FROM COUNTRY	DATE DISCHARGE
Aug. 30, 1912	36			3m			
Sept. 1913			No. 4 1/2			8-30-13	
April 1914			No. 5		Mar. 5-30-14	9-22-14	2-8-15
Sept. 14			5				

Meth
~ 1629 ~

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

582

✓

BRIEF.

Application of

FOR THE ENROLLMENT OF

Arthur Percy Nephew

IN THE INDIAN SCHOOL AT

Carlisle, Pennsylvania

POST-OFFICE ADDRESS OF APPLICANT:

Date of enrollment, _____, 191_____

Term of enrollment, *Five* (*5*) years

Application for Enrollment in a Nonreservation School.

(For a child not enrolled at an Agency.)

For and in consideration of the United States assuming the care, education, and maintenance in the United States Indian School at Carlisle Indian School Pa, of Arthur Nephew, Male, I, Percy Nephew (Name of child.) (Sex.) (Parent, guardian, or next of kin.) of Perryburg P. O., State of New York, do hereby voluntarily consent and agree to the enrollment in said school for a period of five years, and also obligate and bind myself to abide by all the rules and regulations for Indian schools. (Not less than 3.)

I further say that the said child was born at Patterson Reservation on April 15, 1898; that the father, Percy Nephew, Sr, a full Indian of the Seneca Tribe located at Catt. Reservation Agency; that he left the tribe about 1st Sept; that the mother, Was, a full Indian of the Seneca Tribe located at _____ Agency, and left the tribe about _____; that the said child was born and reared in the United States, and now actually resides therein; and that he has attended the following schools:

NAME OF SCHOOL—PUBLIC, GOVERNMENT, OR MISSION.	LOCATED AT—	DATE OF ENROLLMENT.	DATE OF DISCHARGE.	CAUSE OF DISCHARGE.	GRADE.
<u>Dist. No. 9</u>	<u>Perryburg</u>	<u>1901</u>	<u>1907</u>	<u>Resign</u>	<u>5th</u>

This 21 day of August, 1912
 Two witnesses: Raymond Nephew Percy Nephew
Spencer Patterson P. O., _____
(Parent, guardian, or next of kin.)

(NOTE.—Every blank in this application must be properly filled out by the applicant, in his own handwriting, if possible. The signature, whether by mark or otherwise, must be attested by two witnesses.)

AFFIDAVIT.

I, Percy Nephew, do hereby swear that the statements made in the above application are true.
Arthur Nephew Percy Nephew
(Signature of applicant.) (Parent, guardian, or next of kin.)

Sworn to and subscribed before me this 21 day of August, 1912
Ralph H. Schwaack

(NOTE.—This application and affidavit must be executed before some officer authorized to administer oaths by the parent with whom the child is living; if the parents are dead, by the guardian or next of kin.)
Notary Public
Catt. Co.

Certificate of Physician.

I, P. D. Lake, a practicing physician of Lawanda, N. Y.
do hereby certify that I have carefully examined Arthur Tephew

the child named in this application, and find that he is 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 20 day of August, 1912 P. D. Lake, M. D.

Vouchers of Disinterested Persons.

VOUCHER No. 1.

I, Victor C. Ames, a Druggist of Lawanda, N. Y., do hereby certify that I am personally acquainted with Arthur Tephew who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with Arthur Tephew; 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 there is no school here now

This 21 day of Aug., 1912 Victor C. Ames

VOUCHER No. 2.

I, Fred Lee Scott, a General Merchant of Lawanda, N. Y., do hereby certify that I am personally acquainted with Arthur Tephew, who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with Arthur Tephew; that he is known and recognized in the community in which he lives as an Indian; and that in my opinion he cannot receive proper and adequate schooling at home for the reason that there is no school here at the present time

This 21th day of Aug., 1912 Fred Lee Scott

Certificate of School Physician.

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

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

This _____ day of _____, 191_____

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 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 non-reservation 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.



NO.

United States Indian School Hospital,

Carlisle, Pennsylvania.

1529

YEAR 1912

TRIBE

FULL. ONE

NAME Arthur nephew

AGE

DIAGNOSIS Acute Gastritis

ADMITTED Sept 11

DISCHARGED Sept 16.

RESULT Good

VISITING PHYSICIAN:

RESIDENT PHYSICIAN:

A. R. Allen

H. B. Fralic

REMARKS:

Case No. _____

DIAGNOSIS

Acute Typhoid

Revise _____

Notes of Case

Name *Arthur Nephew* M.A.

Age _____ S.M.W.

Nativity _____

Occupation _____

Residence _____

Date of admission *Sept 11, 1912*

Diet

Treatment

Result _____

		M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E
Clinical Memoranda	BOWELS																								
	Urine																								
	Daily Am't																								
	F.																								
	107°																								
	106°	8.00 A.M.			8.00 P.M.																				
	105°				8.00 P.M.																				
	104°																								
	103°																								
	102°																								
	101°																								
	100°																								
	99°																								
	98°																								
	97°																								
	Day of Dis.																								
Pulse.	72	56		70	87	86																			
Resp.																									
Date.	12	13		14	15	16																			

C. 42°
41°
40°
39°
38°
37°
36°
35°

Patient Arthur Mepher Carlisle, Pa., Sept 17 1912 Physician H. B. Fernald
 Address _____ Nurse Eva Simone

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
8:00	98	70				6:30	Full		
						10:00	Milk		
						12:00	Full		
						5:30	Full		
					Sept 15				
8:00	97'	84				7:50	Full		
						12:00	"		
4:00	97.3					5:30	"		
					Sept 16				
8:00	97'	86				6:30	Full		

Patient Arthur Nephew Carlisle, Pa., Sept. 11

1912

Physician H. B. Finalic

Address _____

Nurse Eva Simone

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
						5:30	milk + lime water		
					Sept 12				
8:00	96 ⁴	72		8:00	Trux Vom. Elix Peps.	6:30	milk + lime water		
				10:00	" " " "	10:40	" " "		
				12:00	Trux Vom. Elix Pepsin	12:50	Full		
				2:00					
				4:00	" " " "				
				6:00	" " " "	8:30	Full		
					Sept 13				
8:00	97	56		8:00	Trux Vom. Elix Peps	6:30	Full		
				10:00	" " " "	10:00	milk		
				12:00	Trux Vom. Elix Pepsin	12:00	Full		
				2:00	" " " "				
3:30	98 ²			4:00	" " " "				
				6:00	" " " "	5:30	"		
				8:00	" " " "	9:00	milk		

NAME Arthur Nephew. Sex Male. Female.

Tribe { Full } Seneca. State N.Y. Sept 5 -, 1912

Age 17 years Respiration OK Condition of, Eyes Good

Height 5 ft. 9 1/2 ins. Mensuration { Insp. 36 1/2 Ears OK

Weight 137 lbs. { Exp. 32 Throat OK

Temperature OK Vaccination good Cervical glands OK

Pulse OK Vision — Skin OK

Inspection Well Developed.

Palpation Normal

Percussion Normal

Auscultation No Rales.

Heart No murmur.

(Menstruation)

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	yes	Good.		
Mother			yes.	unknown not T.D.
Brothers	8	Good.		
Sisters	0		0	

Personal history measles.

Present condition Good.

H.B. Traler, 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.

Patient Arthur P. Phipps Carlisle, Pa. Jan Dec. 16 1913 Physician Dr. Allen + Dr. Menger
 Address _____ Nurse _____

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
Dec. 15-13									
4 P.M.	98.4	54	18						
8 P.M.	98	66	20		Sol. + Phen.	8 P.M.	Sol. + Phen.		
Dec. 16-13									
7 a.m.	98	54	18						
				8 a.m.	Sol. + Phen.				
				9 a.m.	throat swab.				
				10 a.m.	Tonsillitis Tab.				
				11 a.m.	" "				
12 m	98.4	60	18	12	Ton. Tab. Sol. + Phen.				
4 P.M.	98	60	18	1 P.M.	" "				
				2 P.M.	Sol. + Phen. Ton. Tab.				
				4 ⁰⁰	" " " "				
				5 ⁰⁰	Tonsillitis Tab.				
8 P.M.	98.1	68	18	7 ⁰⁰	" "				
				8 ⁰⁰	Sol + Phen.				
					Ton. Tab.				
Dec. 17-13									
7 a.m.	98.3	62	20	8 ⁰⁰ a.m.	Sol + Phen. Ton. Tab.				
				9 ⁰⁰	Tonsillitis Tab.				

Patient Arthur Nephew. Carlisle, Pa. Dec. 10 1913 Physician Dr. Allen & Menger.
 Address _____ Nurse _____

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
8 ³⁰	99.5			11 ^{am}	Salol gr. v			9 ^{am}	Billed and
12+	100.	66	24	11 ²	Salol + Phen.	12	Soft diet.		in bed.
4	101 ³ / ₅	98	20	4	Salol + Phen.				
8.	100 ³ / ₅	60	20	8.	Salol. & Phen.	5.	Diet Soft.		

Dec; 11-13

Dec. 12 - 13

7a.m.	100	72	20	8a.m.	Salol & Phen.				
4 P.M.	101.4	68	28	12 M.	Salol & Phen.	8a.m.	Sal. Phen.		
8 P.M.	100	74	20	4 P.M.	Salol & Phen.				
				8 P.M.	Salol & Phen.				

Dec. 13 - 13

99.8	80	22							
7 P.M.	99.4	68	18						

Dec, 14 - 13

7a.m.	100.2	68	18						
4 P.M.	99.7	70	18						
7a.m.	99	70	18						
1:10-9m	99.1	66	18						

Dec. 15 - 13

OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

582

Name of Student *Arthur Kephew* Home Address *54*

Tribe *Seneca*

Age at Entrance *17* Date of Entrance *8-30-12* Shop

JAN.	FEB.	MAR.	APR.	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.	TOTAL OR AVERAGE
------	------	------	------	-----	------	------	------	-------	------	------	------	------------------

Patron *J. C. Sauber,* Locality

Days in School

Address *Lambertville, N. J.* R. R. Station

Conduct

Recommended by _____ Grade in School

Ability

Grade of Home _____ Church

Health

Date of Outing *4-30-13* Date Returned *6-3-13* Wages

Earnings

*W. S. Torbert
Newtown, Pa.*

6-3-13

8-30-13

382

Jan. 22nd, 1914.

Mr. Thomas F. Murphy,
Special Agent in Charge, New York Agcy.,
Salamanca, N. Y.

My dear Sir:

I return herewith the application in duplicate that was submitted to me with your letter of January the 20th. Both copies have been signed by Arthur Nephew as was requested and the papers have been otherwise executed.

Very truly yours,

Encls.

HKM.

Superintendent.

DEPARTMENT OF THE INTERIOR
UNITED STATES INDIAN SERVICE

New York Agency,

Salamanca, N. Y.

January 20, 1914.

M. Friedman, Supt.,

Indian School,

Carlisle, Penn.

Dear Sir:

I inclose herewith in duplicate application for the signature of Arthur Nephew, a pupil at your school, covering his share in the annuity payment recently made to the Senecas.

Mr. Nephew's check was cancelled and the share returned to the Treasury as unclaimed.

Respectfully,

Thomas G. Murphy

Special Indian Agent
in Charge.

Encs

Perrysburg N. Y.

Feb 22, 1915

Mr O. H. Lipps

I have received your letter, and the balance of my money all right.

But I think it is more right for you to send me the rest of that money, that is my transportation back here, Because it is my money, since you have taken the school privileges away from me, and you have expelled me from the school

think it is your business

pay the transportation

I didnt want to leave the school, it is not my fault for getting in guard house

I paid my fare back here I dont think thats right at all I am expel for the sake of Griffith, he can not prove that I was disorderly.

I wish you send me that money, I will be satisfied and called expel.

I beg to your Reply

Yours truly
Arthur Wepher

Dear Sir, 10/2/65

Mr Lipps

Will you please send me
the rest of that money,

I believe it is \$5.00, five dollars

My address at Poughkeepsie
Yours truly N.Y.

Arthur Mepher of T. Greene

10/2/15

582

Dear Sir:-

Mr Meyers, will you please send
me the rest of that money for funds
it bad, I think it is five dollars

Yours I remain

Arthur Phelps

Febr. 12th, 1915.

Mr. Arthur Nephew,

Perrysburg, New York.

My dear Sir:

I am enclosing herewith a check for an amount of \$6.08, which represents the entire balance you have to your credit here.

The cost of your transportation was less than anticipated and so the check I send is for a larger amount than referred to by you.

Very truly yours,

Encl.

HKM.

Supervisor in Charge.

