(1) 00
Name devi Welliamo Tribe Senera Age 14
Entered Sept 1902 Address Gawanda, N. y.
Trade Size of allotment nove
Nature of allotment
How much under cultivation?
When you leave Carlisle do you expect to return home? " Don't Thurk By ."
What do you expect to do for a livelihood? Zade - Printing
Have you previously worked at farming?.
Where? Springfield, N. J. How long? alcout 3 7- Have you worked at a trade? What trade?
Have you worked at a trade?
Where?
Remarks
Date 7. 21,1907

Williams Levi Cx Stu Correspondence a.M. Venne: brother-in-law

DEPARTMENT OF THE INTERIOR

UNITED STATES INDIAN SERVICE

Sante Fe, New Mexico. May 4, 1915.

The Arrow Carlisle, Pa.

Dear Sir:

I have noticed that the Arrow has been coming to my old address at Fort Sill, Okla. I do not know when the time expires so if it is still good-just take a good aim with your Arrow and turn it loose in this direction. Find address herewith given and thanking you for the trouble. few recome

L. Gus Williams

Address - Sante Fe, New Mexico.

S. F. I. S.

(Ex-student) also.

Record of Graduates and Returned Students, 479

U. S. INDIAN SCHOOL, CARLISLE, PA.

June 22 1911.
NAME Jevi J. Williams
1. Are you married and if so to whom?
2. What is your present address? Fourtry Okla Bor 245
3. Did you attend or graduate from any other schools after leaving Carlisle? La Give names of
schools and dates if possible
4. What is your present occupation? Newpleusrises at
5. Tell something of your present home In the Julian ferror
Fiving at the helool,
6. What property in the way of land, stock, buildings, or money do you have?
7. Have you been in the Indian Service? In what positions? How long in each?
Entered Indian bersice plee. 11910.

8. What other positions have you held since leaving Carlisle?
engaged by troubing troupse there
Torion countries

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

PHYSICAL RECORD,

	CAR	LISLE INDIAN SCHO	UL.	
NAME OF PUPIL	Welle	aus, Les	u'	DATE 73 190 8
AGE 19 YEARS	NEW STUI	DENT. TRIBE	eca	STATE MY.
DEGREE OF INDIAN	BLOOD 74			
		elaped		
		/		
PALPATATION.	onnal	2		
PERCUSSION M	armal	2 .		
(Po				
Auscultation	SP. MURMUR	40		
CRE	SP. MURMUR.	ocna		***************************************
HEART SOUNDS	2//	•••••		
MENSURATION (INS	sp. 36/4	Prepipation	18	PULSE 70
TEMPERATURE	78 degs	HEIGHT 6 FT	لا IN.	WEIGHT 3/1/2 LBS.
VISION	0/10	Vaccination 9	ood	- 723/08
FAMILY HISTORY:		0		
	Living.	Condition of Health.	Dead.	Cause of death.
FATHER	yes	good		
MOTHER	U	U	yes	?
(1	good	0	
BROTHERS		0		
(5	O and		
SISTERS	X	9	3	
PERSONAL HISTORY	: Oa		9	
	Dood	health		
REMARKS:				
		······		(over)

Hospital Record						
	V FOR OUTING:					
DATES:	Conditions:					
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DATES:	Conditions:					

Levi Will PARENTS LIVING OR DEAD Um O. Suber, Edgewood, Bucks Co., Pa 3-27-08 SHAW-WALKER MUSKEGON Months in school before Carlisle. 30 Grade entered at Carlisle, 3 Grade at date of Discharge, Trade or Industry, Church, Methodist Conduct

Readmit	160 0 1	RLISLE IND						
3969 de	evi Stille	iams	/	nency N.		Ses		
BAND .	INDIAN NAME	HE	Griffe	th C.	Willian	da, F.	enton	/
PARENTS LIVING OR DEAD	MOTHER, Alead	Fiell	2 1	S- S-	WEIGHT	FORCED INSP.	FORCED EXPR.	SEX.
Sept. 7, 190	FOR WHAT	PERIOD		DATE DISCHARG	23,191		serter	
TO COUNTRY		PATI	RONS NAME AN	1				OUNTRY
apr. 1-'03	Am. P. S.	uber 6	Edger	rood,	Buck	co Co, Oa	Sept.	15-13
mar. 31-04	Ohn. It. 1.	Bowers.	Not	u. n.	2.		0., 1	7-04
7-3-106	Long B	ranc	hin	rithe	barro	1	9-8	-06
6-30-07		No	7.				9-10	-67
3-27-108	Home						4-10	-08
6-19-08	J-tom	e ()	in	e ou	1.)			
10-5-08		alwa	the:	bane	d		10-10	-08.
7-11-09	Raw		-1					
		THE SHAW-W	ALKER CO.,	MUSEEGON-C	CHICAGO 3381	7.7		
				122			1	
	Months in s	chool befleisle	ore Ca	rliste.	8			
	Grade enter	ed at Car	lisle, S	3rd	***************************************			
	Grade at da	te of Disc	charge		E SKIPINO KO			
	Trade or In	dustry,						
	Church	met	hoc	dies	_			
	mile	SI	0 1	ch,				

BRIEF

(For a child not enrolled at an Agency.)

APPLICATION OF FOR THE ENROLLMENT OF IN THE INDIAN SCHOOL AT CARLISLE, PENNSYLVANIA POST-OFFICE ADDRESS OF APPLICANT Date of enrollment, , 190) years. Term of enrollment, NAME OF COLLECTING AGENT: Position,

APPLICATION FOR ENROLLMENT IN A NONRESERVATION SCHOOL

(For a child not enrolled at an Agency)

		ed States assun	ing the care, educ	cation, and maintenance in
the United States Indian S	School at C	end	usen	, Pa, of
Lenlui	e d'an	(Sex) , I	,	gnardian, or next of kin)
of Q (Name of child	P. O	., State of	en york do	hereby voluntarily consent
and agree to er	nrollment in said	d school for a p	eriod of	years, and also obligate
and hind myself to abide by	all the rules and	regulation for	Indian schools	
I further say that the	e said child was b	orn at Mon	vanda, N	on 8-13-180;
that the father,Name of the	father	Te or was	a Indian	of the
Tribe located at	annor	Agency; that he	left the tribe abou	t ;
that the mother,	Nama	Is or wa	a Indian	of the
Tribe located at	24110	Agency, and	left the tribe abo	ut; that
the said child was born and				
attended the following school	ols:			
NAME OF SCHOOL.	DATE OF ENROLLMENT.	DATE OF DISCHARGE.	CAUSE.	GRADE.
1.				
2.				
2.	2		**	
2. This 25" day	of Sep	7	190	
	of Sef	7	190	* 1 1 2 . ' 0 0 . '
	of Sef	7 ,	190 Darent, guardin	n, or next of kin
	of Sep	7 ,		n, or next of kin applica
Two witnesses:	2 (1/6)		P. O.,	ant, in his own handwriting, if
Two witnesses:	2 (1/6)	herwise, must be	P. O.,illed out by the applicant tested by two witnesses	ant, in his own handwriting, if
Two witnesses: (Note:—Every blank in possible. The signature, whet	this application ther by mark or ot	AFFIDAVIT	P. O.,illed out by the applicattested by two witne	rant, in his own handwriting, if
Two witnesses: (Note:—Every blank in possible. The signature, whet	this application ther by mark or ot	AFFIDAVIT	P. O.,illed out by the applicattested by two witne	ant, in his own handwriting, if
Two witnesses: (Note:—Every blank in possible. The signature, whet	this application ther by mark or ot	AFFIDAVIT	P. O.,illed out by the applicattested by two witne	rant, in his own handwriting, if
Two witnesses: (Note:—Every blank in possible. The signature, whet	this application ther by mark or ot	AFFIDAVIT	P. O.,illed out by the applicattested by two witne	rant, in his own handwriting, if
	of Sep	7	190	
Two witnesses: (Note:—Every blank in possible. The signature whet	this application ther by mark or ot	AFFIDAVIT	P. O.,	the statements made in the

NOTE

Age limits, fourteen to twenty years. Preferably fourteen to eighteen. Students must be at least one-fourth Indian, preterably 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.

CERTIFICATE OF PHYSICIAN

1,		a practicing physicia	an of
,,, č	lo hereby certify tha	t I have carefully examined	
the child named	l in this application,	, and find that is in proper p	physical condition to attend school,
and is not afflic	ted with tuberculosis	s or other disease which would be a n	nenace to the health of other pupils.
This	day of	, 190	, M. D.
	VOU	CHER OF SOLICITOR FOR SCHO	OOL
I hereby		resent and witnessed the execution	
by	Parent, guardian, or nex	; that its contents	s we.e explained or interpreted to
by			understood the purport
thereof; that l		he medical examination of the ch	
resides with		, in or near	the town of;
		parent, guarana, etc.	
		uate and proper educational facilit	
98.12			
Dated at			
this da	y of	, 190	Official title
(Nors—This cation is made.	s voucher must be exec Pupils and Indian soli	cuted by the official representative of the citors will not be accepted.)	
	VOUC	HERS OF DISINTERESTED PER	RSONS
		Voucher No. 1.	
1,		, a	Business, calling, or profession
		, do hereby certify that	
		who makes the foregoing applic	eation; that I believe his statements
therein are true	e; that I am acqua	inted with	; that
		ne community in which he lives as a	
can not receive	proper and adequa	ate schooling at home for the reason	n that

VOUCHER No. 2.

I,,	a Of (Business, calling, or profession.)
, do her	beby certify that I am personally acquainted with
, who makes the fe	oregoing application; that I believe his statements
therein are true; that I am acquainted with	(Name of child); that
he is known and recognized in the community in whi he can not receive proper and adequate school	ing at home for the reason that
olar 1828 (Tribinger between menter 1875)	
This day of	, 190
remain of the supplementary of the business of the supplementary of the	-
CERTIFICATE OF SCI	HOOL PHYSICIAN
CEMITE OF SOI	
	, I made a careful exami-
nation of the physical condition of	
nation of the physical condition of	, the child hamed in
the foregoing application, and found to	b be
The late of the la	
I therefore recommend that the said child be	enrolled in this school.
This day of	_, 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.

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Betters returned unclaimsed

DEPARTMENT OF THE INTERIOR.

UNITED STATES INDIAN SCHOOL,

CARLISLE, PA.

September 16, 1912.

Mr. Levi Williams,

Fort Scraven, Ga.

Dear Sir: -

I beg to refer to your letter of March 23, 1911, copy of which is herewith, in regards to transportation furnished you from Buffalo for \$8.03, which still stands on account with the Pennsylvania Railroad Company, and who are calling for settlement of same. Please give this matter your attention in order that it may be settled as soon as possible. A remittance to cover the above amount will be greatly appreciated.

Very respectfully,

SJN: SR

Shperintendent.



DEPARTMENT OF THE INTERIOR.

UNITED STATES INDIAN SCHOOL,

CARLISLE, PA.

August 20, 1912

Superintendent,

Fort Sill Indian School, Lawton, Oklahoma.

Dear Sir:

I again refer to my letter of February 5, 1911, in regards to claim of \$8.03, for which the Pennsylvania Railroad Company is calling for settlement, for transportation furnished Levi G. Williams in May 1908, and which should have been paid by him in returning to this school. I enclose herewith copy of a letter received from him, stating that he would pay this sum soon. Please look into this matter and see if settlement cannot be made to cover.

Very respectfully,

Mucduca.
Superintendent.

SJN-BH

March 23, 1911.

M. Friedman, Supt., Carlisle, Pa.

Sir:

I herewith return the papers sent to Ft. Sill

Indian School and in reply will say at the time the arrangements were made according to letters, I may have agreed accordingly, but to my knowledge I made no such.—

Nevertheless, I shall do so for the name of the school and will send you the stated amount when I can spare same. At present I am unable on account of being away last in summer traveling/the old country.

I remain yours truly,

L. G. Williams.

Lawton, Okla.

NAME. Revi Villiams DATE ENROLLED. Sept. 7, 1908, Three Years 21 DATE OF RECORD ACADEMIC DEPARTMENT. INDUSTRIAL DEPARTMENT. DORMITORY. OUTING S	merson eds, n. y.
Levi Villiams Seneca HOME ADDRESS. Coras El Jan	nerson eds, n. y.
DATE ENROLLED. TERM. AGE. HOME ADDRESS. Cora Co. Jan	ido, n. y.
	edo, n. y.
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DATE OF RECORD ROOM IS A CADEMIC DEPARTMENT. INDUSTRIAL DEPARTMENT. DORMITORY. OUTING S	SPECIAL REMARKS.
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NAME AT CARLISLE LEVI WILLIAMS

NAME AT CARLISLE

563757 3M-2-11

PRES	PRESENT NAME							
DATE	INFORMATION THROUGH	ADDRESS	OCCUPATION	ITEMS OF INTEREST	GRADE			
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