

1910

CARLISLE INDIAN INDUSTRIAL SCHOOL
 DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

NUMBER	ENGLISH NAME	AGENCY	NATION					
3440	John Thomas	Devils Lake	Sioux					
BAND	INDIAN NAME	HOME ADDRESS						
		Taninyamawin, Ft. Totten, S.D.						
PARENTS LIVING OR DEAD	BLOOD	AGE	HEIGHT	WEIGHT	FORCED INSP.	FORCED EXPR.	SEX.	
FATHER, Dead	MOTHER, Dead	Full	13	53 1/2	101	30 1/2	27 1/2	M
ARRIVED AT SCHOOL	FOR WHAT PERIOD	DATE DISCHARGED	CAUSE OF DISCHARGE					
Sept 10, 1905	5 years	Nov. 15, 1905	Chronic enuresis					
TO COUNTRY	PATRONS NAME AND ADDRESS						FROM COUNTRY	

THE SHAW-WALKER CO., MUSKOGON-CHICAGO 33877

Grade at date of Discharge, 4th - Good

No trade
 Industry poor

Certificate of discharge
 issued Nov. 15, 1905

See letter to Supt C. L. Davis
 Ft. Totten School relative to
 discharge.

1910

APPLICATION FOR ENROLLMENT IN A NON-RESERVATION SCHOOL

Full name of child John Thomas Indian name is Aracagena
 Name of Father Taninyamanim Name of Mother Sicut
 Reservation Devils Lake Degree of Indian blood of child full Blood
 Is either parent white, if so, which? no Are either or both allotted? mother
 On what reservation? Devils Lake Age of child 14 What reservation school attended? Devils Lake How long? 7 years
 If ever enrolled in a nonreservation school, name of school no
 When? no How long? no If ever dismissed from a school, where; when and for what reason?

(Signed.) John Thomas

NOTE—The above blank to be signed by the child, if old enough to understand its import; if not, by the parent, guardian or other person cognizant of the facts

CONSENT BLANK

I, Tatankagina, parent, guardian or next of kin of the above-named child, John Thomas, do hereby consent to transfer or enrollment for a period of five (5) years in the Indian School at Carlisle, Pa.

Dated at Ft Totten N.D. on the 19 day of Aug, 1905

(Signed.) Tatankagina
 (Parent, Guardian or next of kin.)

Witness

Maud White

PHYSICIAN'S CERTIFICATE

I hereby certify that I have personally examined the above-named John Thomas and have found him physically sound, and recommend the transfer so far as his health conditions are concerned.

Dated at Ft. Totten, N.D. on the 5 day of Sept., 1905

(Signed.) O. O. Benson, M.D.

AGENT'S OR SUPERINTENDENT'S INDORSEMENT

The statements concerning the above-named John Thomas are believed by me to be correct, and I hereby recommend the transfer.

(Signed.) Uhas. L. Davis
 U. S. Indian Agent or Superintendent.

NOTE—Age limits, twelve to twenty years. preferably fourteen to eighteen. Students must be at least one-fourth Indian, preferably full Indian. Special cases beyond the age limit can be given consideration.

card made

Discharged Sept 30, 1905

CONSENT OF

.....
FOR THE ENROLLMENT OF

.....
IN THE INDIAN SCHOOL AT

.....
For the term of years

.....
Name of agency or place from which pupil came:

.....
Date of enrollment, 190.....

Date of discharge, 190.....

Cause of discharge, 190.....

Record of Graduates and Returned Students.

U. S INDIAN SCHOOL, CARLISLE, PA.

Sionx - N.D.

August 13 1910.

NAME *John Thomas Wahpeton, N.D. Ind. Sch.*

1. Are you married and if so to whom? *I am not married.*

2. What is your present address? *Wahpeton, Ind. Sch.*

3. Did you attend or graduate from any other schools after leaving Carlisle? *Yes* Give names of schools and dates if possible. *Attend at Wahpeton Ind. Sch. date Feb 11, 1908.*

4. What is your present occupation? *My present occupation is farming.*

5. Tell something of your present home

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?
I have not been in Indian Service

8. What other positions have you held since leaving Carlisle?.....

.....

.....

.....

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

REPORT AFTER LEAVING CARLISLE

1910

John Thomas

NAME AT CARLISLE

PRESENT NAME

DATE	INFORMATION THROUGH	ADDRESS	OCCUPATION	ITEMS OF INTEREST	GRADE
1910		Wakpeton, N.D.	at school		