THE SHAW-WALKER CO., MUSKESUN. 79104 Months in school before Carlisle. Pub. Sche pana arlor - mdgr. Grade entered at Carlisle, 1st Frade at daw of Discharge, Let. Trade or Industry, hurch.

> belonged to the Seneca tribe located at Verisailles. The father belonged to the Tuscarora Tribe at Lewiston

N.

2056

5-192

BRIEF.

APPLICATION OF
0 1 1
David John
FOR THE ENROLLMENT OF
FOR THE ENROLLMENT OF
David John
North Golden
IN THE INDIAN SCHOOL AT
Coulisle Pa
Course 1 9
POST OFFICE ADDRESS OF APPLICANT:
ann arbor Which.
Jun Wood May.
Cold to d
Date of enrollment, 190 g
Term of enrollment, Fine (3) years.
Term of enrollment,(
NAME OF COLLECTING AGENT:
Position,
6—871

1909

APPLICATION FOR ENROLLMENT IN A NONRESERVATION SCHOOL.

(For a child not enrolled at an Agency.)

For and in consideration of		the care, e	ducation,	and mainte	enance in
the United States Indian School		Pa	7,		, of
David John	, Male, I,	Mose	ent, gyardian, or	nort of him	
of annabor	P. O., State of Mich			oluntarily	consent
and agree to apply enrollment	t in said school for a period	of Fin	year	s, and also	obligate
and bind myself to abide by all t		(Not less th	nan 3.)		1
I further say that the said ch		,		Feb. 2	28,18.88
that the father, More of		half Ind		(Date.)	· ·
Tribe located at Versuil	father.) (Is or was.) Agency: that he let	(Degree.)	about /	867	
that the mother, Sarch	Bruce was	luce In	dian of the	(Approximate	date.)
Tribe located at femilia	Agency, and left	(Degree.)	hout /	8711	: that
the said child was born and reare			(A)	pproximate date.)	
he has attended the following s		i now actua	ally resides	s merein;	and that
	choors:		1		
NAME OF SCHOOL—PUBLIC, GOVERNMENT, OR MISSION.	LOCATED AT-	DATE OF ENROLLMENT.	DATE OF DISCHARGE.	CAUSE OF DISCHARGE.	GRADE.
Public	ann how	1895	1897	World	2
		-	•		
This / day of Su	ft., 1908				
Two witnesses:		700 /	7 1		
andrew Me	hole /	Mus	show		
. (1)	= 701:1	Parent,	guardian, or next	of kin.)	m./
(NOTE - Every blank in this applica	P.	0.,	mo	Vrovi	Ifech
(Note.—Every blank in this applicate sible. The signature, whether by mark of	or otherwise, must be attested by	two witnesses	nt, in his ows.)	n handwritir	ng, if pos-
	AFFIDAVIT.				
1 as Duyer	- alla				
above application are true.	, do hereby	swear that	the state	ments mad	e in the
	da	VM 40,	M/	14208	Konn
Sworn to and subscribed before	1	of applicant.)	5 + Parent	t, guardian, or ne	xt of kin.)
vo and bubbollood belo	day of	00,11	1	, 190 %	
(Norm White and White	CISA	Jury		cuy,	
(Note.—This application and affidave parent with whom the child is living; if	it must be executed before some the parents are dead, by the guard	officer authorized authorized	orized to add of kin.)	minister oath	ns by the 6—871

CERTIFICATE OF PHYSICIAN.
I, Cally , a practicing physician of Our Out
Mull, do hereby certify that I have carefully examined.
the child named in this application, and find that the 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 day of Sept., 190 8 Couly M.D.
This day of the day of
VOUCHER OF SOLICITOR FOR SCHOOL.
I hereby certify that I was present and witnessed the execution of the foregoing application
made by; that its contents were explained or interpreted to
by; that I believe understood the purport
thereof; that I was present at the medical examination of the child named herein; that
resides with, in or near the town of;
that the child can not have adequate and proper educational facilities at home for the reason that
Dated at
this
Dated at
this
this
Dated at
this
this day of
this
this day of
this
Dated at this day of
this day of
Dated at this day of
Dated at this day of
Dated at this day of

VOUCHER No. 2.

	IER NO. 2.							
I, Fer. Ball	, a contractor of							
ann arbor mich . do	(Business, calling, or profession.) hereby certify that I am personally acquainted with							
do do	hereby certify that I am personally acquainted with							
David John , who mak	tes the foregoing application; that I believe his state-							
	with David John ; that							
ments therein are true; that I am acquainted w	(Name of child.)							
he is known and recognized in the communi	ity in which he lives as an Indian; and that in my							
opinion he can not receive proper and adequa	ate schooling at home for the reason that							
This day of Sept,	, 190 8 Ly Ball							
	Lev. 1910							
CERTIFICATE OF SCHOOL PHYSICIAN.								
I hereby certify that on	I made a careful exami-							
	, I made a careful exami-							
nation of the physical condition of	, the child named in							
the foregoing application, and found to h	oe							
The second secon								
I therefore recommend that the said child be								
This day of	100							
This, and ay of,								
	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.

						200	56					
NAME.				TRI	BE.		~ ~	PARE	ENT OR GUA	ARDIAN.		
Dar	id	. Jos	n	9	ona	was	rdo					
DATE ENROLLED.	/		TERM.			A	GE.	НОМ	E ADDRESS	m	orl	s form,
NAME. David John Jonawanda Date enrolled. Jan. 27, 1909. Live years 21 (Hather.) Ann Orlor, Mich. Date of record Academic Department. Industrial Department. Dormitory. Date of record Record Doom.												
ACADEMIC DEPARTMENT. IND		INDUS	INDUSTRIAL DEPARTMENT.			DORMITORY.			ring	SPECIAL RÉMARKS.		
DATE OF RECORD	ROOM NO.	Scholarship	Conduct.	Shop.	Ability.	Conduct.	Room No.	Neatness	Conduct.	Ability.	Conduct	
July'09		_							We	serter		
•												
												3
				7								

Address Siletz, Oregon.

Information from

Date Oct. 1913 191

State

Name

Agency

Tribe

Age

POSITIONS FOR WHICH LISTED. SUITABILITY IN ORDER NAMED.

1.

2.

3.

4.

Remarks: Is wealthy and lives at home with his family.

" Y AND E" ROCH.

REPORT AFTER LEAVING CARLISLE

David

20 hr

441**03**7 3**M-**4-09

PRESENT NAME

NAME AT CARLISLE

	THESENT WANTE											
DATE	INFORMATION THROUGH	ADDRESS	OCCUPATION	ITEMS OF INTEREST	GRADE							
1910												
		•										
				/								
7. 4												