

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Davis Delaney DATE 3/21 1914

AGE 14 YEARS { NEW / RETURNED } STUDENT. TRIBE Chippewa STATE Minn.

DEGREE OF INDIAN BLOOD 1/4

INSPECTION Fair development

PALPATION normal

PERCUSSION normal

AUSCULTATION { RESONANCE Normal
RESP. MURMUR Normal

HEART SOUNDS Normal

MENSURATION { INSP. 33 RESPIRATION 22 PULSE 96
EXP. 29 1/2

TEMPERATURE 99 degs. HEIGHT 5' FT. 3 1/2 IN. WEIGHT 119 LBS.

VISION 10/10 VACCINATION good scar

FAMILY HISTORY:

| | Living. | Condition of Health. | Dead. | Cause of death. |
|------------|--------------|----------------------|----------|-----------------|
| FATHER | | | | |
| MOTHER | <u>yes</u> | <u>Fair</u> | | |
| BROTHERS { | <u>2</u> | <u>good</u> | <u>2</u> | <u>?</u> |
| SISTERS { | <u>2</u> | <u>good</u> | | |
| | <u>1 1/2</u> | <u>Good</u> | | |

PERSONAL HISTORY:

REMARKS:

HOSPITAL RECORD.....

EXAMINATION FOR OUTING:

DATES:

CONDITION:

5th Feb 21 - 1910

Good

461

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Davis, Delancey DATE Sept. 27, 1909AGE 14 YEARS { NEW STUDENT. } { RETURNED } TRIBE Chippewa STATE Miss.DEGREE OF INDIAN BLOOD 1/8INSPECTION Fair development.PALPATION Normal.PERCUSSION normal.AUSCULTATION { RESONANCE Normal.{ RESP. MURMUR normal.HEART SOUNDS normalMENSURATION { INSP. 22{ EXP. 28 1/2 RESPIRATION 22 PULSE 90TEMPERATURE 98.6 degs. HEIGHT 5 FT. 2 3/4 IN. WEIGHT 104 1/2 LBS.VISION 10/10 VACCINATION Goodscar 1903,

FAMILY HISTORY:

| | Living. | Condition of Health. | Dead. | Cause of death. |
|----------|---------|----------------------|-------|-----------------|
| FATHER | | | yes | nitro poisoning |
| MOTHER | yes | Fair | | |
| BROTHERS | 2 | Good | 2 | ? |
| SISTERS | 2 | Good | | |
| | 1 | 1/2 Sister - Good | | |

PERSONAL HISTORY:

Had diphtheria at 5-yr age
Good health since

REMARKS:

HOSPITAL RECORD

EXAMINATION FOR OUTING:

DATES:

CONDITION:

2290

CARLISLE INDIAN INDUSTRIAL SCHOOL
DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

| | | | | |
|--------------------------------|---------------------------------|---|-----------------------------|---------------------------|
| NUMBER 5063 4163 | ENGLISH NAME Rancey Davis | AGENCY White Earth | NATION Chippewa | |
| BAND | INDIAN NAME | HOME ADDRESS Oscar W. F. Davis 306 Hennepin Court, Minneapolis, Minn. | | |
| PARENTS LIVING OR DEAD D | FATHER Charlotte Maggrah | MOTHER 31 | BLOOD 32 | AGE 14 |
| | HEIGHT 5' 2 3/4" | WEIGHT 104 1/2 | FORCED INSP. 32 | FORCED EPXR. 28 1/2 |
| | SEX M | ARRIVED AT SCHOOL Sept. 26, 1909 | FOR WHAT PERIOD 5 years. | DATE DISCHARGED 3-8-12 |
| | | CAUSE OF DISCHARGE Failed to return | | |
| TO COUNTRY | PATRONS NAME AND ADDRESS | | FROM COUNTRY | |
| 4-6-'10 | Fred Miller, Centre Bridge, Pa. | | 9-15-10 | |
| 4-6-'11 | " " " " " | | 9-15-'11 | |
| 2-8-'12 | Home On Leave | | | |

THE SHAW-WALKER CO., MURKIN. '79104

Months in school before Carlisle, 96 mos.

Grade entered at Carlisle, 7th Gr.

Grade at date of Discharge,

Trade or Industry,

Church, Episcopal

Mother left tribe about 1905. Fath. died 1901.

Attended
 White Earth Sep. 01 to June 01 - 1st Gr.
 Lisbon, N. D. Pub. Sch. Sep. 01 to June 04 - 2nd Gr.
 Grafton N. D. Sep. 04 to June 07 - 6th Gr.
 Grinnell, Manitoba, Can. Sep. 07 - June 08 8th Gr.
 Sep. 8 to June 9. Finished 8th Gr. at
 Bagley, Minn.
 Miles to sch. 7

461

BRIEF.

Application of

Oscar D. F. Davis

FOR THE ENROLLMENT OF

Rolland D. Lancy Davis

IN THE INDIAN SCHOOL AT

Carlisle, Pennsylvania

POST OFFICE ADDRESS OF APPLICANT:

306 Hennepin Court - Minneapolis, Minn

Date of enrollment, _____, 190

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, Penna, of Roland DeSancy Davis, male, I, Oscar D. F. Davis (Name of child.) (Sex.) (Parent, guardian, or next of kin.) of Minneapolis P. O., State of Minn, do hereby voluntarily consent and agree to his enrollment in said school for a period of five (5) years, and also obligate and bind myself to abide by all the rules and regulations for Indian schools.

I further say that the said child was born at Pine Point on Sept 10-1895; that the father, Miles F. Davis was white Indian of the (Name of father.) (Is or was.) (Degree.) Tribe located at _____ Agency; that he left the tribe about died - Mar. 1901 (Approximate date.) that the mother, Mrs Charlotte Maggah, is a 3/16 Indian of the Chippewa (Name.) (Is or was.) (Degree.) Tribe located at White Earth Agency, and left the tribe about 1905; that (Approximate date.) 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>White Earth Ind. Sch.</u> | <u>White Earth</u> | <u>Sept '01</u> | <u>June '01</u> | <u>change of residence</u> | <u>1st</u> |
| <u>Sisbon, N. Dak. - public</u> | <u>Sisbon, N. Dak</u> | <u>Sept '03</u> | <u>June '04</u> | <u>"</u> | <u>3rd</u> |
| <u>Grafton, N. Dak. - "</u> | <u>Grafton, N. Dak</u> | <u>Sept '04</u> | <u>June '07</u> | <u>"</u> | <u>6th</u> |
| <u>Gibson, Manitoba, Canada -</u> | <u>Gibson, Man.</u> | <u>Sept '07</u> | <u>June '08</u> | <u>"</u> | <u>8th</u> |
| This <u>9th</u> day of <u>August</u> , 190 <u>9</u> from <u>Sept. '08 to June '09</u> attended <u>public school at Bagley finishing 8th grade Minn.</u> | | | | | |

Two witnesses:

Grace A. Warren.

Geo. C. Warren

Oscar D. F. Davis.
(Parent, guardian, or next of kin.)

P. O., 306 Hennepin Court - Minneapolis

(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, Oscar D. F. Davis, do hereby swear that the statements made in the above application are true.

Oscar D. F. Davis
(Signature of applicant.) (Parent, guardian, or next of kin.)

Sworn to and subscribed before me this 10th day of August, 1909

Geo. S. Langford

(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, Hennepin County, Minn.

My commission expires Mar. 28, 1915



Certificate of Physician.

I, Polk Richards, a practicing physician of White Earth Minn., do hereby certify that I have carefully examined Roland De Lancy Davis 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 17 day of aug., 1909 Polk Richards, M. D. Agency Physician

Vouchers of Disinterested Persons.

VOUCHER NO. 1.

I, John Leecy, a Genl. Store Keeper, of White Earth Minn. (Business, calling, or profession.) do hereby certify that I am personally acquainted with

Oscar De Forest Davis who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with Roland De Lancy Davis; that (Name of Child.)

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

he lives 5 miles from any school

This 17th day of aug., 1909 John Leecy.

VOUCHER NO. 2.

I, Stella Rank, a matron of White Earth Minn. (Business, calling, or profession.) do hereby certify that I am personally acquainted with

Oscar De Forest Davis, who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with Roland De Lancy Davis; that (Name of child.)

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 he is

too far advanced for reservation school.

This 17 day of August, 1909 Stella Rank

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 _____, 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 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.

Record of Graduates and Returned Students,

U. S. INDIAN SCHOOL, CARLISLE, PA.

2290

Aug. 4, 1912

191.....

NAME

Delancey R. Davis

1. Are you married and if so to whom?

no

2. What is your present address?

White Earth, Minn.

3. Did you attend or graduate from any other schools after leaving Carlisle? Give names of schools and dates if possible

yes

Keewatin Academy at
Ocean Springs Miss. Jan. 24, 1912
entered left June 18, 1912 may
reenter in September.

4. What is your present occupation?

Working in a saw mill.

5. Tell something of your present home.

Our home belongs to
my brother Vernon who attended
Conway Hall in 1911 it is a large building of brick

6. What property in the way of land, stock, buildings, or money do you have?

I have
120 acres of good prairie land not
under cultivation.

7. Have you been in the Indian Service? In what positions? How long in each?

no.

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

.....

.....

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

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

Department of the Interior.

Mr. M. FriedmanSupt. U. S. Indian SchoolCarlislePennsylvania

6-3305

9-2290

Dec 23rd, 1918

Name R. de Lancey Davis
(Please give name by which enrolled and also present or married name.)

Tribe Chippewa

Present Address Brandon Man-Cau

Former Address White Earth
(Address from which we heard from you last.)

Present Occupation Attending College School
at Brandon Man-Cau

Remarks: taking Academic Course - still
have one year to complete course

PUPIL'S HEALTH REPORT.

This blank is issued so that the school authorities may keep in touch with the health of the pupil. The patron is requested to fill this blank out on the first of MAY, JULY, SEPTEMBER, NOVEMBER, JANUARY, and MARCH, and send it to the school with the outing report for the month.

Patron's name and address *Fred J. Miller, Center Bridge, Pa*

Pupil's name *Melba Davis*

General health of the pupil *Good*

Has pupil been ill the past two months? *No*

Name of disease.....

Name and address of the physician in attendance.....

Does the pupil have a cough? *No*

For how long has he had it?.....

Give the pupil's weight *133 $\frac{3}{4}$ lbs.*

Has the pupil any trouble with the eyes? *No*

Are the eyelids inflamed? *No*

Remarks:.....

REPORT OF Solaney Davis pupil of Carlisle Indian
 School, who went 7/6/1911 to live with Fred J. Miller
(Date) (Patron)
 of Centre Bridge,
(Post Office) (County)
Pa, Hackett N. J. Railroad Station
(State)

Conduct Excellent
 Health Good
 Ability Very Good
 Cleanliness " "
 Economy " "
 Situation of Room Upper floor
 Condition of Room Excellent
 Condition of Clothing Fair
 Wages 4.50 per month
 Are careful accounts kept by patron? Yes
 Are careful accounts kept by pupil? Yes
 Number of days at school _____
 Distance to school _____
 Grade or quality of school _____
 Name and address of teacher _____
 Qualifications of teacher _____
 In what grade was pupil at Carlisle? 12th
 In what grade is pupil at present? 12th
 Attends what church and Sunday school? Episcopal
 Distance to church 12 miles
 Is there a Catholic church in locality? _____

 Who compose patron's family? yes at home
Mother and two grown daughters
 What other help is employed? One hired man and cook
 Locality of home On an island near New Hope
 Home life and environments Excellent
 Trade at school Printing
 Nature of work Chores about house and lawn
 Pupil's age 15 Experience Two years

Grade of home No 1.

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

Delaney has an excellent home and he is well liked. Mr. Miller works in my City and does not get home often. The wife and daughters live on this island some during the summer and keep Delaney to two chares. Conditions are excellent.

June 1st, 1911

D. V. Dickey
Agent.

2290

Oct. 17, 1912.

Mr. Delancy Davis,
White Earth,
Minnesota.

Dear Friend:

By some error Mr. Fred Miller with whom you lived at one time made out a check to you instead of to Henry Giard to whom the money was due. Henry Giard lived with Mr. Miller this summer. In order to rectify this mistake ^{that} so the money may be placed to Henry Giard's credit, please sign the inclosed check No. 18498 and return promptly to me in the inclosed envelope.

I will be pleased to hear from you as to how you are getting along. Do you receive the Arrow and the Red Man? If so you are able in a measure to keep in touch with the affairs of Old Carlisle. My best wishes are with you for your success.

Your friend,

LMJ.

Superintendent.

Carlisle Indian School Hospital.

Name

Delaney Davis

Age *15*

Sec. *M.*

Diagnosis

Appendicitis

Admitted

Discharged

Feb. 16 - 1911

Days in Infirmary

Result

W. C. Honey
Resident Physician.

(OVER)

DIET.

TREATMENT.

*Ice cap applied
to right side.*

| Date | Hr. | P. | R. | T. |
|---------------|-------------|----|----|------------------------|
| <i>Feb 16</i> | <i>4:00</i> | | | <i>98</i> |
| <i>Feb 17</i> | <i>7:00</i> | | | <i>98</i> |
| <i>Feb 18</i> | <i>7:00</i> | | | <i>98</i> |
| <i>Feb 11</i> | <i>7:00</i> | | | <i>100^o</i> |
| <i>Feb 15</i> | <i>4:00</i> | | | <i>108.</i> |
| <i>Feb 11</i> | <i>7:00</i> | | | <i>109^o</i> |
| <i>Feb 17</i> | <i>4:00</i> | | | <i>108</i> |
| <i>Feb 13</i> | <i>7:00</i> | | | <i>110^o</i> |

Full Glass.

NO. 461

United States Indian School Hospital,
Carlisle, Pennsylvania.

YEAR 1911

TRIBE

FULL. ONE

NAME Delaney Davis

AGE

DIAGNOSIS Tonsillitis

ADMITTED Dec. 7

DISCHARGED Dec. 11.

RESULT Cured

VISITING PHYSICIAN:

RESIDENT PHYSICIAN:

A. Kallen

Chas. E. Treddy

REMARKS:

Patient Delancy Davis Carlisle, Pa., December 11 1911 Physician Dr. Treibely
 Address Indian School. Nurse Merceline Holstein

| H. | T. | P. | R. | H. | Medicine | H. | Nourishment | H. | Remarks |
|-----------------|----|----|----|-------|----------------------------|-------|--------------------------|-------|----------------|
| 4:00 | 99 | 60 | | 4:00 | Tonsillitis Tablet | 5:30 | tea II $\frac{3}{4}$ ii | | |
| | | | | 5:00 | " " | 9:00 | Egg nog. | | |
| | | | | 6:00 | " " | | | | |
| | | | | 7:00 | " " | | | | |
| | | | | 8:00 | " " | | | | |
| | | | | 9:00 | " " | | | | |
| Dec. 10 - 1911. | | | | | | | | | |
| 8:00 | 99 | 60 | 18 | 8:00 | Tonsillitis Tablet | 7:00 | coffee $\frac{3}{4}$ VII | | |
| 4:00 | 99 | 64 | 30 | 8:30 | Mag sulph $\frac{3}{4}$ ii | 12:00 | milk $\frac{3}{4}$ VII | 8:30 | Painted throat |
| | | | | 10:00 | Tonsillitis Tablet | 12:00 | Ice cream | | with T. I. |
| | | | | 11:00 | " " | | | 10:00 | would not take |
| | | | | 12:00 | " " | | | | nourishment. |
| | | | | 1:00 | " " | | | 12:00 | Painted throat |
| | | | | 2:00 | " " | | | | with T. I. |
| | | | | 3:00 | " " | | | 4:00 | " " " |
| | | | | 4:00 | " " | | | | |
| | | | | 5:00 | " " | | | | |
| | | | | 6:00 | " " | | | | |
| | | | | 7:00 | " " | | | | |

Patient Delaney Davis Carlisle, Pa., December 8 1911 Physician Dr. Treibly
 Address Indian School Nurse Mercedine Holstein

| H. | T. | P. | R. | H. | Medicine | H. | Nourishment | H. | Remarks | |
|------|-----------------|-----|----|------------------|---------------------|-------|-------------------------|----|-----------------------------------|--|
| 4:00 | 101 | 100 | | 3:00 | Tonsillitis Tab. | 3:00 | milk $\frac{3}{4}$ VII | | | |
| | | | | 4:00 | " " | 5:30 | " " " | | | |
| | | | | 5:00 | " " | 9:00 | " " " | | | |
| | | | | 6:00 | " " | | | | | |
| | | | | 7:00 | " " | | | | | |
| | | | | 8:00 | " " | | | | | |
| | | | | December 9, 1911 | | | | | | |
| 8:00 | 98 ² | 60 | | 8:00 | Tonsillitis Tablet. | | | | | |
| | | | | 9:00 | " " | 7:00 | milk VII $\frac{3}{4}$ | | Patient does not sleep very well. | |
| | | | | 10:00 | " " | | coffee VI $\frac{3}{4}$ | | | |
| | | | | 11:00 | " " | 10:00 | milk VI $\frac{3}{4}$ | | | |
| | | | | 12:00 | " " | 3:00 | Egg nog. | | | |
| | | | | 1:00 | " " | | | | | |
| | | | | 2:00 | " " | | | | | |
| | | | | 3:00 | " " | | | | | |

Patient Delaney Davis Carlisle, Pa., Dec 7, 1917 Physician Dr. Tribley
 Address Indian School Nurse Marceline Holstein

| H. | T. | P. | R. | H. | Medicine | H. | Nourishment | H. | Remarks | | |
|------|------------------|-----|----|------------------|------------------------------|-------|--------------------------|----|----------------|--|--|
| 1:30 | 102 | 110 | | 1:30 | Tonsillitis Tablet | 3:00 | milk $\frac{3}{4}$ VII | | | | |
| 4:00 | 102 ⁴ | 104 | | 1:30 | mag. sulph. $\frac{3}{4}$ II | 5:45 | " " " | | | | |
| | | | | 2:30 | Tonsillitis Tablet | | | | | | |
| | | | | 3:30 | " " | | | | | | |
| | | | | 4:30 | " " | | | | Had a restless | | |
| | | | | 5:30 | " " | | | | night. | | |
| | | | | 6:00 | " " | | | | | | |
| | | | | 7:00 | " " | | | | | | |
| | | | | 8:00 | " " | | | | | | |
| | | | | 9:00 | " " | | | | | | |
| | | | | December 8, 1911 | | | | | | | |
| 8:00 | 100 | 96 | | 8:00 | Tonsillitis Tab. | 7:00 | coffee $\frac{3}{4}$ VII | | | | |
| | | | | 9:00 | " " | 12:00 | soup and milk | | | | |
| | | | | 10:00 | " " | | | | | | |
| | | | | 11:00 | " " | | | | | | |
| | | | | 12:00 | " " | | | | | | |
| | | | | 1:00 | " " | | | | | | |
| | | | | 2:00 | " " | | | | | | |

NAME.

TRIBE.

PARENT OR GUARDIAN.

De Lancey Davis

Chippewa

DATE ENROLLED.

TERM.

AGE.

HOME ADDRESS

Sept. 26, 1909

5 Years

14

Oscar De F. Davis,
306 Hennepin Court, Minneapolis

DATE OF RECORD

ACADEMIC DEPARTMENT.

INDUSTRIAL DEPARTMENT.

DORMITORY.

OUTING

SPECIAL REMARKS.

ROOM
NO.

Scholarship

Conduct.

Shop.

Ability.

Conduct.

Room
No.

Neatness

Conduct.

Ability.

Conduct

Jan. '10

11

V.G.

V.G.

Print Good V.G.

10

V.G.

V.G.

July '10

11

G

V.G.

"

"

Good

"

"

"

good

Good

Jan. '11

11

Ex

Ex

"

"

Good

"

"

"

July '11

12

V.G.

Ex.

Dec. '11

1

Flo. V.G. V.G.
Print " "

"

V.G.

V.G.

Miss

TRADE RECORD, CARLISLE.

Jan. 1, 1910 to June 30, 1910.

PUPIL *W. Blaukey Davis*

TRADE *Printing*

ABILITY *New boy - Est. Nov. 1-09-*

CONDUCT *Excellent -*

REMARKS *Finer, milking worker -*

INSTRUCTOR *E. H. Miller*

TRADE RECORD, CARLISLE.

PUPIL *Blancy Davis*

TRADE *Florist and Gardener*

ABILITY *very good*

CONDUCT *very good*

REMARKS *would like to have kept him*

INSTRUCTOR *Frank J. Keith*

TRADE RECORD, CARLISLE.

PUPIL *Walter Davis*

TRADE *Printing*

ABILITY *Extra good.*

CONDUCT *Splendid in shop.*

REMARKS *A coming good workman.*

INSTRUCTOR *E. H. Mills.*

Davis, DeLancey R.

2290

Brother - U. De Forrest Davis

2167

The Keewatin Academy,

6835