CARLISLE INDIAN INDUSTRIAL SCHOOL.

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT.

NUMBER

ENGLISH NAME

6/5 Magail Cadotte Gadotte Chippena

HOME RODRESS

Chamilic Cadotte, Odanah Mas

PARENTS LIVING OR DEAD

CAUSE OF DISCHARGE

PARENTS LIVING OR DEAD

CAUSE OF DISCHARGE

FROM COUNTRY

PARENTS LIVING OR DEAD

PARENTS LIVING OR DEAD

PARENTS LIVING OR DEAD

PARENTS LIVING OR DEAD

CAUSE OF DISCHARGE

FROM COUNTRY

PARENTS LIVING OR DEAD

PARENTS LIVING OR DE

SHAW-WALKER MUSKEGON

Months in school before Carlisle, 30

Jrade entered at Carlisle, 4/2

Grade at date of Discharge, 9

Trade or Industry, 4/2

Church, 6 athrolic, 6

Conduct 6

5-192 a.

23/3

BRIEF.

APPLICATION OF
A
margant badoke Benesa
FOR THE ENROLLMENT OF
1 +10 ()
Charlone Cadotte
Charlottel Demesoy
IN THE INDIAN SCHOOL AT
Carcale Pa
NAME OF AGENCY FROM WHICH PUPIL CAME:
Date of enrollment,, 190
Date of enrollment,, 190
Term of enrollment, Thu () years.
Term of enrollment,
NAME OF COLLECTING AGENT:
Position
Position,

APPLICATION FOR ENROLLMENT IN A NONRESERVATION SCHOOL.

(For a child enrolled at an Agency.)

of Charles (Name of child.)	Benus	ey; 7 (8	; date	of birth Qu	g 7, 1897.
Chiffine.		<i>J.</i>		C	/
NAME OF FATHER. (Both Indian and English.)	Living or Dead.	TRIBE	Ē.	BAND.	DEGREE OF INDIAN BLOOD.
Cado M. Bene	Jenny	Chiffen	ra Ba	derin	
NAME OF MOTHER.	y) "	1	,	7,	
enrollment in said school for all the rules and regulations The said child has been e	a period of for Indian s	chools.		also obligate	e myself to abide by
enrollment in said school for all the rules and regulations	a period of for Indian s	chools.		also obligate	e myself to abide by
enrollment in said school for all the rules and regulations The said child has been e	a period of for Indian senrolled in the	chools.	schools:		
enrollment in said school for all the rules and regulations The said child has been and result of school.	a period of for Indian senrolled in the Date of Engollment.	chools. he following s DATE OF DISCHARGE.	schools:	Hend	GRADE.
enrollment in said school for all the rules and regulations The said child has been and result of school. La Paris Public	a period of for Indian senrolled in the Date of Enrollment.	chools. he following s DATE OF DISCHARGE.	schools:	Hend	GRADE.
enrollment in said school for all the rules and regulations The said child has been entered to see the school. La Parish Public Hools to self to see the sel	a period of for Indian senrolled in the Date of Enrollment.	chools. he following s DATE OF DISCHARGE.	Schools: CAUSE. Seft to a School Valored Somas. Decom	Hend Soffeld, Hack	GRADE. Fourth Leventh
enrollment in said school for all the rules and regulations The said child has been and regulations NAME OF SCHOOL. La Pourie Public Holy Formic Subject Subject Worffield 3.	a period of for Indian senrolled in the Date of Enrollment.	chools. he following s DATE OF DISCHARGE. 1907 1910	Schools: CAUSE. Seft to a Achool Va Mondal Jacons (Parent, guar	Hend Soffeld, Hack	GRADE.
enrollment in said school for all the rules and regulations The said child has been and regulations NAME OF SCHOOL. La Pourie Public Holy Formic Subject Subject Worffield 3.	a period of for Indian senrolled in the Date of Enrollment.	chools. he following s DATE OF DISCHARGE.	Schools: CAUSE. Seft to a Achool Va Moreol Va Jacon (Parent, guar S: Jacon	Hend Soffeld, Hack	GRADE. Fourth Seventh

PHYSICIAN'S CERTIFICATE.

I hereby certify that I have this day carefully examined the above-named child herein proposed for transfer and find herein proper physical condition to attend school, and not afflicted with tuberculosis or any disease which would be a menace to the health of other pupils.

This /7 day of Jan , 1964

The Physician at Ref Off Agency.

CERTIFICATE OF AGENT OR BONDED SUPERINTENDENT.

I hereby certify that the statements made in the foregoing application and certificate, to the best of my knowledge and belief, are true; that the consent of head to the Bennessy was voluntary, and I recommend the transfer of the said child.

Agent of Superintendent

CERTIFICATE OF SCHOOL PHYSICIAN.

I hereby certify that on	, I made a careful exami-
nation of the physical condition of	
the foregoing application, and found to be	
I therefore recommend that the said child be er	nrolled in this school.
This, 190	
	School Physician.

SPECIAL NOTE.

This form must be executed in duplicate when a child is transferred from a reservation to a nonreservation school. The Superintendent of the nonreservation school will retain the original for his files, and the duplicate shall be deposited in the Agency records. The agent will then send to the Commissioner of Indian Affairs his certificate as provided by law. All the blanks must be properly filled in every case.

If the information called for on any part of the blank is not known, that fact should be stated. No space should be left unfilled. Whether the parents are living or dead, their names must be given.

The person who signs the blank as consenting to the transfer should indicate his relation to the applicant by marking out the word "parent," "guardian," or "next of kin," leaving unmarked only the title appropriate to the signer.

INDORSEMENTS.

The laws relating to the transfer of Indian children from reservations and schools are as follows:

That hereafter no Indian child shall be sent from any Indian reservation to a school beyond the State or Territory in which said reservation is situated without the voluntary consent of the father or mother of such child if either of them are living, and if neither of them are living without the voluntary consent of the next of kin of such child. Such consent shall be made before the agent of the reservation, and he shall send to the Commissioner of Indian Affairs his certificate that such consent has been voluntarily given before such child shall be removed from such reservation. And it shall be unlawful for any Indian agent or other employee of the Government to induce, or seek to induce, by withholding rations or by other improper means, the parents or next of kin of any Indian to consent to the removal of any Indian child beyond the limits of any reservation. (28 Stats., p. 906.)

Provided, That hereafter no Indian child shall be taken from any school in any State or Territory to a school in any other State against its will or without the written consent of its parents. (29 Stats.,

p. 348.)

The rules provide that-

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.

An Indian boy or girl 18 years old and over may, without the consent of parents or others, personally sign the application form on its being changed to suit the case; but in all cases where the parents are living they should first be consulted.

This form is to be used only in transfers from reservations or Indian schools to nonreservation schools.

NAME Clear	latte (8) Empland		S. Maio
NAME	70070a VV	1		Sex Female.
Tribe $\left\{ \begin{array}{c} Full \\ 1 \end{array} \right\}$		State Wise		Jun 17 , 19/5
Age/	6 ye	ars Respiration	Con	adition of, Eyes
Height 5	ft. 3 1	ns. Mensuration Insp. 35	ź	Ears no
Weight 12	0	7 0		Throat
Temperature	omal	Vaccination		Cervical glands
Pulse 79		Vision good		Skin see
Inspection	omed	· · · · · · · · · · · · · · · · · · ·		
Palpation	med			
Percussion	mud			
Auscultation_22	omed	<i></i>		
Heart 15	mel			
(Menstruation)	regio	lar		
		FAMILY HISTORY		
	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	Jus	and		
Mother	MID	mand		
Mother	31	200		
Brothers 4	900	and good		
. (all a	all a		
Sisters 4	harry	and good		
-		0		
Personal history	no s	sickee es		
	/	.01		
Present condition	real	The state of the s		
		7/	7/	
		Hane	y/las	

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.

CASE RECORD, 5-3	354	
------------------	-----	--

, NOL REGORD, 0 - 304.	Λ	Vame	
Age	Sex { Male. Female.	Tribe ${Full \choose I/}$	Residence
On .1	0)		

ATE.			SYMPTOMS.	TREATMENT.	DIAGNOSIS.	REMARKS.		
9	T.	P.	R.			History, progress, and termination of the disease.		
						- 6		

23/3

Record of Graduates and Returned Students.

U. S INDIAN SCHOOL, CARLISLE, PA.

January 8 1916.
NAME Margaret Cadotte Goslin
1. Are you married and if so to whom? Yes, William Paul Yoslin
1. Are you married and if so to whom? Yes, William Paul Yoslin married Sept + 4. 1908 my husband is a Tailor by tra
2. What is your present address? Mrs Um. Loolin Usanah Wis By
3. Did you attend or graduate from any other schools after leaving Carlisle? Cive names of
schools and dates if possible
*
4. What is your present occupation? House- Keeping + House drus - making.
5. Tell something of your present home It is studed one mile
from known us a country home fours rooms
barn shelp und chieben coop, and y room house into
6. What property in the way of land, stock, buildings or money do you have? 90 acres of land
I dwelling houses one Tailor shop 3 heads of Cattle, one horse and outfit, I day, chickens!
7. Have you been in the Indian Service? In what positions? How long in each?

8. What other positions have you held since leaving Carlisle? It and a dress-making shop in town as chief with in Island View Hotel at Bayfield Wisconsin and now and doing sewing at home.

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

Dear Sir. There are many dings of interest of could tell you of muself since leaving thus wonderful rehvol of carlisle. Yes many a time of could hick mupels all mer, if I could only go back to selver again. I am undeed proud to mention the word Carliste, omong others who praise other schools, I am proud also to say though not a graduate of Carlisle, but as a student: I shall be very grateful for your forms' in the post as in the future, Respectfully of ann. ms, vom, Goslin Idanah - Vis.

Your old chamber maid

23/3 CARLISLE INDIAN INDUSTRIAL SCHOOL

00	11-	DI	ESCRIPTIVE AND	D HISTO	RICAL I	RECORD OF ST	UDENT			_	
NUMBER	ENGLISH NAME	ENGLISH NAME				AGENCY					
1615	Maggie (Maggie Cadotte				La Pointe Chippewa					
BAND	INDIAN NAME				IE ADDRESS						
0danah					Jharl	es vadotte	e, Odanah	, Wis.			
PARENTS LIVING OR DEAD FATHER	MOTHER	BLOOD	AGE	HEIGHT	HEIGHT WEIGHT FORCED INSP. FORCED E				CP.	SEX.	
Living	Living	12	16	5-1	拉	105	31	28		B.	
4	1-06	FOR WHAT PERIO	2 year	rs	DATE O	F DISCHARGE		CAUSE OF DISCHAR	GE		
Dec. 23,		5 yea	rs		J	une 30, 19	907	Time			
MONTHS IN SCHOOL BEFORE	CARLISLE GRA	ADE ENTERED	GRADE AT DATE OF	DISCHARGE	TRADE	OR INDUSTRY	CHURCH		3	MILES TO SCHOOL	
30		4th	9th		Sewi	ng & Laund	dry cath	nolic			
TO COUNTRY			P	PATRONS' NA	ME AND AD	DRESS			FRO	M COUNTRY	
4- 4-01	Mary	r. Raley	, Beverly,	Burli	ingto:	n vo., N.	J.		9-1	13-01	
11- 6-01	carri	ie Sipple	s. Mooresto	own, 1	N. J.				9-1	9-14-02	
10-11-02	0. 0.	. Weaner,	Gettysburg	g, Pa	, Pa.					9-14-03	
4- 5-04	Mrs.	J. W. Pa	rker, Bever	rly, 1	·ly, N. J.					16-04	
5- 6-05	Mrs.	U. W. St	ager, 2105	Venengo St., Ocean City, N. J.					9-	2-05	
6-14-06	Mrs.	H. B. Wi	le, 210 4th	h Ave.	., As	bury Park,	N. J.		9-	5-06	
										-	
									31-10- 1)1-11-1-1-1		
		_									

REPORT AFTER LEAVING CARLISLE 'Y AND E'' ROCH. 23/3 Maggie Cadolle.

E Mrs. Worn Goslin 563757 3M-2-II NAME AT CARLISLE PRESENT NAME INFORMATION ADDRESS OCCUPATION 1910 Teef Odanah, Mis. Housewife DATE ITEMS OF INTEREST GRADE