

Madison, Geo.

2638

Brother - Wm. Madison

6887

Carlisle

NAME George Madison Sex { Male. Female. }
Tribe { ~~Fort~~ } Chippewa State Minnesota Aug 25, 1911

Age 16 years Respiration normal Condition of, Eyes Trachoma

Height 5 ft. 7 ins. Mensuration { Insp. 33 1/2 Ears normal

Weight _____ lbs. { Exp. 31 Throat _____

Temperature normal Vaccination yes Cervical glands Slight Enlargement

Pulse _____ Vision Good Skin _____

Inspection negative

Palpation normal

Percussion _____

Auscultation _____

Heart normal

(Menstruation) _____

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	/	<u>Good</u>		
Mother	/	"		
Brothers	/	"		
Sisters	/	"	/	<u>Unknown</u>

Personal history meals

Present condition Good.

James W. Abbott, M. D.

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. The reverse side is intended as a card-index case-record for use by all Service physicians. 6-1955

CARLISLE INDIAN INDUSTRIAL SCHOOL
 DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

2638

NUMBER <i>4546</i> <i>6346</i>		ENGLISH NAME <i>George Madison</i>			AGENCY <i>White Earth</i>			NATION <i>Chippewa</i>		
BAND <i>Mississippi</i>		INDIAN NAME			HOME ADDRESS <i>James Madison Beaulieu, Minn.</i>					
PARENTS LIVING OR DEAD		BLOOD <i>Full</i>	AGE <i>17</i>	HEIGHT <i>5-8 3/4</i>	WEIGHT	FORCED INSP. <i>34 1/2</i>	FORCED EPXR. <i>31</i>	SEX. <i>M</i>		
FATHER, <i>L</i>		MOTHER, <i>L</i>		ARRIVED AT SCHOOL <i>Sep. 8, 11</i>		FOR WHAT PERIOD <i>Three years</i>		DATE DISCHARGED <i>3-7-12.</i>		CAUSE OF DISCHARGE <i>Failed to return</i>
TO COUNTRY <i>1-29-12</i>		PATRONS NAME AND ADDRESS <i>Home on leave.</i>						FROM COUNTRY		

THE SHAW-WALKER CO., MUSKEGON. 79104

Months in school before Carlisle, *8 1/2*

Grade entered *7*

Grade at date of discharge,

Trade or Industry,

Church,

193

5-192 a

APPLICATION OF

James Madison

FOR THE ENROLLMENT OF

George Madison

IN THE INDIAN SCHOOL AT

Carlisle, Penna.

NAME OF AGENCY FROM WHICH PUPIL CAME:

White Earth Agency, Minn.

Date of enrollment, **Aug. 25, 1911.**, 191

Term of enrollment, **three** (**3**) years.

NAME OF COLLECTING AGENT:

Position, _____

APPLICATION FOR ENROLLMENT IN A NONRESERVATION SCHOOL.

(For a child enrolled at an Agency.)

For and in consideration of the Government of the United States assuming the care, education, and maintenance in the United States Indian School at _____

Carlisle, Penna.

of **George Madison**, **Male**; date of birth **Sep. 1894**;
(Name of child.) (Sex.)


Chippewa
(Tribe.)

NAME OF FATHER. (Both Indian and English.)	LIVING OR DEAD.	TRIBE.	BAND.	DEGREE OF INDIAN BLOOD.
James Madison	living	Chippewa	Mississippi	4/4
Ah-en-dub				
NAME OF MOTHER.				
Cornelia Madison	living	"	"	4/4
Wa-bun-on-o-quay				

I, **James Madison**, do hereby voluntarily consent and agree to **his**
(Parent, guardian, or next of kin.)
 enrollment in said school for a period of **three** years, and also obligate myself to abide by
(Not less than 3.)
 all the rules and regulations for Indian schools.

The said child has been enrolled in the following schools:

	NAME OF SCHOOL.	DATE OF ENROLLMENT.	DATE OF DISCHARGE.	CAUSE.	GRADE.
1.	Wild Rice River Bgd.	Sep. 1901,	June, 1909	Close of school	4th
2.	" " "	" " 1910,	Mar. 1911	transferred to	
3.				public school	5th
4.					his

James Madison
(Parent, guardian, or next of kin.)

mark.

P. O. address: **Beaulieu, Minn.**

Two witnesses:

L. A. Perry
Rev. William W. Smith

GOVERNMENT PHYSICIAN'S CERTIFICATE.

Fot. Trachman

I hereby certify that I have this day carefully examined the above-named child herein proposed for transfer and find *him* to be in 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 *25* day of *Aug.*, 191*1*

Wm. W. O'Keefe

Physician at *White Earth Minn Agency*

RESERVATION BONDED SUPERINTENDENT'S CERTIFICATE.

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 _____ was voluntary, and I recommend the transfer of the said child. The economic conditions of this pupil's home are (here state facts which will enable the Superintendent of the nonreservation school to give the pupil such instruction and training as may best prepare him to meet these conditions, if he is to return to them):

James Madison
(Parent, guardian, or next of kin.)

This *28th* day of *Aug.*, 191*1*

W. G. West
Actg

Superintendent.

NONRESERVATION SCHOOL PHYSICIAN'S CERTIFICATE.

I hereby certify that on _____, I made a careful examination of the physical condition of _____, the child named in the foregoing application, and found _____ to be _____

(As soon after arrival as possible.)

I therefore recommend that the said child be _____ enrolled in this school.

This _____ day of _____, 191

Nonreservation 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 shall be furnished with the original of this form for his files, and the duplicate shall be deposited in the office of the superintendent in charge of the reservation. The Reservation Superintendent 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.)

That no Indian pupil under the age of fourteen years shall be transported at Government expense to any Indian school beyond the limits of the State or Territory in which the parents of such child reside or of the adjoining State or Territory. (35 Stat. L., 781.)

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.

2638

July 16th, 1914.

Mr. George Madison,
Beaulieu, Minnesota.

My dear Friend:

This is to acknowledge receipt of your letter of July the 13th and to advise you that I shall not object to your going to the Haskell Institute, even though you were in attendance here less than one year of your period of enrolment.

Hoping that I can be of farther service to you,
I remain,

Very truly yours,

HEM.

Supervisor in Charge.

Copy to Superintendent Howard.

Searcher Minn

July 13, 1914

Article Lud Seb
isle, Penn.

1911. I enrolled for
and attended until
Jan, 1912, when on acct
of fathers death I returned
home. Since that time my
mother has needed with her.
Now if I can get a transfer
to Haskell I believe I
could be spared.

My brother lives at
Kansas City and so I
would be near home to
attend there. I will be
grateful to you if you will
grant me the transfer
Very Sincerely
George Madison
Beulah Minn

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REPORT AFTER LEAVING CARLISLE

2638

NAME AT CARLISLE

George Madison

PRESENT NAME

DATE	INFORMATION THROUGH	ADDRESS	OCCUPATION	ITEMS OF INTEREST	GRADE
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1911

192

NAME George Madison Sex Male. Female.

Tribe ^{Full} Chippewa State Maine Sept 11, 1911

Age 5 years Respiration _____ Condition of Eyes Trachoma

Height 5 ft. 8 3/4 ins. Mensuration { Insp. 34 1/2 Ears OK

Weight _____ lbs. { Exp. 31 Throat OK

Temperature 98 Vaccination Sept 11-11 Cervical glands OK

Pulse 76 Vision _____ Skin OK

Inspection OK.

Palpation OK.

Percussion Slight impairment of note at both apices.

Auscultation Expiration prolonged at both apices more marked on R. side.

Heart OK. no murmurs

(Menstruation) _____

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	Yes	well		
Mother	Yes	Not well		
Brothers	1	well		
Sisters	1	u	1	?

Personal history Measles

Present condition Fair.

Elmer Hise, M. D.

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.

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