

2793

DEPARTMENT OF THE INTERIOR
UNITED STATES INDIAN SERVICE

Blackfeet Agency,
Browning, Montana,

September 19, 1917.

Mr. John Francis, Jr.,
Supt. Carlisle Indian School,
Carlisle, Pa.

Dear Sir:

In compliance with your request contained in letter of August 24th, I have secured signature of John Flattail on check for \$10.00 in favor of C. V. Peel and am returning same herewith.

Very truly yours,

Thomas Fanni
Superintendent.

HOP

*Received above check,
C. V. Peel
9-24-17*

DEPARTMENT OF THE INTERIOR,
U. S. INDIAN SERVICE.
Form approved by the Comptroller of the Treasury
February 1, 1908.

SUBVOUCHER FOR TRAVELING EXPENSES,
WHEN PAID IN CASH.

No. _____

United States,

2793

To John Flattail,

July 19, 1917., 19

Carlisle, Pa., Dr.

For cash advanced for incidental expenses
enroute from Carlisle to Browning, Montana,
(Amount to be refunded)

DOLLARS.	CTS.
10.	00

Received at Carlisle, Pa., on this 19th day of July, 19 17, of John Francis, Jr., Supt., in cash, Ten and no/100 - - - - Dollars, in full payment of above account, which I certify to be correct.

Witness to signature by mark:

(Not to be signed in duplicate.)

Pl. 9-24
John Flattail

DEPARTMENT OF THE INTERIOR,
U. S. INDIAN SERVICE.
Form approved by the Comptroller of the Treasury
February 1, 1908.

SUBVOUCHER FOR TRAVELING EXPENSES,

WHEN PAID BY DISBURSING OFFICER'S
OFFICIAL CHECK.

No. _____

United States,

To _____, 19

For _____, Dr.

DOLLARS.

CTS.

I CERTIFY that the above account is correct and just, and that payment therefor has not been received.

(Not to be signed in duplicate.)

Claimant.

Paid by check No. _____, dated _____, 19 _____, for \$ _____

on _____, to order of claimant.

DEPARTMENT OF THE INTERIOR
UNITED STATES INDIAN SCHOOL
CARLISLE, PA.

TELEGRAM

Browning, Mont.,

July 16, 1917

M

690

Sent to

Francis, Supt.,
Carlisle, Pa.

Flattail requests return of son to Browning.

Ferris.

Paid,
Nite rate.

OFFICIAL BUSINESS

GOVERNMENT { DAY
NIGHT } RATE—PAID

Charge.....

By Western union.....
(Name of Telegraph Company.)

JOHN FRANCIS JR.
SUPERINTENDENT



DEPARTMENT OF THE INTERIOR
UNITED STATES INDIAN SCHOOL
CARLISLE, PA.

690

August 24, 1917.

Thomas Ferris, Supt.,
Blackfeet Indian Agency,
Browning, Mont.

Dear Sir:

The enclosed check in favor of
C. V. Peel for \$10 from John Flattail's
account, has not been properly signed.

Will you please have John sign
his name on the face of the check where
I have made the pencil cross, and return
the check to me in the envelope enclosed.

Very truly yours,

D:R

Superintendent.



John Flattail
Superintendent.
*Enclosed - copies for
delay*



DEPARTMENT OF THE INTERIOR
UNITED STATES INDIAN SCHOOL
CARLISLE, PA.

July 23, 1917.

Thomas Ferris, Supt.,
Blackfeet Indian Agency,
Browning, Mont.

Dear Sir:

I am enclosing herewith two checks,
one payable to C. V. Peel for \$10, which is
the amount advanced for John Flattail when
he left here last week.

Will you please have John sign this
check and return it to me at your earliest
convenience.

The other check also for \$10 is made
payable to John and is the balance of wages
due him. This check he can retain.

Very truly yours,

John S. ...
Superintendent.

*Enclosed - sorry for
delay.*



TO OFFICER SENDING TELEGRAM.

1. Keep copy on this form for your files.
2. Mail confirmation to addressee indicating that purpose by check mark in this circle.
3. Mail copy to your Supervising Field Office, if any.

MEMORANDUM COPY
OF OFFICIAL TELEGRAM

Will NOT be accepted if presented by Telegraph Company attached to bill for tolls, in lieu of original message.

Receiver's No.—	Time Filed—	Paid _____	Word <u>Night</u> <small>(Day or night.)</small>	Government rate—Toll, \$ _____
Sent by—		Western Union <small>(Name of company.)</small> Telegraph Co.	Browning, Montana, July 16, 1917. <small>(Place.) (Date.)</small>	
To			From <u>Thomas Ferris,</u> <small>(Print or typewrite name of sender.)</small>	
Francis, Superintendent Carlisle, Pa.		Superintendent. <small>(Title of sender.)</small>		

John

Flat Tail requests return of son to Browning.

690

Official Business,
Gov't night rate, paid.

Charge: Blackfeet Agency
(If not paid in cash, insert name of office to which bill should be presented for payment.)

PAID _____ By SENDER.
(Insert "In cash," if so paid.)

Appropriation: _____

690

July 23, 1917.

Thomas Ferris, Supt.,
Blackfeet Indian Agency,
Browning, Mont.

Dear Sir:

I am enclosing herewith two checks,
one payable to C. V. Peel for \$10, which is
the amount advanced for John Plattail when
he left here last week.

Will you please have John sign ~~these~~
check and return it to me at your earliest
convenience.

The other check also for \$10 is made
payable to John and is the balance of wages
due him. This check he can retain.

Very truly yours,

D:R

Superintendent.

NAME John Flat Tail Sex Male.
 Tribe Pegon State Montana Sept 6, 1916.
 Age 17 years Respiration 18 per. min. Condition of, Eyes Trachoma
 Height 5 ft. 7 1/4 ins. Mensuration { Insp. 33 1/2 Ears normal
 Weight 130 lbs. { Exp. 31 Throat normal
 Temperature 98° Vaccination Vaccinated today Cervical glands normal
 Pulse 72 Vision normal Skin normal
 Inspection normal
 Palpation normal
 Percussion normal
 Auscultation normal
 Heart normal
 (Menstruation)

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	47	good		
Mother	Does not know	good		
Brothers	8	13 good 4 good 3 good 3 good		3 dead but does not know ages at death or causes of death.
Sisters	3	10 good 6 good 2 good		

Personal history

Present condition Satisfactory

Leslie J. Stauffer, 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.

690

.VIRI ,OI YMT

July 10, 1917.

Mr. Thomas Ferris
Superintendent Blackfeet Agency
Browning, Montana.

Mr. Thomas Ferris
Superintendent Blackfeet Agency

Dear Sir:-

I have the following report from the school physician regarding the health condition of John Flat Tail one of the boys from your jurisdiction,-

" I hereby report John Flat Tail to have Tuberculosis in a very active form and would recommend that he be either sent home or to the sanatorium at Toledo, Iowa. "

John was sent to one of our outing homes last May where he was until July 5th when Mr. Dickey the field agent returned him to the school. He had a slight cough when he went out but it was thought the change might benefit him. He did not improve however, in fact, he seems to have failed considerably. The doctor thought he would better remain here in the hospital for a few days under treatment and observation.

Will you please get into immediate communication with his parents and wire me what to do in his case.

Very truly yours

Superintendent.

NRD

DEPARTMENT OF THE INTERIOR
UNITED STATES INDIAN SERVICE

Carlisle Penna.

July 6, 1917.

Mr. John Francis Jr, Supt.

Dear Sir:-

I hereby report John Flattail to have
Tuberculosis in a very active form, and would recommend that
he be either sent home or to the sanatorium at Toledo, Iowa.

Respectfully,

Edward H. Menger,
Physician..

CERTIFICATE OF PROMOTION

May 24, 1917, 191

This certifies that John Flattail
(Name of student.)

has made the following record in Carlisle Indian School
(Name of school.)

SUBJECTS—ACADEMIC AND VOCATIONAL.

GRADE.

RATING.

English

111

69

Arithmetic

55

Effort _____

Department _____

DETAILS SERVED.

LENGTH OF TIME IN EACH.

RATING.

General Work

80

and ~~XXX~~ is not eligible to pursue work in the Four th grade, academic; and _____ grade or year vocational.

John Flattail
Superintendent.

Chas Blair
Principal.

CERTIFICATE OF PROMOTION

May 24, 1917, 191

This certifies that John Flattail
(Name of student.)

has made the following record in Carlisle Indian School
(Name of school.)

SUBJECTS—ACADEMIC AND VOCATIONAL.	GRADE.	RATING.
English	111	69
Arithmetic		55

Effort _____

Department _____


DETAILS SERVED.	LENGTH OF TIME IN EACH.	RATING.
General Work		80

and ~~xxx~~ is not eligible to pursue work in the Fourth grade, academic; and
(Cancel one.)
_____ grade or year vocational.

CLASS OF SERVICE	SYMBOL
Day Message	
Day Letter	Blue
Night Message	Nite
Night Letter	N L

If none of these three symbols appears after the check (number of words) this is a day message. Otherwise its character is indicated by the symbol appearing after the check.

WESTERN UNION TELEGRAM



NEWCOMB, CARLTON, PRESIDENT

GEORGE W. E. ATKINS, FIRST VICE-PRESIDENT

CLASS OF SERVICE	SYMBOL
Day Message	
Day Letter	Blue
Night Message	Nite
Night Letter	N L

If none of these three symbols appears after the check (number of words) this is a day message. Otherwise its character is indicated by the symbol appearing after the check.

RECEIVED AT

Western Union Bldg
130 West High St

Phoned 8470

1G S 12 GOVT NITE

BROWNING MONT JUL 16TH 1917

690

FRANCIS SUPT

CARLISLE PA.

FLATTAIL REQUESTS RETURN OF SON TO BROWNING

FERRIS

839AM JUL 17TH 1917

5-192 a

BRIEF.

APPLICATION OF

Philip Flat tail

FOR THE ENROLLMENT OF

John Flat tail

IN THE INDIAN SCHOOL AT

Carlisle Penn

NAME OF AGENCY FROM WHICH PUPIL CAME:

Blackfoot

Date of enrollment, *Sept*, 191 *6*

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

NAME OF PERSON ARRANGING FOR THE TRANSFER:

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, Penn

of John Flat Tail; m; age 17; date of birth 1899;
(Name of child.) (Sex.)
Piegau
(Tribe.)

NAME OF FATHER. (Both Indian and English.)	LIVING OR DEAD.	TRIBE.	BAND.	DEGREE OF INDIAN BLOOD.
<u>Philip Flat Tail</u> <small>(Wes Cross)</small>	<u>L</u>	<u>Piegau</u>		<u>Full</u>
NAME OF MOTHER.				
<u>Annie Flat Tail</u>	<u>L</u>	<u>Piegau</u>		<u>Full</u>

I, Philip Flat Tail, do hereby voluntarily consent and agree to
(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.
<u>Holy Family Mission</u>	<u>1908</u>	<u>1915</u>	<u>Had a bad cold - was unable to re- ceive did not return</u>	<u>Third</u>

Philip Flat Tail
(Parent, guardian, or next of kin.)

P. O. address: Family

Two witnesses:
E. E. DeVolo
Peter Whitman

Moatawa

PHYSICIAN'S CERTIFICATE.

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. except trachoma

This 6th day of September, 1916

Leslie J. Stauffer
Physician at Blackfoot 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 parent (Parent, guardian, or next of kin.) was voluntary.

(Here state whether the child lives within reach of a public school, whether the State laws permit it to enroll therein, and if it lives near the public school why it can not attend such school.)

No State school nearer than 16 miles

I recommend the transfer of the said child.

This 11 day of Sept, 1916

L. Lewis
Agent or Superintendent.

CERTIFICATE OF SCHOOL PHYSICIAN.

I hereby certify that on _____, I made a careful examination of the physical condition of _____, (As soon after arrival as possible.) the child named in the foregoing application, and found _____ to be _____

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

This _____ day of _____, 191 _____

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 reservation school records. The reservation superintendent should 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.

CARLISLE INDIAN INDUSTRIAL SCHOOL

2793 (Alaska)

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

NUMBER 5607	ENGLISH NAME John Platt	AGENCY	NATION Blackfoot					
BAND	INDIAN NAME	HOME ADDRESS Browning, Mont.						
PARENTS LIVING OR DEAD		BLOOD P.	AGE 17	HEIGHT	WEIGHT	FORCED INSP.	FORCED EXPR.	SEX.
FATHER	MOTHER	ARRIVED AT SCHOOL 10-5-16		FOR WHAT PERIOD	DATE DISCHARGED July 19, 1917	CAUSE OF DISCHARGE Sickness		
TO COUNTRY 5-10-17	PATRONS NAME AND ADDRESS Went Outing of Geo. W. Row, Zardley, Pa.					FROM COUNTRY 7-5-17		

SHAW-GARRETT, WASHINGTON, WISCONSIN 43445

Months in school before Carlisle, *6.0*

Trade entered at Carlisle,

Grade at date of Discharge,

Trade or Industry,

Church, *Catholic*