

2812

CARLISLE INDIAN INDUSTRIAL SCHOOL.
DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT.

NUMBER 2173	ENGLISH NAME <i>Clara Frances Paul</i>	AGENCY	NATION <i>Penobscot</i>				
BAND	INDIAN NAME	HOME ADDRESS <i>Newell Hob Paul</i>					
PARENTS LIVING OR DEAD	BLOOD	AGE	HEIGHT	WEIGHT	FORCED INSP.	FORCED EXPR.	SEX.
FATHER, <i>L</i>	MOTHER, <i>D</i>	<i>1/2</i>	<i>16</i>	<i>5-3 1/2</i>	<i>114</i>		<i>F</i>
ARRIVED AT SCHOOL	FOR WHAT PERIOD	DATE DISCHARGED	CAUSE OF DISCHARGE				
<i>Sept. 5-1909</i>	<i>3 years</i>	<i>5-25-08</i>	<i>Parents' request</i>				
TO COUNTRY	PATRONS NAME AND ADDRESS					FROM COUNTRY	
<i>4-8-08</i>	<i>J.W. Lynch, Morton, Cal.</i>						

SHAW-WALKER MUSKOGON 5478

Months in school before Carlisle,

Grade entered at Carlisle,

Grade at date of Discharge,

Trade or Industry,

Church, *Catholic*

Came alone from Magnolia, Mass.

2812

5-192

BRIEF.

APPLICATION OF

Gabriel A. Paul.

FOR THE ENROLLMENT OF

Clara Frances Paul,

IN THE INDIAN SCHOOL AT

Carlisle, Pennsylvania

POST-OFFICE ADDRESS OF APPLICANT:

Mass.
Magnolia, (at present)

Date of enrollment, *Aug. Sept 5*, 1907

Term of enrollment *Longer if necessary, Three* years.

NAME OF COLLECTING AGENT:

Position,

*Ticket ordered
AUG 30 1907*



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, Pa., of Clara Frances Paul, female, I, Gabriel A. Paul, uncle of Clara F. Paul, P. O., State of Mass., do hereby voluntarily consent and agree to her enrollment in said school for a period of Three 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 Indian Island on Oct. 4, th 1891; that the father, Nerwell Paul, is a part Indian of the Perobscot Tribe located at Indian Island Agency; that he left the tribe about _____; that the mother, Lucy Francis, was a part Indian of the Perobscot Tribe located at Indian Island Agency, and left the tribe about died 10 years ago that the said child was born and reared in the United States, and now actually resides therein; and that she 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>Government</u>	<u>Indian Island</u>	<u>8 years over</u>	<u>never</u>	<u>no cause</u>	<u>th</u>

This 24th day of August, 1907

Two witnesses:

Mrs. F. B. Pawall. Mrs. Mamie Joseph Aunt
(Parent, guardian, or next of kin.)
Magnolia, Mass. P. O., _____

(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, Gabriel A. Paul, do hereby swear that the statements made in the above application are true.

Gabriel A. Paul His mark, guardian
(Signature of applicant.) (Parent, guardian, or next of kin.)

Sworn to and subscribed before me this 24th day of August, 1907

Jonathan May, Notary Public

(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.)

NOTE

Age limits, fourteen to twenty years. Preferably fourteen to eighteen. Students must be at least one-fourth Indian, preferably full Indian. Special cases beyond the age limit will be given consideration. An industrial course only can be taken and the term reduced to three years, in exceptional cases.

CERTIFICATE OF PHYSICIAN.

I, E. Arthur Dakin, a practicing physician of Magnolia
Mass., do hereby certify that I have carefully examined Chara H. Paul,
the child named in this application, and find that She 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 24th day of August, 1907 E. Arthur Dakin, M. D.

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
(Parent, guardian, or next of kin.)
by _____; that I believe _____ understood the purport
(Name of interpreter.)
thereof; that I was present at the medical examination of the child named herein; that _____
resides with _____, in or near the town of _____;
(Name of person—parent, guardian, etc.)
that the child can not have adequate and proper educational facilities at home for the reason that

Dated at _____
this _____ day of _____, 190_____
(Official title.)

(NOTE.—This voucher must be executed by the official representative of the nonreservation school to which application
is made. Pupils and Indian solicitors will not be accepted.)

VOUCHERS OF DISINTERESTED PERSONS.

VOUCHER NO. 1.

I, _____, a _____, of
(Business, calling, or profession.)
_____, do hereby certify that I am personally acquainted with
_____ who makes the foregoing application; that I believe his state-
ments therein are true; that I am acquainted with _____; 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 _____

This _____ day of _____, 190_____
6-871

VOUCHER NO. 2.

I, _____, a _____ of _____ (Business, calling, or profession.) _____, do hereby certify that I am personally acquainted with _____, who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with _____; that he is known and recognized in the community in which he lives as an Indian; and that in my opinion he can not receive proper and adequate schooling at home for the reason that _____

This _____ day of _____, 190 _____

CERTIFICATE OF SCHOOL PHYSICIAN.

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 _____

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 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.

