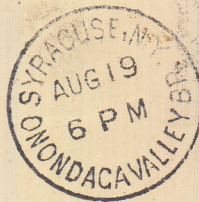


Department of the Interior.

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

6-3305

Onondaga Indian Reservation
 Sld B. 5. Syracuse, August, 18/7/19
 Dear Sir Mr. Friedman: I received
 letter yesterday was glad
 to hear from you I think
 you are good man. means to do
 what right that side. I sent
 you picture very pleasant
 looking man. How about
 the girls, did you know that
 they both sick when they came.
 Both look so, she had the cough
 so thin nothing but skin and
 bone I was surprised to see
 her like that. she was sick
 three time weeks sore throat
 and this she is sick she has
 spells pain on her side cant
 hardly walk apprehensive
 she say she dont want no
 Dr. she is afraid Dr. say
 go to hospital have operation
 to be cut out. I will write
 again. later on if they
 get over it yours truly
 Mr. S. A. Pierce

CARLISLE INDIAN INDUSTRIAL SCHOOL Special Auth.

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

Edu. 81449-1912
a.g.c.

2939

NUMBER 2785	ENGLISH NAME Lois Cooke	AGENCY New York	NATION Onondaga
BAND	INDIAN NAME	HOME ADDRESS Mrs. E. G. Paine P. O. #5 Syracuse N. Y.	
PARENTS LIVING OR DEAD	BLOOD 3/4	AGE 12	HEIGHT 4' 11"
FATHER, L	MOTHER, L	WEIGHT 88 1/4	FORCED INSP. 30
ARRIVED AT SCHOOL Sept. 28, 1912	FOR WHAT PERIOD Five years.	DATE DISCHARGED Oct. 2, 1913	CAUSE OF DISCHARGE Termination of leave.
TO COUNTRY 6-11-13	PATRONS NAME AND ADDRESS On leave		FROM COUNTRY

Months in school before Carlisle,

Grade entered at Carlisle,

Grade at date of Discharge,

Trade or Industry,

Church, Episcopal

Miles to school - 5.

Ed. Sch. 81449-1912.

NAME

Lois Cooke

Sex ~~Male~~
Female.Tribe ~~Full~~

Ononoga State New York

Sept 30, 1913

Age 12 years

Respiration

Condition of Eyes Trachoma

Height 4 ft. 11 ins.

Mensuration

Insp. 30

Ears O.K.

Weight 88 1/4 lbs.

Exp. 26

Throat O.K.

Temperature 98

Vaccination

Yes

Cervical glands O.K.

Pulse

Vision

Skin O.K.

Inspection

Fair development

Palpation

normal

Percussion

normal

Auscultation

normal

Heart

normal

(Menstruation)

regular.

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	Yes	good		
Mother	Yes	"		
Brothers	3	"	none	
Sisters	2	"	none	

Personal history

mumps

Present condition

good

H. B. Fraher, 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.

Age Sex $\begin{cases} \text{Male.} \\ \text{Female.} \end{cases}$ Tribe $\begin{cases} \text{Full} \\ \text{I/} \end{cases}$ Residence
(On, 19.....)

6.

NAME

2939
Lois Cooke

new.

Sex { ~~Male~~
Female.Tribe { Full
++ }

Ononoga

State

New York

Sept 30, 1912

Age

12

years

Respiration

18

Condition of, Eyes

Trypan

Height

4

ft.

11

ins.

Mensuration

Insp.

30

Ears

OK

Weight

88 1/2

lbs.

Exp.

26

Throat

OK

Temperature

98 1/4

Vaccination

yes.

Cervical glands

OK

Pulse

72

Vision

Skin

OK

Inspection

Fair development

Palpation

normal

Percussion

normal

Auscultation

normal

Heart

normal

(Menstruation)

regular.

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	yes	good		
Mother	yes	"		
Brothers	3	"		
Sisters	2	"	none	

Personal history

rumps

Present condition

good

H. B. Fraley, 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.

Name _____

Age _____ Sex $\begin{cases} \text{Male.} \\ \text{Female.} \end{cases}$ Tribe $\begin{cases} \text{Full} \\ \text{I/} \end{cases}$ _____ Residence _____
(On _____, 19____)

[illegible]

2939

May 13th, 1914.

My E.A. Pierce,

R.D.5, Syracuse, N.Y.

Dear Madam,

There is a check enclosed herewith for 1.76
being balance due you account transportation of the
Cook girls. Kindly present the check for payment promptly
and oblige.

Respectfully,

W.H.M.

Supervisor in Charge.

88

See Indian Office Letter
of Sept. 16th, 1912.

BRIEF.

Application of

FOR THE ENROLLMENT OF

Lois Cooke.

IN THE INDIAN SCHOOL AT

Carlisle, Pennsylvania

POST-OFFICE ADDRESS OF APPLICANT:

Date of enrollment, _____, 191_____

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, Pa., of Lois M R Burke, female, I, Eliza A Pierce, of Syracuse R 725 P. O., State of New York, do hereby voluntarily consent and agree to her enrollment in said school for a period of five 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 Onondaga Res on May 18/1900 that the father, Louis Cooke, is a 1/2 Indian of the St Regis Tribe located at St Regis Agency; that he left the tribe about 1881; that the mother, Ida Webster, is a full Indian of the Onondaga Tribe located at Onondaga Agency, and left the tribe about 1881; that 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>Onondaga Res School</u>	<u>Indian Village</u>	<u>Sept 06</u>			<u>5</u>

This 20 day of Sept, 1912
Two witnesses:

W Irving Harrington

Mrs E A Pierce
(Parent, guardian, or next of kin.)

Mrs Lina Harrington

P. O., R 725 Syracuse, N.Y.

(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, Mrs E A Pierce, do hereby swear that the statements made in the above application are true.

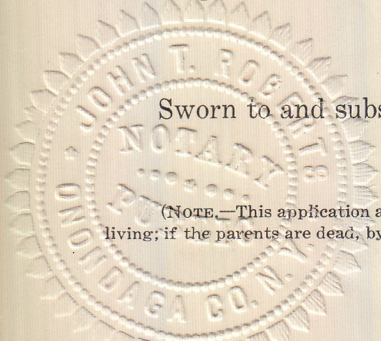
Mrs E A Pierce
(Signature of applicant.) (Parent, guardian, or next of kin.)

Sworn to and subscribed before me this 21st day of September, 1912

John T Roberts

(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



FOR NEW YORK PUPILS.

This blank is to be filled out and signed by a former teacher of the applicant, by a school trustee, a school superintendent, or by some other person conversant with the status of the applicant's school attendance.

This is to certify that Lois M. R. Cooke
has attended the Onondaga Reservation School at
Indian Village New York, from Sept 1906
to Sept 20 1912.
Syracuse P. F. D. 5 N. Y.
Sept 20 1912.

W. Irving Harrington
(Sign here.)

Certificate of Physician.

I, H. C. Dr. Bais, a practicing physician of Syracuse
May, do hereby certify that I have carefully examined Lois M R Cook

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 27 day of September, 1912 H. C. Dr. Bais, M. D.

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 _____, 191_____

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 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; and that in my opinion
he cannot receive proper and adequate schooling at home for the reason that _____

This _____ day of _____, 191_____

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 _____, 191_____

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.

