

3

2959
Hunt

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Charles Lucile DATE 12/7 1908

AGE 17 YEARS { NEW RETURNED } STUDENT. TRIBE Seneca STATE Ny

DEGREE OF INDIAN BLOOD.....

INSPECTION Good development

PALPATION About normal

PERCUSSION About normal

AUSCULTATION { RESONANCE.....
RESP. MURMUR Slight increase in breath sounds
HEART SOUNDS left lobe posteriorly

MENSURATION { INSP. 35 RESPIRATION 20 PULSE 72
EXP. 31

TEMPERATURE 98.2 degs. HEIGHT 5 FT. 3 1/2 IN. WEIGHT 137 LBS.

VISION 10/20 VACCINATION good. Rev 12/27/08

MENSTRUATION Becoming scanty

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER.....	<u>yes</u>	<u>good</u>		
MOTHER.....			<u>yes</u>	<u>Consumption.</u>
BROTHERS {	<u>1</u>	<u>good</u>		
SISTERS {	<u>1</u>	<u>good</u>	<u>2</u>	<u>?</u>

PERSONAL HISTORY:
Had cough for long time. Haemoptysis in Sept. Some fever. Cough remains about same. Lost 2 lbs in last 2 weeks.

REMARKS:
Says she has rales in chest at night.
Alte Reaction - slight

2959

NAME. *Lucy Charles*

TRIBE. *Seneca*

PARENT OR GUARDIAN.

DATE ENROLLED *April 26, 1908.*

TERM. *Five Years.*

AGE. *16*

HOME ADDRESS *Lucinda A. Parker,
Basom, N. Y.*

DATE OF RECORD

ACADEMIC DEPARTMENT.
ROOM NO. | Scholarship | Conduct.

INDUSTRIAL DEPARTMENT.
Shop. | Ability. | Conduct.

DORMITORY.
Room No. | Neatness | Conduct.

OUTING
Ability. | Conduct

SPECIAL REMARKS

*June '10
Jan. '11*

Home

2959

APPLICATION FOR ENROLLMENT IN A NON-RESERVATION SCHOOL

Full name of child..... *Lucy Charles*..... Indian name is
 Name of Father..... *Anderson Charles*
 Name of Mother..... Tribe..... *Seneca*
 Reservation..... *Townawanda*..... Degree of Indian blood of child..... *full*
 Is either parent white, if so, which?..... Are either or both allotted?.....
 On what reservation?..... Age of child..... *sixteen*
 What reservation school attended?..... How long?.....
 If ever enrolled in a non-reservation school, name of school..... *Thomas Indian School*
 When?..... *1901*..... How long?..... *six years*
 If ever dismissed from a school, where?..... *Cattaraugus*..... When?..... *July 1907*
 and for what reason?..... *save the term*
 (Signed)..... *Lucy Charles*

NOTE—The above blank to be signed by the child, if old enough to understand its import; if not, by the parent, guardian or other person cognizant of the facts.

CONSENT BLANK

I,..... *Lucinda A. Parker*..... parent, guardian or next of kin of the
 above-named child,..... *Lucy Charles*..... do hereby consent to..... *recommnd*.....
 transfer or enrollment for a period of five (5) years in the Indian School at Carlisle, Pa.
 Dated at..... *Basom N.Y.*..... on the..... *twenty fifth*
 day of..... *October*..... 1907.
 (Signed)..... *Lucinda A. Parker*
 (~~Parent~~, Guardian or next of kin.)
Sister and

PHYSICIAN'S CERTIFICATE

I hereby certify that I have personally examined the above-named..... *Lucy Charles*
and have found..... *her*..... physically sound, and recommend
 the transfer so far as..... *her*..... health conditions are concerned. Dated at..... *Indian Falls N.Y.*
 on the..... *7th*..... day of..... *Oct.*..... 1907.
 (Signed)..... *John W. Fisher M.D.*
Indian Falls N.Y.

AGENT'S OR SUPERINTENDENT'S INDORSEMENT

..... *Nov 5*....., 1907.
 The statements concerning the above named..... *Lucy Charles*..... are
 believed by me to be correct, and I hereby recommend the transfer.
 (Signed)..... *Q. M. M. M.*
 U. S. Indian Agent or Superintendent.

NOTE—Age limits, twelve to twenty years. Preferably fourteen to eighteen. Students must be at least one-fourth Indian, preferably full Indian. Special cases beyond the age limit can be given consideration.

Wrote L.A. Parker
11-15-07

CONSENT OF

.....
FOR THE ENROLLMENT OF

.....
IN THE INDIAN SCHOOL AT

.....
For a term of.....years.

.....
Name of agency or place from which pupil came.

.....
Date of enrollment,..... 190.....

Date of discharge,..... 190.....

Cause of discharge,..... 190.....

