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APPLICATION FOR ENROLLMENT IN A NON-RESERVATION SCHOOL

Full name of child Evarest Paul Indian name is
 Name of Father Ben Paul
 Name of mother _____ Tribe Chitimacha
 Reservation Indian Bend Degree of Indian blood of child 1/2
 Is either parent white, if so, which? half Indian Are either or both allotted?
 On what reservation? _____ Age of child 9 What
 reservation school attended? none How long?
 If ever enrolled in a nonreservation school, name of school, _____
 When? _____ How long? _____ If ever
 dismissed from a school, where? _____; when? _____
 and for what reason? _____
 (Signed.) Christine Paul

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, Christine Paul parent, guardian or next of kin of the
 above-named child, Evarest Paul, do hereby consent to his
 transfer or enrollment for a period of five (5) years in the Indian School at Carlisle, Pa.
 Dated at Charlton La, on the 26th
 day of July, 1906.
 (Signed.) Christine Paul
 (Parent, Guardian or next of kin.)

PHYSICIAN'S CERTIFICATE Ben Paul

I hereby certify that I have personally examined the above-named Evariste Paul
 _____, and have found him physically sound, and recommend
 the transfer so far as his health conditions are concerned. Dated at Charlton
 on the 26th day of July, 1906.
 (Signed) W. H. Peck, M.D.

AGENT'S OR SUPERINTENDENT'S INDORSEMENT

_____, 1906.

The statements concerning the above named _____ are be-
 lieved by me to be correct, and I hereby recommend the transfer.
 (Signed.) _____
 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.

Card made

APPLICATION FOR ENROLLMENT IN A NON-RESERVATION SCHOOL

Full name of child Christine Paul
 Name of Father Ben Paul
 Name of Mother Christine Paul
 Reservation Cherokee
 Is either parent white, if so, which? Yes
 On what reservation? None
 How long? None
 If ever enrolled in a non-reservation school, name of school, when?
 Dismissed from a school, when?
 and for what reason?
 (Signed) Christine Paul

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 competent of the facts.

CONSENT BLANK

I hereby consent to the transfer of my child Christine Paul
 to the Indian School at Carlisle, Pa.
 on the 26th day of July, 1907
 (Signed) Christine Paul
 (Parent, Guardian or next of kin)

PHYSICIAN'S CERTIFICATE

I hereby certify that I have personally examined the above named child
 and have found well and recommend the transfer so far as
 health conditions are concerned. Dated at Cherokee
 on the 26th day of July, 1907
 (Signed) John P. ...

AGENT'S OR SUPERINTENDENT'S ENDORSEMENT

The statements concerning the above named child
 given by me to be correct, and I hereby recommend the transfer.
 (Signed) ...
 U. S. Indian Agent or Superintendent

NOTE—Age limit, twelve to twenty years. Persons to be enrolled in Indian schools must be of full-blood Indian ancestry. Special cases beyond the age limit are to be given consideration.

Handwritten signature

OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

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Name of Student *Everst Paul* Home Address *Christine Paul, Charenton, La. Chitimache*

Age at Entrance *10* Date of Entrance *8-2-06* Shop JAN. FEB. MAR. APR. MAY JUNE JULY AUG. SEPT. OCT. NOV. DEC. TOTAL OR AVERAGE

Patron *A. W. Farrow,* Locality Days in School

Address *Martin's Creek, Pa.* R. R. Station Conduct *7. 7'*

Recommended by Grade in School Ability *9. 7*

Grade of Home Church *Catholic,* Health *9. 9*

Date of Outing *4-6-'10.* Date Returned *6-18-'10* Wages Earnings

Geo. S. Allen *15 22*
Shippensburg, Pa. Oakville, Pa.
P.O.
7 7 7 7 7 7 7 7

6-22-'10 Retd 1-1-'11 *July Aug. Sept Oct Nov. Dec Jan. Feb. Mar Apr May June*
Mrs. Emma Mc Coy *1.50 1.50 1.00*
Carlisle, Pa.

7 7
7 7
7 7

5-18-'11 In 9-1-'11 *3.*

7 7
7 7
7 7
3.00 3.

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PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL *Paul Emerice* DATE *7/15* 19*08*AGE *11* YEARS } NEW } STUDENT. TRIBE *Chittimahe* STATE *La.*
RETURNED }

DEGREE OF INDIAN BLOOD.....

INSPECTION *Good development.*PALPATION *Normal*PERCUSSION *Normal*AUSCULTATION { RESONANCE.....
RESP. MURMUR *Normal*

HEART SOUNDS.....

MENSURATION { INSP. *27*..... RESPIRATION *18*..... PULSE *90*.....
EXP. *24*.....TEMPERATURE *98.2* degs. HEIGHT *4* FT. *7* IN. WEIGHT *73 1/2* LBS.VISION *10/10* VACCINATION *good 11/11/08*

FAMILY HISTORY:

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

PERSONAL HISTORY: *Good health*

REMARKS:

Paul, Everest

3317

Guardian - Mrs. Christine Paul

5655-