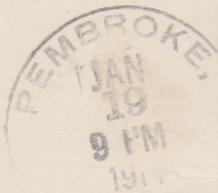






Department of the Interior.

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

6-3305

✓  
 3320  
 Jan. 19<sup>th</sup>, 1914

Name Margaret Woodelf, Margaret Sampson  
 (Please give name by which enrolled and also present or married name.)

Tribe Cherokee

Present Address Pembroke N.C.

Former Address Bevis N.C.  
 (Address from which we heard from you last.)

Present Occupation House-work.

Remarks: I would be very glad if my name should be placed on the Arrow list.

3320

NAME Margaret Woudepp

Sex { Male.  
Female.

Tribes { Full Cherokee State N. Carolina Sept 9, 1911

Age 17 years Respiration Condition of, Eyes G. K.

Height 5 ft. 5 ins. Mensuration { Insp. 33 37 Ears G. K.

Weight lbs. { Exp. 37 33 Throat O. K.

Temperature 98.2 Vaccination Sept 9-1911 Cervical glands O. K.

Pulse 88 Vision Skin O. K.

Inspection Well developed; well nourished (Thyroid enlarged)

Palpation Tactile fremitus inc on rt.

Percussion Impaired at left apex.

Auscultation To and fro friction over left apex. Bronchial breathing  
no rales.

Heart O. K. - a little rapid

(Menstruation) Painful

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	No	T	Yes	T. B.
Mother	Yes	W. P.		
Brothers	4	T. B. ?		
Sisters	3	T. B. ?		

Personal history Coughs; has lost weight. Night sweats.

Present condition ~~Unfavorable~~

Elmer Hess, 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. 6-1955



3320

**BRIEF.**

**Application of**

*Malissey Oudin*

FOR THE ENROLLMENT OF

*Margaret Woodell*

IN THE INDIAN SCHOOL AT

**Carlisle, Pennsylvania**

POST-OFFICE ADDRESS OF APPLICANT:

*Bice MC. RH 2*

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 Margaret Woodell, Female, I, Malissy Oxendine Guardian (Name of child.) (Sex.) (Parent, guardian, or next of kin.) of Buie NC P. O., State of North Carolina, 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. (Not less than 3.)

I further say that the said child was born at Buie NC on 1894; (Date.) that the father, Amos Woodell, was a 1/4 Indian of the Cherokee (Name of father.) (Is or was.) (Degree.) Tribe located at in Robeson Co NC Agency; that he left the tribe about 1838; (Approximate date.) that the mother, Nancy Woodell, is a 1/2 Indian of the Cherokee (Name.) (Is or was.) (Degree.) Tribe located at in Robeson Co NC Agency, and left the tribe about 1838; (Approximate date.) 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>Public</u>	<u>Buie NC</u>	<u>1910</u>	<u>1911</u>	<u>School Discontinued</u>	<u>4</u>

This 21 day of Aug, 1911  
Two witnesses:

Malissy Oxendine  
(Parent, guardian, or next of kin.)

P. O. Beulah NC

(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.)

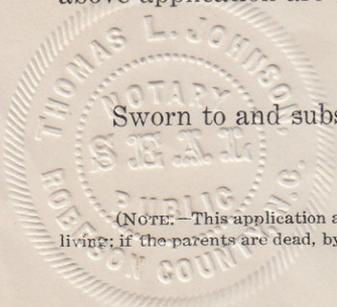
## AFFIDAVIT.

I, Thomas L. Johnson, do hereby swear that the statements made in the above application are true.

Malissy Oxendine  
(Signature of applicant.) (Parent, guardian, or next of kin.)

Sworn to and subscribed before me this 22<sup>nd</sup> day of August, 1911

Thomas L. Johnson



(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.)

My Commission Expires October 21, 1912

**Certificate of Physician.**

I, W. H. Andrews, a practicing physician of Pembroke  
NC, do hereby certify that I have carefully examined Margarette Woodell.

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 21 day of August, 1911 W. H. Andrews, M. D.

**Vouchers of Disinterested Persons.**

VOUCHER No. 1.

I, A. A. Thagard, a Post-Master, of Pinehoke, NC, do hereby certify that I am personally acquainted with Margarette Woodell who makes the foregoing application; that I believe <sup>her</sup> his statements therein are true; that I am acquainted with Margarette Woodell; that <sup>she</sup> he is known and recognized in the community in which <sup>he</sup> he lives as an Indian; that in my opinion <sup>she</sup> he can not receive proper and adequate schooling at home for the reason that the school here is crowded and not able to give proper instruction &c

This 21 day of Aug., 1911 A. A. Thagard

VOUCHER No. 2.

I, B. W. Lourie, a merchant, of Pembroke, N. C., do hereby certify that I am personally acquainted with Miss Margaret S. Woodelle, who makes the foregoing application; that I believe <sup>her</sup> his statements therein are true; that I am acquainted with Margaret S. Woodelle; that <sup>she</sup> he is known and recognized in the community in which <sup>she</sup> he lives as an Indian; and that in my opinion <sup>she</sup> he cannot receive proper and adequate schooling at home for the reason that this school is not component of the desired occupation of the student

This 21 day of Aug, 1911 B. W. Lourie

## 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<sup>th</sup> 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.



The information requested below must be given in detail, for it will have to be considered in the determining of your eligibility for enrollment at Carlisle.  
-----

Have you attended public school? *yes*

Where? *Burnt Swamp School house*

When? *1910 - 1911*

How far do you reside from public school now? *1 mile*

Will you attend public school if you do not enroll at an Indian School? *no - school discontinued*

What is your reason for not attending public school?  
*now in reach of me*

Why do you wish to attend at Carlisle?  
*To obtain an education along industrial line*

What special trade do you desire to complete?  
*any suggested by gov't school*

Can you provide for your own transportation to Carlisle?  
*no -*

