Vesles 3390 Vesertes - Chicago Police. Cey-stre.

3390, REPORT AFTER LEAVING CARLISLE 'Y AND E'' ROCH.

563757 3**M-**2-11

NAME AT CARLISLE Wesley James.

PRESENT NAME						
DATE	INFORMATION THROUGH	ADDRESS	OCCUPATION	ITEMS OF INTEREST	GRADE	
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Conduct. Room Neatness Conduct Ability. Conduct, Jan. 109 Nov Med. Med. 1, " Paos 4 Poos Goor Jan. 10 Deserter

PHYSICAL EXAMINATION. 5390

NAME OF PUPIL James New AGE I. YEARS Returned STUDENT. TRIBE Chippelus STATE Mich. INSPECTION Chest flat. Por development PALPATATION Normal PERCUSSION. Normal AUSCULTATION. Normal AUSCULTATION. Normal MENSURATION SINED. 3.4 1/2 RESPIRATION 1/2 VACCINATION 2009. Exp. 3.1 4 RESPIRATION 1/2 VACCINATION 2009. TEMPERATURE 9 4 degs. HEIGHT 3 FT 6 3/4N. VISION 1/0. PULSE 7 WEIGHT 12 3 2 LBS. FAMILY HISTORY: LIVING Condition of Health Dead Cause of death FATHER 9 000 PRISONAL HISTORY: SISTERS. PRISONAL HISTORY: Abol furth pounds since Outside Had cough for year. PERSONAL HISTORY: Abol furth pounds since Outside Had cough for year. PERSONAL HISTORY: Abol furth pounds since Outside Had cough for year. PERSONAL HISTORY: Abol furth pounds since Outside Had cough for year. PERSONAL HISTORY: Abol furth pounds since Outside Had cough for year. PERSONAL HISTORY: Abol furth pounds since Outside Had cough for year. PERSONAL HISTORY: Abol furth pounds since Outside Had cough for year. PERSONAL HISTORY: Abol furth pounds since Outside Had cough for year. PERSONAL HISTORY: Abol furth pounds since Outside Had cough for year. PERSONAL HISTORY: Abol furth pounds since Outside Had cough for year. PERSONAL HISTORY: Abol furth pounds since Outside Had cough for year.	^					
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	REMARKS:					
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Remarks:						

BRIEF.

Application of

Hesley James

IN THE INDIAN SCHOOL AT

Carlisle, Pennsylvania

POST OFFICE ADDRESS OF APPLICANT:

Term of enrollment,

Application for Enrollment in a Nonreservation School.

(For a child not enrolled at an Agency.)

For and in consideration of t	the United States	s assuming	the care, e	ducation,	and mainte	enance in
the United States Indian School a	t bar	lisle	Oc	? ,		, of
Wesley Jame	s, 9	(Sex.) I,	W.	esley Parent, guardia	an,, or next of l	nes
of Jeneonning P.	O., State of	me	L , d	o hereby	voluntarily	consent
and agree to						
and bind myself to abide by all the			Indian sch	nools.	,	
I further say that the said ch	ild was born at.	Pine	nner	· 4 01	1 Sept	- 11-189
that the father, Setu Joname of fath	ner.)	, WW.	a full I	ndian of	the Ch	ippewa
Tribe located at fincounty	/ Agency; th	at he left th	ne tribe ab	out di	d no	leave
that the mother, (Name.)	James	, (Is or was,)	afull I	ndian of t	the chi	mewa
Tribe located at flineon	Agency, an	d left the t	ribe about.	did.	nor le	are; that
the said child was born and reare						and that
he has attended the following s						
NAME OF SCHOOL-PUBLIC, GOVERNMENT, OR MISSION.	LOCATED	AT—	DATE OF ENROLLMENT.	DATE OF DISCHARGE.	CAUSE OF DISCHARGE.	GRADE.
Myplessen.			1901	1901	Siele	2
	ESS OF APPLICA	ROGA BORN	a 2207			
					,	
	7.0	100 0				
This day of Two witnesses:	1 wy	, 190 7	W		0 1	1
Will H. Mello	w -		-00.	ls/	us a	Jarne
6 1 2/	+ . 6 /			, guardian, or		
(NOTE.—Every blank in this application mus	t be properly filled out b	v the applicant, i	P. O.,	riting if noss	hle The signat	uro whether
by mark or otherwise, must be attested by two witr				, p	and signat	are, whether
		DAVIT.				
I, above application and two	AFFIC		swear tha	t the state	ements ma	de in the
I, above application are true.	AFFIC		swear tha	t the state	ements ma	de in the
I, above application are true.	AFFIC	do hereby	swear tha			



Certificate of Physician.

I,		, a practicing physician of
	, do hereby certify	that I have carefully examined
the child nar	med in this application	on, and find thatis in proper physical condition to attend
	is not afflicted with tu	aberculosis or other disease which would be a menace to the health
This	day of	, 190
Approximate the Company of the Compa		, M. D.
	Vouch	ners of Disinterested Persons.
		Voucher No. 1.
Ι,		(Business, calling, or profession.)
		(Business, calling, or profession.) do hereby certify that I am personally acquainted with
CHEST STREET,		who makes the foregoing application; that I believe his state-
ments therei	n are true; that I am	n acquainted with (Name of Child.); that
he is know	n and recognized in	the community in which he lives as an Indian; that in my opinion
		lequate schooling at home for the reason that
This	day of	190
Too wit had	The hard a supply than	
		Voucher No. 2.
I,		, a
		(Business, calling, or profession.)
		, do hereby certify that I am personally acquainted with
		, who makes the foregoing application; that I believe his state-
ments thereir	n are true; that I am a	cquainted with ; that
he is known	and recognized in the	e community in which he lives as an Indian; and that in my opinion
he cannot r	receive proper and add	equate schooling at home for the reason that
		•
This	day of	, 190

Certificate of School Physician.

I hereby certify that on	(As soon after arrival as possible.)	, I made a careful examination
of the physical condition of	Bentanta distanta area ta	, the child named in the fore-
going application, and found	to be	the circle named in this application. school, and is not afficient with taber
G 10	2 / Service / // / /	
I therefore recommend that	t the said child bee	nrolled in this school.
Thisday 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 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.