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BRIEF.

Application of

Isaac McLowrey

FOR THE ENROLLMENT OF

Self

IN THE INDIAN SCHOOL AT

Carlisle, Pennsylvania

POST OFFICE ADDRESS OF APPLICANT:

Klamath, Calif.

Date of enrollment, *Dec 25*, 190 *8*

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 Isaac McCowey, male, I, Isaac McCowey of Klamath P. O., State of Ore., do hereby voluntarily consent and agree to my enrollment in said school for a period of 5 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 Klamath on Feb. 16 '91; that the father, Chas. McCowey, is a White Indian of the Klamath Tribe located at Klamath Agency; that he left the tribe about _____; that the mother, Mrs. McCowey, was a Full Indian of the Klamath Tribe located at Klamath Agency, and left the tribe about never left; 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>Hoopra</u>	<u>Hoopra Valley</u>	<u>About 6 yrs.</u>	<u>Time out 7th</u>		
<u>Mettah Pub.</u>	<u>Klamath</u>	<u>"</u>	<u>2 yrs.</u>	<u>Ill.</u>	<u>8th</u>
<u>Carlisle</u>					

This 18 day of Feb., 1909.

Two witnesses: Emma K. Hetrick
Will H. Miller

Isaac McCowey
(Parent, guardian, or next of kin.)

Mrs. was allotted.

P. O., _____

(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, _____, do hereby swear that the statements made in the above application are true.

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

Sworn to and subscribed before me this _____ day of _____, 190

(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.)



Certificate of Physician.

I, _____, a practicing physician of _____
_____, do hereby certify that I have carefully examined _____,
the child named in this application, and find that _____ 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 _____ day of _____, 190_____, 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 _____, 190_____

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 _____, 190_____



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 _____, 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.

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CARLISLE INDIAN INDUSTRIAL SCHOOL

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

NUMBER 5013	ENGLISH NAME Isaac McCowey	AGENCY	NATION Klamath				
BAND	INDIAN NAME	HOME ADDRESS Chas McCowey, Klamath					
PARENTS LIVING OR DEAD	BLOOD A 1/2	AGE 18	HEIGHT 5' 10"	WEIGHT 163	FORCED INSP. 39	FORCED EPXR. 35	SEX. M
FATHER, L	MOTHER, A	ARRIVED AT SCHOOL Dec. 25, 1908.	FOR WHAT PERIOD 5 years.	DATE DISCHARGED Jan. 23, 1911	CAUSE OF DISCHARGE Deserter		
TO COUNTRY	PATRONS NAME AND ADDRESS					FROM COUNTRY	
3-3-09	Fred. D. Watson, Fallsington, Pa.						
5-19-09	Ran from country						

THE SHAW-WALKER CO., MUSKIEGON, 79104

Months in school before Carlisle, 7th Gr.
 Hoopa 6 yrs.
 Metlak Pub. 2 yrs. 8th Gr.
 Grade entered at Carlisle, 4th.

Grade at date of Discharge,

Trade or Industry,

Church, 1st Presbyterian
 miles to sch.,

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PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL *McCormey* DATE *1728* 19 *08*AGE *18* YEARS } NEW } STUDENT. TRIBE *Klamath* STATE *Calif.*
RETURNED }

DEGREE OF INDIAN BLOOD.....

INSPECTION *Good development. Gailes-bilateral*PALPATION *Normal*PERCUSSION *Normal*

AUSCULTATION {

RESONANCE *Normal*RESP. MURMUR *Normal*HEART SOUNDS *Normal*

MENSURATION {

INSP. *39*EXP. *35*RESPIRATION *22*PULSE *88*TEMPERATURE *98.6* degs.HEIGHT *5* FT. *10* IN.WEIGHT *163* LBS.VISION *10/10*VACCINATION *1728/08*

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER.....	<i>yes</i>	<i>good</i>		
MOTHER.....			<i>yes</i>	<i>Consumption</i>
BROTHERS {	<i>3</i>	<i>2 not good</i>		
SISTERS {	<i>1</i>	<i>good</i>	<i>1</i>	<i>Consumption</i>

PERSONAL HISTORY:

Have never been very sick.

REMARKS:

Had leg broken 6 yrs ago

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NAME.

TRIBE.

PARENT OR GUARDIAN.

Isaac McLowey

Klamath

DATE ENROLLED.

TERM.

AGE.

HOME ADDRESS

Dec. 25, 1908.

Five Years 18

Chas. McLowey,
Klamath

DATE OF RECORD

ACADEMIC DEPARTMENT.

INDUSTRIAL DEPARTMENT.

DORMITORY.

OUTING

SPECIAL REMARKS.

ROOM NO.

Scholarship

Conduct.

Shop.

Ability.

Conduct.

Room No.

Neatness

Conduct.

Ability.

Conduct

Deserted

