~~688,~~

3427.

# BRIEF.

## Application of

Alpha Moses

FOR THE ENROLLMENT OF

Self

IN THE INDIAN SCHOOL AT

## Carlisle, Pennsylvania

POST OFFICE ADDRESS OF APPLICANT:

Indian Falls, N. Y

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

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, of Alpha Alfred Moses (Name of child.), m (Sex.), I, Alpha Alfred Moses (Parent, guardian,, or next of kin.) of Indian Falls P. O., State of N. Y., do hereby voluntarily consent and agree to my enrollment in said school for a period of 5 (Not less than 3.) 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 Indian Falls on 1890 (Date.); that the father, William Moses (Name of father.), is (Is or was.) a full (Degree.) Indian of the Seneca Tribe located at N. Y. Agency; that he left the tribe about did not leave (Approximate date.); that the mother, Mary Moses (Name.), is (Is or was.) a full (Degree.) Indian of the Onondaga Tribe located at N. Y. Agency, and left the tribe about 1890 to 90 to Seneca (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. |
|---|---|---|---|---|---|
| Tonawanda Reservation | | 1900 | 1902 | other school | 3 |
| Oakfield Public School | | 1902 | 1902 | to go home. | 3 |
| | | | | | |

This 9 day of Feby, 1909.

Two witnesses:

Nice H. Miller

Emma M. Hetrick

Alpha Moses
(Parent, guardian, or next of kin.)

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.

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## Vouchers of Disinterested Persons.

VOUCHER No. 1.

I, ....., a ..... (Business, calling, or profession.), of

....., ....., do hereby certify that I am personally acquainted with

..... who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with ..... (Name of Child.); that 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.....

.....

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VOUCHER No. 2.

I, ....., a ..... (Business, calling, or profession.) of

....., ....., do hereby certify that I am personally acquainted with

....., who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with ..... (Name of child.); that 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 foregoing application, and found ..... to be .....

.....

.....

I therefore recommend that the said child be ..... enrolled in this school.

This ..... day of ....., 190.....

.....

*School Physician.*

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## 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 nonreservation 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 | ENGLISH NAME | AGENCY | NATION |
|---|---|---|---|
| 4057 | Alpha Moses | N. Y. | Seneca |

| BAND | INDIAN NAME | HOME ADDRESS |
|---|---|---|
| (Father.) | | Mary Moses, Ind. Falls, N. Y. |

| PARENTS LIVING OR DEAD | | BLOOD | AGE | HEIGHT | WEIGHT | FORCED INSP. | FORCED EPXR. | SEX |
|---|---|---|---|---|---|---|---|---|
| FATHER, L | MOTHER, L | Full | 19 | 5' 6¾" | 142 | | | |

| ARRIVED AT SCHOOL | FOR WHAT PERIOD | DATE DISCHARGED | CAUSE OF DISCHARGE |
|---|---|---|---|
| Oct. 5, 1908. | Five Years | Jan. 23, 1911 | Deserted |

| TO COUNTRY | PATRONS NAME AND ADDRESS | FROM COUNTRY |
|---|---|---|
| 4-29-'10 | Chas. Hulick, Robbinsville, N. J. | R.C.S. 7-5-'10 |

THE SHAW-WALKER CO., MUSKEGON. 79104

Months in school before Carlisle. 48
Tonawanda Res. 2 yrs. 3rd. Gr.
Wakfield Pub. " " "

Grade entered at Carlisle, 3rd.
4

Grade at date of Discharge,

Trade or Industry,

urch. Ind. Presbyterian

miles to sch. 3

3427

# PHYSICAL RECORD,

## CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Moses, Alpha DATE 12/9 1908

AGE 17 YEARS { NEW / RETURNED } STUDENT. TRIBE Seneca STATE N.Y.

DEGREE OF INDIAN BLOOD

INSPECTION Well developed.

PALPATION Normal

PERCUSSION Normal

AUSCULTATION { RESONANCE / RESP. MURMUR Normal

HEART SOUNDS

MENSURATION { INSP. 39 / EXP. 33 RESPIRATION 24 PULSE 72

TEMPERATURE 98¼ degs. HEIGHT 5 FT 8¼ IN. WEIGHT 155 LBS.

VISION 10/10 VACCINATION good 11/23/08

FAMILY HISTORY:

| | Living. | Condition of Health. | Dead. | Cause of death. |
|---|---|---|---|---|
| FATHER | yes | good | | |
| MOTHER | yes | good | | |
| BROTHERS | 1 | good | | |
| | | | 1 | ? |
| SISTERS | 3 | good | | |
| | | | | |

PERSONAL HISTORY: Good health

REMARKS:

(over)

HOSPITAL RECORD

EXAMINATION FOR OUTING:

| DATES: | CONDITIONS: |
| --- | --- |
| | |

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# Record of Graduates and Returned Students,

U. S. INDIAN SCHOOL, CARLISLE, PA.

July 22. 1911.

NAME Alpha Moses

1. Are you married and if so to whom? No

2. What is your present address? Syracuse N.Y. R.F.D No. 5 Box 97

3. Did you attend or graduate from any other schools after leaving Carlisle? No Give names of schools and dates if possible

4. What is your present occupation? Farm labor.

5. Tell something of your present home

6. What property in the way of land, stock, buildings, or money do you have?

7. Have you been in the Indian Service? In what positions? How long in each?

(Over)

8. What other positions have you held since leaving Carlisle? Mason

Farming.

9. Tell me anything else of interest connected with your life:

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Texas City - Jan., 25, 1917.

Name Alpha Moses
(Please give name by which enrolled and also present or married name.)

Tribe Seneca

Present Address Band 26th Infty. Texas City - Texas

Former Address R.F.D. #5, Box 97. Syracuse, N.Y.
(Address from which we heard from you last.)

Present Occupation Army Bandsman.

Remarks:

Very well satisfied.

1—567 a

Department of the Interior.

OFFICIAL BUSINESS
PENALTY FOR PRIVATE USE $300

*Mr. M. Friedman*

*Supt. U. S. Indian School*

*Carlisle*

*Pennsylvania*

6—3305

Em-658
E-3427

Dec 29, 1912

Name Alpha Moses
(Please give name by which enrolled and also present or married name.)

Tribe Seneca

Present Address Syracuse N.Y.

Former Address Syracuse N.Y.
(Address from which we heard from you last.)

Present Occupation Farming

Remarks:

1—567 a

Department of the Interior.

*Mr. M. Friedman*

*Supt. U. S. Indian School*

*Carlisle*

*Pennsylvania*

6—3305

2919

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November 13, 1916.

Mr. Alpha Moses,
Band, 26th Infantry,
Texas City, Texas.

Dear Sir:

I am enclosing herewith a check for the amount of $12.25, which is to balance your account on the books of this school. I shall appreciate it if you will immediately have this check cashed, in order to relieve us of any extra work in connection therewith.

I am enclosing herewith a franked envelope for reply, which requires no postage, and will thank you to give this matter your early attention.

Yours very truly,

CVP-RFH

Superintendent.

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Moses, Alpha — Ex-stu.

Parents correspondence — 1374

Papers Executed — 645

Concerning Re-enrollment - Edna G. Foster — 4903

"Y AND E" ROCH. 3427. REPORT AFTER LEAVING CARLISLE 563757 3M-2-11

NAME AT CARLISLE Alph Moses.

PRESENT NAME

| DATE | INFORMATION THROUGH | ADDRESS | OCCUPATION | ITEMS OF INTEREST | GRADE |
|---|---|---|---|---|---|
| 1911 | Self | ~~P.O. 115 - Box 97~~ Syracuse, N.Y. | Laborer | | |
| 1913 | " | " | Farmer | | |
| 1914 | " | 26th Infty Band Texas City, Texas | army bandsman | | |

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| NAME. | TRIBE. | PARENT OR GUARDIAN. |
|---|---|---|
| Alpha Moses | Seneca | |

| DATE ENROLLED. | TERM. | AGE. | HOME ADDRESS. |
|---|---|---|---|
| Oct. 5, 1908. | Five Years | 19 | Mary Moses, Ind. Falls, N. Y. |

| DATE OF RECORD | ACADEMIC DEPARTMENT. | | | INDUSTRIAL DEPARTMENT. | | | DORMITORY. | | | OUTING | | SPECIAL REMARKS. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | ROOM NO. | Scholarship | Conduct. | Shop. | Ability. | Conduct. | Room No. | Neatness | Conduct. | Ability. | Conduct. | |
| Jan. '09 | | | | Farm | Good | Ex | 210 | Fair | Good | | | |
| July '09 | 4 | Med. | V. Good | " | Ex | " | " | " | " | | | |
| Jan. '10 | 4 | Good | V. Good | night watch | Good | Good | 227 | Gd | Good | | | |
| July '10 | 4½ | G. | V. G. | | | | | Fair | V " | Gd | Gd | |

# OUTING RECORD — CARLISLE INDUSTRIAL SCHOOL

688

**Name of Student** Alpha Moses. **Home Address** Mary Moses, Ind. Falls N.Y. **Tribe** Seneca.

**Age at Entrance** 19 **Date of Entrance** 10-5-'08 **Shop**

**Patron** Chas. Hulick. **Locality**

**Address** Robbinsville, N.J. **R. R. Station**

**Recommended by** **Grade in School**

**Grade of Home** **Church** Ind. Presby.

**Date of Outing** 4-29-'10. **Date Returned** Ran 7-3-'10 **Wages**

| | JAN. | FEB. | MAR. | APR. | MAY | JUNE | JULY | AUG. | SEPT. | OCT. | NOV. | DEC. | TOTAL OR AVERAGE |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Days in School | | | | | | | | | | | | | |
| Conduct | | | | | G | G | | | | | | | |
| Ability | | | | | G | G | | | | | | | |
| Health | | | | | G | G | | | | | | | |
| Earnings | | | | | 10. | 14. | | | | | | | |
| | July | Aug. | Sept. | Oct. | Nov. | Dec. | Jan. | Feb. | Mar. | Apr. | May | June | |