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748.
3440.

BRIEF

(For a child not enrolled at an Agency.)

APPLICATION OF

FOR THE ENROLLMENT OF

Gilbert Cowlass

IN THE INDIAN SCHOOL AT

CARLISLE, PENNSYLVANIA

POST-OFFICE ADDRESS OF APPLICANT

Syracuse, N.Y.

Date of enrollment, _____, 190

Term of enrollment, _____ () years.

NAME OF COLLECTING AGENT:

Position, _____



Iroquois, N. Y., August 19, 1908.

This is to certify that Gilbert Powlas has attended the
Thomas Indian School at Iroquois, N. Y., from Sept. 29, 1896, to
March 2, 1907.

Halla Kells,

Matron.

APPLICATION FOR ENROLLMENT IN A NONRESERVATION SCHOOL

(For a child not enrolled at an Agency)

and in consideration of the United States, assuming the care, education, and maintenance in
 United States Indian School at Carlisle Indian, of
Gilbert Powless (Name of child) Male (Sex) David Powless (Parent, guardian, or next of kin)
 of Onon Reservation P. O., State of Wisconsin, do hereby voluntarily consent
 and agree to this 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.
Not less than 3

I further say that the said child was born at Onon Reservation on July 7 1889,
 that the father, David Powless, a non Indian of the Onon Tribe located at Onon Res Agency; that he left the tribe about Not a date,
 that the mother, Onoudaga, a non Indian of the Onon Tribe located at Onoudaga Res Agency, and left the tribe about Never; 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.	DATE OF ENROLLMENT.	DATE OF DISCHARGE.	CAUSE.	GRADE.
<u>Onon Res</u>		<u>Month of</u>		<u>5th</u>
<u>Callwaquaga</u>				

This 7th day of August, 1908

Two witnesses: Frank L. Hae Lizzie Carpenter
Parent, guardian, or next of kin
Clarence Hill P. O., Onon Reservation

(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, Frank L. Hae, do hereby swear that the statements made in the
 above application are true.

Lizzie Carpenter
 Signature of applicant Parent, guardian, or next of kin

Sworn to and subscribed before me this 7th day of August, 1908

Oliver Nichols

(NOTE:—This application and affidavit must be executed before some officer authorized to administer oaths, the parent with whom the child is living; if the parents are dead, by the guardian or next of kin.)

NOTE

Age limits, fourteen to twenty years. Preferably fourteen to eighteen. Students must be at least one-fourth Indian, preferably full Indian. Special cases beyond the age limit will be given consideration. An industrial course only can be taken and the term reduced to three years, in exceptional cases.

CERTIFICATE OF PHYSICIAN

I, Frank S Hall a practicing physician of So Mondaya

do hereby certify that I have carefully examined Gilbert Proless the child named in this application, and find that he 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 1st day of August, 1908 F S Hall, M. D.

VOUCHER OF SOLICITOR FOR SCHOOL

I hereby certify that I was present and witnessed the execution of the foregoing application made by _____; that its contents were explained or interpreted to _____ by _____; that I believe _____ understood the purport thereof; that I was present at the medical examination of the child named herein; that _____ resides with _____, in or near the town of _____; that the child can not have adequate and proper educational facilities at home for the reason that _____

Dated at _____ this _____ day of _____, 190____ Official title _____

(NOTE—This voucher must be executed by the official representative of the nonreservation school to which application is made. Pupils and Indian solicitors will not be accepted.)

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 statements therein are true; that I am acquainted with _____; 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____

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 statements
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 can not 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 exami-
(As soon after arrival as possible.)
nation 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.

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 special 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.

3440

Carlisle, Pa. September 18th, 1913

Mr. Gilbert Powlas,
Syracuse, N.Y.

Dear sir:

There is herewith enclosed check for \$6.00 closing
your account. Please sign the face of check before presenting
for payment.

Your friend,

S/N

Superintendent.

3440

CARLISLE INDIAN INDUSTRIAL SCHOOL

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

NUMBER 3960	ENGLISH NAME Gilbert Powless	AGENCY Onondaga	NATION Onondaga					
BAND	INDIAN NAME	HOME ADDRESS David Powless (Father) R.F.D.#5, Syracuse, N.Y.						
PARENTS LIVING OR DEAD		BLOOD Full	AGE Born 7-7-89	HEIGHT 5'-5 1/4"	WEIGHT 139	FORCED INSP. 38	FORCED EXPR. 34	SEX. M
FATHER, L	MOTHER, L	ARRIVED AT SCHOOL Sept. 1 - 1908		FOR WHAT PERIOD 5 yrs.	DATE DISCHARGED Jan. 23, 1911	CAUSE OF DISCHARGE Deserter		
TO COUNTRY 4-29-'09	PATRONS NAME AND ADDRESS B.B. Burroughs, Dolington, Pa.					FROM COUNTRY Ran Court 6-7-'09		

THE SHAW-WALKER CO., MUSKOGON-CHICAGO 33877

Months in school before Carlisle,

Onon. Res. & Cattaraugus - 5th Gr.
Thomas Inst. Jr. 9-29-96 to 3-2-07.

Grade entered at Carlisle, 4th.

Grade at date of Discharge,

Trade or Industry,

Church, Meth.

miles to sch.

3440

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Paulas Gilbert DATE 12/16 1908

AGE 19 YEARS } NEW STUDENT. TRIBE Onondaga STATE Ny.

DEGREE OF INDIAN BLOOD.....

INSPECTION Well developed.

PALPATION Normal

PERCUSSION Normal

AUSCULTATION { RESONANCE.....
RESP. MURMUR Normal

HEART SOUNDS.....

MENSURATION { INSP. 38..... RESPIRATION 18 PULSE 70
EXP. 34.....

TEMPERATURE 98 degs. HEIGHT 5 FT 4 1/2 IN. WEIGHT 147 1/2 LBS.

VISION 19/20 VACCINATION good 12/23/08

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER.....	<u>yes</u>	<u>good</u>		
MOTHER.....	<u>yes</u>	<u>good</u>		
BROTHERS {	<u>1</u>	<u>good</u>		
SISTERS {	<u>2</u>	<u>good</u>	<u>1</u>	<u>?</u>

PERSONAL HISTORY:
Has had cough for past 3 weeks

REMARKS:
.....
.....
.....

HOSPITAL RECORD.....

EXAMINATION FOR OUTING:

DATES:

April 5, 1909.

CONDITIONS:

good

Powlas-Gilbert 3440 Cox-stre.

Patron - B. B. Burroughs - file 1472