

3481

NAME. *Charles Hicks*

TRIBE. *Klamath*

PARENT OR GUARDIAN

DATE ENROLLED. *Sept. 15, '05*

TERM. *Five Years*

AGE. *17*

HOME ADDRESS. *Chas. Hicks,  
Ft. Jones, Cal.*

DATE OF RECORD

ACADEMIC DEPARTMENT.  
ROOM NO. Scholarship Conduct.

INDUSTRIAL DEPARTMENT.  
Shop. Ability. Conduct.

DORMITORY.  
Room No. Neatness Conduct.

OUTING  
Ability. Conduct.

SPECIAL REMARKS.

*Jan:09*

*Deserter*

3481

CARLISLE INDIAN INDUSTRIAL SCHOOL

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

NUMBER 3447		ENGLISH NAME Chas. Wicks			AGENCY		NATION Klamath		
BAND		INDIAN NAME			HOME ADDRESS Charles Wicks St Jones, Cal.				
PARENTS LIVING OR DEAD		BLOOD	AGE	HEIGHT	WEIGHT	FORCED INSP	FORCED EXPR.	SEX.	
FATHER: Living		MOTHER: Dead 1/2	17	6 1/4	165	37	34	M.	
ARRIVED AT SCHOOL Sept. 15 - '05		FOR WHAT PERIOD 5 yrs.		DATE DISCHARGED 11-19-'10		CAUSE OF DISCHARGE Time out			
TO COUNTRY		PATRONS NAME AND ADDRESS					FROM COUNTRY		
4-27-06		Geo. S. Eudslaw, Mt. Joy, Pa					9-2-06		
5-21-08		Ran							

THE SHAW-WALKER CO., MUSKOGON-CHICAGO 33877

Months in school before Carlisle, .....

Grade entered at Carlisle, ..... 5<sup>th</sup> .....

Grade at date of Discharge, .....

Trade or Industry, .....

Church, ..... Catholic .....

miles to sch, .....

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CONSENT OF

*Chas. Wicks*

FOR THE ENROLLMENT OF

*Chas. Wicks*

IN THE INDIAN SCHOOL AT

*Carlisle, Penna.*

For a term of.. *five*.... years.

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Name of Agency or place from which pupil came:

*Fort Jones, Calif.*

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

Date of discharge, ....., 190...

Cause of discharge, .....

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932, 3481

x

### Application For Enrollment In a Nonreservation School.

Full name of child, Charles Wicks Indian name is \_\_\_\_\_  
 Name of father, Charles Wicks  
 Name of mother, Maggie Wicks Tribe, Klamath  
 Reservation, \_\_\_\_\_ Degree of Indian blood of child, one fourth  
 Is either parent white, if so, which? no Are either or both allotted? \_\_\_\_\_  
 On what reservation? \_\_\_\_\_ Age of child, 17 yrs What reservation school attended? Hoopa cal. How long? 2 yrs  
 If ever enrolled in a nonreservation school, name of school, \_\_\_\_\_  
 When? \_\_\_\_\_ How long? \_\_\_\_\_ If ever dismissed from a school, where, \_\_\_\_\_; when, \_\_\_\_\_ and for what reason? \_\_\_\_\_

(Signed) Charles Wicks

NOTE—The above blank to be signed by the child, if old enough to understand its import; if not, by the parent, guardian, or other person cognizant of the facts.

#### CONSENT BLANK.

I, Charles Wicks parent, guardian, or next of kin of the above named child, Charles Wicks, do hereby consent to his transfer or enrollment for a period of five years (not less than three years) in the Indian School at Carlesle Pa Dated at Yreka on the 8th day of Sept, 1903  
 (Signed) Chas. Wicks  
 PARENT, GUARDIAN, OR NEXT OF KIN.

#### PHYSICIAN'S CERTIFICATE.

I hereby certify that I have personally examined the above-named Charles Wicks and have found him physically sound, and recommend the transfer so far as his health conditions are concerned. Dated at Yreka Calif on the 8th day of Sept, 1903  
 (Signed) J. J. McQuitty M.D.

#### AGENT'S OR SUPERINTENDENT'S INDORSEMENT.

\_\_\_\_\_ 1903  
 The statements concerning the above-named \_\_\_\_\_ are believed by me to be correct, and I hereby recommend the transfer.  
 (Signed) \_\_\_\_\_  
 U. S. Indian Agent or Superintendent.

Card made

Wicks, Chas. 3481 Ex-sto.  
Correspondence-money sent-

4833

