

CARLISLE INDIAN INDUSTRIAL SCHOOL
 DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

3499

NUMBER 6078	ENGLISH NAME Hannibal Gordon	AGENCY Cattaraugus Res.	NATION Seneca	
BAND	INDIAN NAME	HOME ADDRESS Cordelia Gordon, R. F. D. Irving, N. Y.		
PARENTS LIVING OR DEAD	BLOOD F	AGE 12-7-92	HEIGHT 5' 10 3/4"	WEIGHT 154
FATHER, D	MOTHER, L	FORCED INSP. 38 2	FORCED EXPR. 36	SEX. M
ARRIVED AT SCHOOL Feb. 24, 1910	FOR WHAT PERIOD Five Years	DATE DISCHARGED Jan. 23, 1911	CAUSE OF DISCHARGE Deserter	
TO COUNTRY 3-3-'10	PATRONS NAME AND ADDRESS Ran			FROM COUNTRY

THE SHAW-WALKER CO., MUSKOGEE. 79104

Months in school before Carlisle,
Common Sch. Chautauqua Co., N. Y.
Quaker Sch. Tuscarora, N. Y.
 Grade entered at Carlisle, *2nd Reg.*
 Grade at date of Discharge,
 Trade or Industry,
 Church,
Miles to sch.

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL *Gordon, Hambee* DATE *Feb. 17* 19 *10*

AGE *17* YEARS { NEW { STUDENT. *Cataragus* STATE *N. Y.*

DEGREE OF INDIAN BLOOD *Full*

INSPECTION *Good development.*

PALPATION *Normal*

PERCUSSION *Normal.*

AUSCULTATION { RESONANCE *Normal*

{ RESP. MURMUR *Normal*

HEART SOUNDS *Normal*

MENSURATION { INSP. *38 1/2*

{ EXP. *36* RESPIRATION *18* PULSE *76*

TEMPERATURE *99.5* degs. HEIGHT *5* FT *10 3/4* IN. WEIGHT *154* LBS.

VISION *10/10* VACCINATION *Feb. 17/10*

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER			<i>yes</i>	<i>?</i>
MOTHER	<i>yes.</i>	<i>Good</i>		
BROTHERS {	<i>3</i>	<i>Good</i>		
SISTERS {	<i>2</i>	<i>Good</i>	<i>3</i>	<i>?</i>

PERSONAL HISTORY:

Always in good health

REMARKS:

HOSPITAL RECORD.

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Gordon, Lemmibl DATE Feb. 17, 1910.

AGE 17 YEARS { NEW { STUDENT. TRIED Waterbury STATE NY
RETURNED

DEGREE OF INDIAN BLOOD Full

INSPECTION Good development

PALPATION Normal

PERCUSSION Normal

AUSCULTATION { RESONANCE Normal
RESP. MURMUR Normal

HEART SOUNDS Normal

MENSURATION { INSP. 38 1/2
EXP. 36 RESPIRATION 18 PULSE 76

TEMPERATURE 99.6 degs. HEIGHT 5 FT 10 3/4 IN. WEIGHT 154 LBS.

VISION 20/20 VACCINATION Feb. 17/10

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER			yes	4
MOTHER	yes	good		
BROTHERS {	3	good		
SISTERS {	2	good	3	9

PERSONAL HISTORY:

Always in good health.

REMARKS:

3499

5-192

BRIEF.

APPLICATION OF

FOR THE ENROLLMENT OF

Hannibal Gordon.

IN THE INDIAN SCHOOL AT

POST OFFICE ADDRESS OF APPLICANT:

Date of enrollment, _____, 190

Term of enrollment, *Five* (*5*) years.

NAME OF COLLECTING AGENT:

Position, _____

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 Ramibal Gordon, male, I, Cordelia Gordon, of Irving P. O., State of New York, do hereby voluntarily consent and agree to his enrollment in said school for a period of five 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 Cattaraugus Res. on Dec. 7, 1892; that the father, Andrew Gordon, was a full-blood Indian of the Seneca Tribe located at Cattaraugus Res. Agency; that he left the tribe about ; that the mother, Cordelia Gordon, is a full-blood Indian of the Seneca Tribe located at Cattaraugus Res. Agency, and left the tribe about ; 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>Common School</u>	<u>Cattaraugus Co. N.Y.</u>				
<u>Snaker School</u>	<u>Senesaca</u>	<u>1907</u>	<u>1908</u>	<u>illness</u>	

This 24th day of January, 1900

Two witnesses:

Alta J. AldenCordelia Gordon.

(Parent, guardian, or next of kin.)

Ida L. BurrP. O., R. F. D. Irving, N. Y.

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

Cordelia Gordon.

(Signature of applicant.)

(Parent, guardian, or next of kin.)

Sworn to and subscribed before me this 24th day of January, 1900

Ida L. Burr - Notary Public.

(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. D. Luke, a practicing physician of Gowanda,
N.Y., do hereby certify that I have carefully examined Samuel Gordon,
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 24 day of Jan., 1900, A. D. Luke, 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
(Parent, guardian, or next of kin.)
by _____; that I believe _____ understood the purport
(Name of interpreter.)
thereof; that I was present at the medical examination of the child named herein; that _____
resides with _____, in or near the town of _____;
(Name of person—parent, guardian, etc.)
that the child can not have adequate and proper educational facilities at home for the reason that

Dated at _____

this _____ day of _____, 190_____
(Offeral 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 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_____
6-871

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 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.

3499

NAME.

TRIBE.

PARENT OR GUARDIAN.

Hannibal Gordon Seneca

DATE ENROLLED.

TERM.

AGE.

HOME ADDRESS

Feb. 24, 1910. Five Years. 17

Lordelia Gordon,
R. F. D. Irving, N. Y.

DATE OF RECORD

ACADEMIC DEPARTMENT.

INDUSTRIAL DEPARTMENT.

DORMITORY.

OUTING

SPECIAL REMARKS.

ROOM
NO.

Scholarship

Conduct.

Shop.

Ability.

Co nduct.

Room
No.

Neatness

Conduct.

Ability.

Conduct

July '10 3

Fair Fair

Hannibal Gordon

PRESENT NAME