

3581

CARLISLE INDIAN INDUSTRIAL SCHOOL
DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

NUMBER 5059	ENGLISH NAME David Gilstrap	AGENCY	NATION Cherokee	
BAND	INDIAN NAME	HOME ADDRESS (Moth.) Lou Gilstrap Evanston, Ill.		
PARENTS LIVING OR DEAD	BLOOD 3/8	AGE 15	HEIGHT 5' 3 3/4"	WEIGHT 126
FATHER, <i>D</i>	MOTHER, <i>R</i>	FORCED INSP. 33	FORCED EPXR. 31	SEX. M
ARRIVED AT SCHOOL Sept. 7, 1909	FOR WHAT PERIOD Five Years	DATE DISCHARGED June 29, 1911	CAUSE OF DISCHARGE Office request	
TO COUNTRY 4-6-'10	PATRONS NAME AND ADDRESS Mrs. Maple, Princeton, R. F. D. N. J.			FROM COUNTRY 8-31-11

THE SHAW-WALKER CO., MUSKOGEE, 79104

Months in school before Carlisle,

Greenville Pub. S.C. '04-'05 - end. Gr.

Grade entered at Carlisle, *Not...*

3

Grade at date of Discharge,

Trade or Industry,

Church, *Baptist*

Miles to sch.

G-3581

March, 25, 1913

Name David F. Gulstrap
(Please give name by which enrolled and also present or married name.)

Tribe Cherokee Indian.

Present Address Fort Benton, Montana.

Former Address Evanston, Ill.
(Address from which we heard from you last.)

Present Occupation Carpenter Work.

Remarks: I am getting ^{along} very nicely on my allotment near Fort Benton.

1-567 a

Department of the Interior.



Mr. M. Friedman

Supt. U. S. Indian School

Carlisle

Pennsylvania

3081

TRADE RECORD, CARLISLE.

JAN 1 1911
Jan. 1, 19..... to June 30, 19.....

PUPIL *David Gilstrap*

TRADE *Steamfitting*

ABILITY *Good*

CONDUCT *Good*

REMARKS

INSTRUCTOR *H. F. Weber*

TRADE RECORD, CARLISLE.

Jan. 1, 19¹⁰ to June 30, 19¹⁰.

PUPIL

David Gilstrapp

TRADE

Carriage Wood Worker

ABILITY

Fair

CONDUCT

Good

REMARKS

INSTRUCTOR

Martin L Lane

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PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Hilstrup David DATE Mar 22 1910AGE 16 YEARS { NEW RETURNED } STUDENT. TRIBE Cherokee STATE N.C.DEGREE OF INDIAN BLOOD good development

INSPECTION

PALPATION NormalPERCUSSION NormalAUSCULTATION { RESONANCE Normal
RESP. MURMUR NormalHEART SOUNDS NormalMENSURATION { INSP. 34 1/2
EXP. 31 RESPIRATION 24 PULSE 82TEMPERATURE 99 degs. HEIGHT 5 FT. 3 IN. WEIGHT 136 1/2 LBS.VISION 10/15 VACCINATION good scar

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>4</u>	<u>good</u>		
SISTERS {	<u>5</u>	<u>good</u>		

PERSONAL HISTORY:

REMARKS:

(over)

HOSPITAL RECORD.....

EXAMINATION FOR OUTING:

DATES:

CONDITION:

5 mch 22 - 1910

Good

Silstraps klavid

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Mother's file

2319

Brother's file - Willia Silstraps

4023

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PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL *Hilstrap, David* DATE *Oct 7* 19 *09*AGE *15* YEARS { NEW { STUDENT. TRIBE *Cherokee* STATE *N. C.*
{ RETURNED }DEGREE OF INDIAN BLOOD *1/4*INSPECTION *Good development.*PALPATION *normal*PERCUSSION *normal*AUSCULTATION { RESONANCE *normal*{ RESP. MURMUR *normal*HEART SOUNDS *normal*MENSURATION { INSP. *33 1/2* RESPIRATION *24* PULSE *84*{ EXP. *31*TEMPERATURE *98* degs. HEIGHT *5* FT *3 3/4* IN. WEIGHT *126* LBS.VISION *10/10* VACCINATION *Good scar 1905*

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER	<i>yes</i>	<i>good</i>		
MOTHER	<i>yes</i>	<i>good</i>		
BROTHERS {	<i>4</i>	<i>good</i>		
SISTERS {	<i>5</i>	<i>good</i>		

PERSONAL HISTORY:

never had any serious illness

REMARKS:

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PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL *Gilstrap, David* DATE *Mar. 22 1910*

AGE *16* YEARS { NEW STUDENT. TRIBE *Cherokee* STATE *N. C.*

DEGREE OF INDIAN BLOOD *Good development*

INSPECTION

PALPATION *Normal*

PERCUSSION *Normal*

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

HEART SOUNDS *Normal*

MENSURATION { INSP. *34 1/2*
EXP. *31* RESPIRATION *24* PULSE *82*

TEMPERATURE *99* degs. HEIGHT *5-3* FT. *3* IN. WEIGHT *136 1/2* LBS.

VISION *10/15* VACCINATION *good scar*

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER	<i>yes</i>	<i>good</i>		
MOTHER	<i>yes</i>	<i>good</i>		
BROTHERS { <i>4</i>	<i>..</i>	<i>..</i>		
SISTERS { <i>5</i>	<i>yes</i>	<i>good</i>		

PERSONAL HISTORY:

REMARKS:

Record of Graduates and Returned Students,

U. S. INDIAN SCHOOL, CARLISLE, PA.

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July 21/1912

1912

NAME

David J. Gilstrap

1. Are you married and if so to whom?

I am not married

at the present time I am only 19 age

2. What is your present address?

Fort Benton Montana

3. Did you attend or graduate from any other schools after leaving Carlisle?

Give names of

schools and dates if possible

I did not attend any other school after leaving Carlisle.

4. What is your present occupation?

My present occupation is a cow boy on Mr. W. R. Emberton ranch

5. Tell something of your present home

I am well pleased with my new home all except one thing there no schools here at the present

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

I have 160 acres of land one span of horses, but no cash at the present

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

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

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

Dear Sir:

I am trying to make a man
of my self among the people out
here they have grate interest in me
they know a great many of the Carlisle
boys.

I have not education to make a lawyer
or a doctor or some other grate man
but I am trying to learn all I can about
common things, as I am a cow boy at
the present time but I hope to get
on my own ranch soon.

I have not much to say but
Fort Bent a grate little town:

I would have answer your letter
some time ago but I just come back from
the roundup yesterday I am very tired
and as far as I can be so I shall come to
close for this time With Best wishes
to you and my dear old Carlisle may her remembrance never die.

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BRIEF.

Application of

Lou Gilstrap, mother

FOR THE ENROLLMENT OF

David Franklin Gilstrap

IN THE INDIAN SCHOOL AT

Carlisle, Pennsylvania

POST OFFICE ADDRESS OF APPLICANT:

915 Foster St. Evanston, Ill.

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 Canfiske, Pa, of David Franklin Gilstrap, I. (Name of child.) male (Sex.) Lou Gilstrap (Parent, guardian, or next of kin.) Mother of Evauston P. O., State of Illinois, do hereby voluntarily consent and agree to one 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. (Not less than 3.)

I further say that the said child was born at Greenville, S. Carolina on Dec 1st 1894 (Date.) that the father, George Gilstrap (Name of father.) not an (Is or was.) Indian (Degree.) of the _____

Tribe located at _____ Agency; that he left the tribe about _____ (Approximate date.)

that the mother, Lou Gilstrap (Name.) a 3/4 (Is or was.) (Degree.) Indian of the Cherokee

Tribe located at N. Carolina Agency, and left the tribe about not known (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.
<u>Greenville Public</u>	<u>S. Carolina</u>	<u>Sept. 1904</u>	<u>June 1905</u>	<u>Love</u>	<u>2nd</u>

This 26th day of August, 1909

Two witnesses:

Bertha Lee
Minne Eders

Lou Gilstrap x
(Parent, guardian, or next of kin.)
P. O. Evauston Ill

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

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

Sworn to and subscribed before me this 26th day of August, 1909

Charles Bright Notary Public
Comm. Expires June 5th 1913

(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, RW Bartolomew, a practicing physician of Evanston Ill, do hereby certify that I have carefully examined David Franklin Gilstrap 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 25 day of Aug, 1909 RW Bartolomew, M. D.

Vouchers of Disinterested Persons.

VOUCHER No. 1.

I, Otto A Daniel, a Druggist, of Evanston, Ill., do hereby certify that I am personally acquainted with David Franklin Gilstrap who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with David Franklin Gilstrap 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 of insufficient means.
This 25th day of August 1909 Otto A Daniel

VOUCHER No. 2.

I, Helen M Jewell, a probation officer of Evanston Ill, do hereby certify that I am personally acquainted with David Franklin Gilstrap who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with David Franklin Gilstrap; 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 his parents are not financially able to keep him in school.
This 25th day of August, 1909 Helen M Jewell

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.

OUTING RECORD — CARLISLE INDUSTRIAL SCHOOL

505-

Name of Student *David Gilstrap* Home Address *Lou. Gilstrap Evanston, Ill.* Tribe *Cherokee*

Age at Entrance *15* Date of Entrance *9-7-09* Shop _____

Patron _____ Locality _____ Days in School _____

Address *Ins. Maple* R. R. Station _____ Conduct _____

Recommended by *Princeton, N. J.* Grade in School _____ Ability _____

Grade of Home _____ Church *Baptist* Health _____

Date of Outing *4-6-'10* Date Returned *8-31-'10* Wages _____ Earnings _____

July Aug Sept Oct Nov Dec Jan Feb Mar Apr May June