

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
FATHER, <i>D</i>	MOTHER, <i>L</i>	WEIGHT 126	FORCED INSP. 33
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	PATRON'S 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 - 2nd. yr.

Grade entered at Carlisle, .....

Not  
3

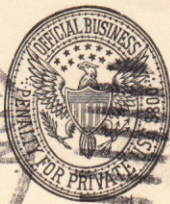
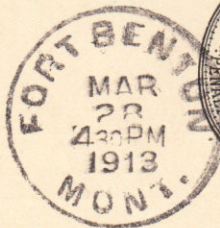
Grade at date of Discharge, .....

Trade or Industry, .....

Church, Baptist .....

miles to sch.

## Department of the Interior.



Mr. M. Friedman

Supt. U. S. Indian School

Carlisle

Pennsylvania

6-3305

*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 <sup>along</sup> very nicely on my  
allotment near Fort Benton.*

# TRADE RECORD, CARLISLE.

Jan. 1, 19~~10~~ to June 30, 19~~10~~

PUPIL *David Gilstrap*

TRADE *Blacksmith*

ABILITY *Poor*

CONDUCT *Fair*

REMARKS

INSTRUCTOR *W. B. Shambaugh*

3581

# 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, 19<sup>10</sup> to June 30, 19<sup>10</sup>.

PUPIL

David Gilshuff

TRADE

Carriage Wood Worker

ABILITY

Fair

CONDUCT

Good

REMARKS

INSTRUCTOR

Martin L Lane

3581

# PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Gilstrap David DATE Mar 22 1910

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

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 FT. 3 IN. WEIGHT 136 1/2 LBS.

VISION 12/15 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:

HOSPITAL RECORD.....

EXAMINATION FOR OUTING:

DATES:

CONDITION:

4mch 22 - 1910

Good

3581

PARENT OR GUARDIAN.

Cherokee

HOME ADDRESS

HOME ADDRESS *Box 51234*  
*(mch.) Evanston, Ill.*

SPECIAL REMARKS.

Ability.	Conduct
----------	---------

\_\_\_\_\_

Good	Good
------	------

1

--	--

3581

# PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Hilstraps, David DATE Oct 7 1909

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  
EXP. 31 RESPIRATION 24 PULSE 84

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	<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:

never had any serious illness

## REMARKS:

**EXAMINATION FOR OUTING:**

3581

# PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Gilstrap, David DATE Mar. 22 1910

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

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 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>1</u>	<u>1</u>		
SISTERS { <u>5</u>	<u>yes</u>	<u>good</u>		

PERSONAL HISTORY:

REMARKS:

# Record of Graduates and Returned Students,

U. S. INDIAN SCHOOL, CARLISLE, PA.

3581

July 21/16

191.2

NAME

David J. Hiltrop

1. Are you married and if so to whom? I am not married

at the present time I am only 19 yrs.

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 are 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 and

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 great 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 great 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 great little town.

I would have answered your letter  
some time ago but I just came 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.

35-87

**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 Carlisle, 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 Cherokee Tribe located at \_\_\_\_\_ Agency; that he left the tribe about \_\_\_\_\_ (Approximate date.) that the mother, Lou Gilstrap (Name.) a 3/4 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, 190 9

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, 190 9

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, R. W. Bartolomew, a practicing physician of Evansston,  
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 R. W. Bartolomew, M. D.

### Vouchers of Disinterested Persons.

#### VOUCHER No. 1.

I, Otto A. Daniel, a Druggist, of  
Evansston, Ill., do hereby certify that I am personally acquainted with  
David Franklin Gilstrap who makes the foregoing application; that I believe his state-  
ments therein are true; that I am acquainted with David Franklin Gilstrap, 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 of insufficient  
means.

This 25<sup>th</sup> day of August 1909 Otto A. Daniel

#### VOUCHER No. 2.

I, Helen M. Jewell, a probation officer of  
Evansston, Ill., do hereby certify that I am personally acquainted with  
David Franklin Gilstrap who makes the foregoing application; that I believe his state-  
ments therein are true; that I am acquainted with David Franklin Gilstrap; 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 cannot receive proper and adequate schooling at home for the reason that his parents  
are not financially able to keep him  
in school.

This 25<sup>th</sup> 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

JAN.	FEB.	MAR.	APR.	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.	TOTAL OR AVERAGE
------	------	------	------	-----	------	------	------	-------	------	------	------	------------------

Patron *Jno. Maple.* Locality *Princeton, N. J.*

Days in School

Address *Princeton, N. J.* R. R. Station *Frenton.*

Conduct

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

Ability

Grade of Home *Baptist.* Church

Health

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

Earnings

<i>July</i>	<i>Aug</i>	<i>Sept</i>	<i>Oct</i>	<i>Nov</i>	<i>Dec</i>	<i>Jan</i>	<i>Feb</i>	<i>Mar</i>	<i>Apr</i>	<i>May</i>	<i>June</i>

## OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

[illegible]

NAME AT CARLISLE

David Gilstrap

PRESENT NAME

Gilstrap David

3581

Mother's file

2319

Brother's file - William Gilstrap

4023