

3407

Jan 20, 1914, 191

Name Jesse Beave Hawker Jesse Gabriel,  
(Please give name by which enrolled and also present or married name.)

Tribes Sioux.

Present Address Cut Meat, S. Dak.

Former Address \_\_\_\_\_  
(Address from which we heard from you last.)

Present Occupation horse raising.

Remarks: I had worked at my trade (Tailor) the past 2 yrs. at Kansas City, Kans, I am staying home at the present time.

1-567 a

Department of the Interior.



Mr. M. Friedman

Supt. U. S. Indian School

Carlisle

Pennsylvania

✓  
3602

Feb. 9<sup>th</sup>, 1914.

Name Jesse Brave Hawk, or Jesse Gabriel.  
(Please give name by which enrolled and also present or married name.)

Tribes Sioux.

Present Address Cut Meat, S. Dak.

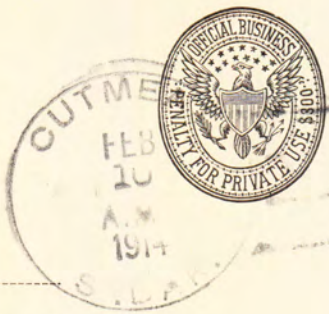
Former Address \_\_\_\_\_  
(Address from which we heard from you last.)

Present Occupation I am working on a range at the present time.

Remarks: also, I had worked at my trade, in that of tailor, for nearly 2 years. I wish you much success.

1-567 a

Department of the Interior.



Mr. M. Friedman

Supt. U. S. Indian School

Carlisle

Pennsylvania

3602 CARLISLE INDIAN INDUSTRIAL SCHOOL  
 DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

*Jesse Gabriel*

NUMBER <i>6138</i>	ENGLISH NAME <i>Jesse Bravehawk</i>	AGENCY <i>Rosebud</i>	NATION <i>Sionx</i>				
BAND	INDIAN NAME	HOME ADDRESS <i>Brave Hawk Cut Meat, S. Dak.</i>					
PARENTS LIVING OR DEAD	BLOOD <i>Full</i>	AGE <i>21</i>	HEIGHT <i>5'7½"</i>	WEIGHT <i>127</i>	FORCED INSP. <i>34½</i>	FORCED EPXR. <i>32</i>	SEX. <i>M.</i>
FATHER <i>L</i>	MOTHER <i>L</i>	ARRIVED AT SCHOOL <i>Sept. 76, 1910</i>		FOR WHAT PERIOD <i>One year</i>	DATE DISCHARGED <i>June 23, '11</i>	CAUSE OF DISCHARGE <i>Failed to return</i>	
TO COUNTRY <i>5-22-11</i>	PATRONS NAME AND ADDRESS <i>On leave</i>					FROM COUNTRY	

THE SHAW-WALKER CO., MURKIN. 79104

Months in school before Carlisle, *70*

Grade entered at Carlisle, *4*

Grade at date of Discharge, .....

Trade or Industry, .....

Church, *Catholic*

Miles to school - *30*

3602

# PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Brave Hawk, Jessie DATE 9/20 1910

AGE 21 YEARS { NEW RETURNED } STUDENT. TRIBE Sisix STATE S. Dakota

DEGREE OF INDIAN BLOOD full

INSPECTION Good development

PALPATION Normal

PERCUSSION Normal

AUSCULTATION { RESONANCE Normal

{ RESP. MURMUR Normal

HEART SOUNDS Normal

MENSURATION { INSP. 34 1/2 RESPIRATION \_\_\_\_\_ PULSE \_\_\_\_\_  
EXP. 32

TEMPERATURE \_\_\_\_\_ degs. HEIGHT 5 FT. 7 1/2 IN. WEIGHT 127 LBS.

VISION \_\_\_\_\_ VACCINATION Good

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>2</u>	<u>yes</u>	<u>good</u>	
	<u>0</u>			
SISTERS {	<u>3</u>	<u>yes</u>	<u>good</u>	
	<u>0</u>			

PERSONAL HISTORY: General Health Good.

REMARKS:



NAME Jesse Brave Hawk. Sex  Male.  Female.

Tribes  Full  Part Broke Sioux State South Dakota Date Aug. 29, 1910

Age 21 years Respiration 18 Condition of, Eyes Good

Height 5 ft. 8 1/4 ins. Mensuration { Insp. 34 1/2 Ears Good

Weight 127 lbs. { Exp. 31 1/2 Throat Good

Temperature 99 Vaccination Yes Cervical glands Normal

Pulse 84 Vision Good Skin Normal

Inspection Normal

Palpation Normal

Percussion Normal

Auscultation Normal

Heart Normal

(Menstruation) \_\_\_\_\_

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	1	Good		
Mother	1	Good		
Brothers 2	2	Good		
Sisters 3	3	Good		

Personal history Boarding school has been attended by him for 17 years.

Has good health

Present condition Good

Samuel A. Tate, M. D.

This form is for the record of the physical condition of pupils of boarding or nonreservation Indian schools. It should be filled in by the school physician at the time of the admission of the pupil.

Physicians in the field should use this form to record the examination of pupils for transfer to nonreservation schools. It should accompany the pupils' transfer blanks.

The reverse side is intended as a card-index case-record for use by all Service physicians.



3602

5-192 a.

BRIEF.

APPLICATION OF

**Jesse Brave Hawk**

FOR THE ENROLLMENT OF

**Himself**

IN THE INDIAN SCHOOL AT

**Carlisle, Pa.**

NAME OF AGENCY FROM WHICH PUPIL CAME:

**Rosebud, S. D.**

Date of enrollment, **September**, 19**10**

Term of enrollment, **one** (**1**) years.

NAME OF COLLECTING AGENT:

Position, \_\_\_\_\_



## APPLICATION FOR ENROLLMENT IN A NONRESERVATION SCHOOL.

(For a child enrolled at an Agency.)

For and in consideration of the Government of the United States assuming the care, education, and maintenance in the United States Indian School at \_\_\_\_\_

Carlisle, Pa.

of Jesse Brave Hawk ; male ; date of birth Oct. 1889 ;  
(Name of child.) (Sex.)

Sioux  
(Tribe.)

NAME OF FATHER. (Both Indian and English.)	LIVING OR DEAD.	TRIBE.	BAND.	DEGREE OF INDIAN BLOOD.
<u>Brave Hawk</u>	<u>L</u>	<u>Sioux</u>		<u>Full</u>
NAME OF MOTHER.				
<u>White Cow</u>	<u>L</u>	<u>"</u>		<u>Full</u>

I, Jesse Brave Hawk, do hereby voluntarily consent and agree to my  
(Parent, guardian, or next of kin.)  
 enrollment in said school for a period of one years, and also obligate myself to abide by  
(Not less than 3.)  
 all the rules and regulations for Indian schools.

The said child has been enrolled in the following schools:

NAME OF SCHOOL.	DATE OF ENROLLMENT.	DATE OF DISCHARGE.	CAUSE.	GRADE.
1. <u>Rosebud Boarding</u>	<u>1899</u>	<u>1906</u>		
2.				
3.				
4.				

Jesse Brave Hawk  
(Parent, guardian, or next of kin.)

P. O. address: Cut Meat, S. D.

Two witnesses:

PHYSICIAN'S CERTIFICATE.

I hereby certify that I have this day carefully examined the above-named child herein proposed for transfer and find him to be in proper physical condition to attend school, and not afflicted with tuberculosis or any disease which would be a menace to the health of other pupils.

This 29<sup>th</sup> day of Aug, 1900.

Samuel A. Tate

Physician at Rosebud Agency.

CERTIFICATE OF AGENT OR BONDED SUPERINTENDENT.

I hereby certify that the statements made in the foregoing application and certificate, to the best of my knowledge and belief, are true; that the consent of Jesse Brave Hawk was voluntary, and I recommend the transfer of the said child. (Parent, guardian, or next of kin.)

This 10<sup>th</sup> day of Sept, 1900

J. B. Woods  
Agent or Superintendent.

CERTIFICATE OF SCHOOL PHYSICIAN.

I hereby certify that on \_\_\_\_\_, I made a careful examination of the physical condition of \_\_\_\_\_, the child named in the foregoing application, and found \_\_\_\_\_ to be \_\_\_\_\_

(As soon after arrival as possible.)

I therefore recommend that the said child be \_\_\_\_\_ enrolled in this school.

This \_\_\_\_\_ day of \_\_\_\_\_, 190

\_\_\_\_\_  
School Physician.

SPECIAL NOTE.

This form must be executed in duplicate when a child is transferred from a reservation to a nonreservation school. The Superintendent of the nonreservation school will retain the original for his files, and the duplicate shall be deposited in the Agency records. The agent will then send to the Commissioner of Indian Affairs his certificate as provided by law. All the blanks must be properly filled in every case.

If the information called for on any part of the blank is not known, that fact should be stated. No space should be left unfilled. Whether the parents are living or dead, their names must be given.

The person who signs the blank as consenting to the transfer should indicate his relation to the applicant by marking out the word "parent," "guardian," or "next of kin," leaving unmarked only the title appropriate to the signer.

## INDORSEMENTS.

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The laws relating to the transfer of Indian children from reservations and schools are as follows:

That hereafter no Indian child shall be sent from any Indian reservation to a school beyond the State or Territory in which said reservation is situated without the voluntary consent of the father or mother of such child if either of them are living, and if neither of them are living without the voluntary consent of the next of kin of such child. Such consent shall be made before the agent of the reservation, and he shall send to the Commissioner of Indian Affairs his certificate that such consent has been voluntarily given before such child shall be removed from such reservation. And it shall be unlawful for any Indian agent or other employee of the Government to induce, or seek to induce, by withholding rations or by other improper means, the parents or next of kin of any Indian to consent to the removal of any Indian child beyond the limits of any reservation. (28 Stats., p. 906.)

*Provided*, That hereafter no Indian child shall be taken from any school in any State or Territory to a school in any other State against its will or without the written consent of its parents. (29 Stats., p. 348.)

The rules provide that—

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.

An Indian boy or girl 18 years old and over may, without the consent of parents or others, personally sign the application form on its being changed to suit the case; but in all cases where the parents are living they should first be consulted.

This form is to be used only in transfers from reservations or Indian schools to nonreservation schools.

3602  
Original returned mail

Jan 25, 1915.

191

Name Jesse Brave Hawk, Gabriel.  
(Please give name by which enrolled and also present or married name.)

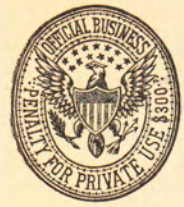
Present Address Curt Meak, S. Dak.

Present Occupation Tailor.

Remarks: Had worked at Valentine, Neb. but on account of my health I am staying home since (Sept). Will take up my job by first of next month, provided my health improve.

1-567 a

Department of the Interior.



Mr. O. H. Lipps

Supt. U. S. Indian School

Carlisle

Pennsylvania

3602

# TRADE RECORD, CARLISLE.

JUL 1 1910

JAN 1 1911

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

PUPIL Jesse Breckhawk

TRADE Tailoring

ABILITY good

CONDUCT excellent

REMARKS .....

INSTRUCTOR Wm. Townsend

Brave hawk, Jesse  
Father - Mr. Bravehawk

3602

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3602

REPORT AFTER LEAVING CARLISLE

NAME AT CARLISLE

Jesse Bravchank

PRESENT NAME

DATE	INFORMATION THROUGH	ADDRESS	OCCUPATION	ITEMS OF INTEREST	GRADE
1914	Self	Cut Meat, S.D.	Spraiser		
1915	"	" "	Sailor		