

CARLISLE INDIAN INDUSTRIAL SCHOOL

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

3649

NUMBER 6263	ENGLISH NAME Joseph Bonchard	AGENCY	NATION Kootenai	
BAND	INDIAN NAME	HOME ADDRESS Joseph Bonchard Ronan, Mont.		
PARENTS LIVING OR DEAD	BLOOD 1/8	AGE 19	HEIGHT 5-9 3/4	WEIGHT 150 1/2
FATHER, L	MOTHER, L	FORCED INSP. 38 1/2	FORCED EPXR. 36	SEX. M.
ARRIVED AT SCHOOL Dec. 5, 1910	FOR WHAT PERIOD Five years	DATE DISCHARGED 9-18-11	CAUSE OF DISCHARGE Officer request.	
TO COUNTRY 4-6-11 9-18-11	PATRONS NAME AND ADDRESS John Dewdrop, Bloomsburg, N.J. Home			FROM COUNTRY 9-18-11

THE SHAW-WALKER CO., MUSKOGEE, 79104

Months in school before Carlisle, 63

Grade entered at Carlisle, 2

Grade at date of Discharge, 10

Trade or Industry, 10

Church, 10

Miles to school

Department of the Interior.



Mr. M. Friedman

Supt. U. S. Indian School

Carlisle

Pennsylvania

6-3305

Dec. 24

, 1912

Name

Joseph A. Bouchard.

(Please give name by which enrolled and also present or married name.)

Tribe

Flathead

Present Address

Ronan. Mont

Former Address

(Address from which we heard from you last.)

Present Occupation

Blacksmithing

Remarks:

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Record of Graduates and Returned Students,

U. S. INDIAN SCHOOL, CARLISLE, PA.

Dec. 20

1911.

NAME Joe A. Barchard1. Are you married and if so to whom? None2. What is your present address? Ronan. Mont.3. Did you attend or graduate from any other schools after leaving Carlisle? no Give names of schools and dates if possible4. What is your present occupation? Blacksmithing

5. Tell something of your present home

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

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

(Over)

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

.....

.....

.....

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

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BRIEF.

Application of

FOR THE ENROLLMENT OF

Joseph A Bouchard.

IN THE INDIAN SCHOOL AT

Carlisle, Pennsylvania

NAME OF AGENCY FROM WHICH PUPIL CAME:

Date of enrollment,....., 19.....

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

Application for Enrollment in a Non-reservation 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 Penn.

of Joseph A. Bouchard; Male; date of birth Apr. 3rd 1891
(Name of Child) (Sex)
Kootenai
(Tribe)

NAME OF FATHER (Both Indian and English)	Living or Dead	TRIBE	BAND	DEGREE OF INDIAN BLOOD
<u>Joseph Bouchard</u>	<u>Living</u>	<u>White</u>		
NAME OF MOTHER				
<u>Henriette Couville Bouchard</u>	<u>Living</u>	<u>Kootenai</u>		<u>1/4</u>

I, Joseph A. Bouchard, do hereby voluntarily consent and agree to my
 enrollment in said school for a period of five years, and also obligate myself to abide by all
(Not less than 3)
 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>Urshin Couv.</u> <u>at St Ignace</u>	<u>1897</u>	<u>1902</u>	<u>Change of Residence</u>	<u>Not graded</u>
2. <u>Frenchman Mt.</u> <u>School Mont.</u>	<u>1902</u>	<u>1904</u>	<u>" "</u>	<u>7th grade</u>
3.				
4.				

Joseph A. Bouchard
(Parent, guardian, or next of kin)

P. O. address: Ronan

Montana

Two Witnesses:

John H. Heideman
A. Allen

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 28th day of November, 1910.

John H. Haideman

Physician at Flathead Agency.

CERTIFICATE OF AGENT OR 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 applicant
(Parent, guardian, or next of kin.)
was voluntary, and I recommend the transfer of said child.

This 28th day of November, 1910.

Fred O. Morgan

~~X Agent~~ Superintendent.

SPECIAL NOTE.

This form must be executed in duplicate when a child is transferred from a reservation to a non-reservation 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.

NOTE.—Age limits, fourteen to twenty years. Preferably fourteen to eighteen. Students must be at least one-fourth Indian, preferably full Indian. Special cases beyond the age limit will be given consideration. An industrial course only can be taken and the term reduced to three years, in exceptional cases.

INDORSEMENTS.

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 is living, and if neither of them is 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.

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



NAME Joseph A. Bouchard. Sex { Male.
~~Female.~~

Tribe { ~~1/8~~ } Kootenia State Montana November 28th, 1910

Age 19 years Respiration 19 Condition of, Eyes. good

Height 5 ft. 10 ins. Mensuration { Insp. 36 1/2
 Exp. 32 Ears good

Weight 148 lbs. Throat good.

Temperature 98 3/5 Vaccination 9 years. Cervical glands normal

Pulse 72 Vision good. Skin Healthy.

Inspection Robust & Healthy.

Palpation Normal

Percussion Normal

Auscultation Normal

Heart Normal

(Menstruation) _____

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	<u>52</u>	<u>good</u>		
Mother	<u>45</u>	<u>good.</u>		
Brothers <u>3</u>	<u>23</u> <u>15</u>	<u>good</u> <u>good</u>	<u>1</u>	<u>died in infancy.</u>
Sisters <u>2</u>	<u>21</u> <u>17</u>	<u>good</u> <u>good</u>		

Personal history Good

Present condition Good

John H. Hudelbauer, 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.

Name _____

Age Sex { Male.
Female. } Tribe { Full
I/ } Residence

(On _____, 19____)

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PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL *Bouchard Joseph* DATE *12/15* 19*10*AGE *19* YEARS { NEW STUDENT. TRIBE *Flathead* STATE *Mont.*DEGREE OF INDIAN BLOOD *1/2*INSPECTION *Left Shoulder prominent**Fairly developed.*

PALPATION

PERCUSSION *Left apex dull*AUSCULTATION { RESONANCE *Normal*

RESP. MURMUR

HEART SOUNDS *Normal*MENSURATION { INSP. *38 3/4*EXP. *36* RESPIRATION *18* PULSE *72*TEMPERATURE degs. HEIGHT *5* FT *9 3/4* IN. WEIGHT *138 1/2* LBS.VISION VACCINATION *12/15 1910*

FAMILY HISTORY:

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

PERSONAL HISTORY: *General health good.*

REMARKS:

HOSPITAL RECORD.....

EXAMINATION FOR OUTING:

OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

64

Mont. Kootenai
Polson, Tribe

Name of Student *Joseph Bouchard* Home Address *Jos. Bouchard*

Age at Entrance *19* Date of Entrance *12-5-18*

JAN. FEB. MAR. APR. MAY JUNE JULY AUG. SEPT. OCT. NOV. DEC. TOTAL OR AVERAGE
July Aug Sept Oct Nov Dec Jan Feb Mar Apr May June

Patron *Mrs. Lewdtrap*
Address *Bloomsbury, N.J.*
Recommended by

Locality
R. R. Station
Grade in School

Days in School
Conduct
Ability
Health
Earnings

Grade of Home Church

Date of Outing *4-6-11* Date Returned *9-1-11* Wages

v.g. v.g. v.g.
" " g.
" " g
g. 12. 12.

g v.g.
g "
g "
8. 12.

OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

[illegible]

364.9

NAME.

Joseph Bouchard

TRIBE.

Kootenai

PARENT OR GUARDIAN.

Joseph Bouchard

DATE ENROLLED.

Dec. 5, 1910

TERM.

Five years

AGE.

19

HOME ADDRESS

Ronan, Mont.

DATE OF RECORD

ACADEMIC DEPARTMENT.

INDUSTRIAL DEPARTMENT.

DORMITORY.

OUTING

SPECIAL REMARKS.

ROOM
NO.

Scholarship

Conduct.

Shop.

Ability.

Conduct.

Room
No.

Neatness

Conduct.

Ability.

Conduct.

Jan, '11
July '11

8 @.

Print

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3649
15

TRADE RECORD, CARLISLE.

JUL 1 1910

JAN 1 1911

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

PUPIL

Joseph Bouchard

TRADE

Printing

ABILITY

Fair. Grapped because of low grade.

CONDUCT

Good.

REMARKS

Was only in shop a few weeks.

INSTRUCTOR

E. H. Nielsen

NAME AT CARLISLE

Joseph Bonchard

PRESENT NAME

Bouchard, Joe
Fathers file
Correspondence

3649

5030

4632