

Readmitted 3691 **CARLISLE INDIAN INDUSTRIAL SCHOOL**
 DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

NUMBER 6164	ENGLISH NAME Gabriel Melotte	AGENCY Keshena	NATION Menominee					
BAND	INDIAN NAME	HOME ADDRESS Keshena, Wis.						
PARENTS LIVING OR DEAD		BLOOD 1/2	AGE 21	HEIGHT 5'6 ³ / ₄ "	WEIGHT 144	FORCED INSP. 37	FORCED EPXR. 94	SEX. M.
FATHER, L	MOTHER, D	ARRIVED AT SCHOOL Sept. 22, '10		FOR WHAT PERIOD Three	DATE DISCHARGED 8-7-11	CAUSE OF DISCHARGE Deserter		
TO COUNTRY 7-7-11	PATRONS NAME AND ADDRESS Ran						FROM COUNTRY	

THE SHAW-WALKER CO., MUSKOGEE, 79104

Months in school before Carlisle, 36

Months entered at Carlisle, 6

Trade at date of Discharge,

Trade or Industry,

Church, Catholic

Miles to school - 1/4

Letter Ed. Sch. ~~56186-1910~~ 76274-1910
~~58898-1910~~

898
 9878
 NUMBER

CARLISLE INDIAN INDUSTRIAL SCHOOL.
 DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT.

698
 Daniel Melotte Green Bay Menomonee
 Henry Melotte
 FATHER, Living MOTHER, Dead Full 13 4-10 81 29 25 1/2 m
 May 16, 1901 5 years May 21-1904, Ran
 Oct. 7, 1902 - Ran away with Willard Johnson, bro. Oct. 12, '02
 Dec. 29, '02 - " " with Marion Whites & Chas Scott Dec. 30, '02
 May 20, '03 - " " " Marion Whites & S. Whitetree May 29, '03
 May 9-1904 " " " Deforest Billy from school,

SHAW-WALKER'S MUSKOGON 547B

Months in school before Carlisle, 68

Grade entered at Carlisle, 4th

Grade at date of Discharge,

Trade or Industry,

Church, Catholic

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CARLISLE INDIAN INDUSTRIAL SCHOOL

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

NUMBER 3436	ENGLISH NAME <i>Gabriel Melotte</i>	AGENCY	NATION <i>Memmonee</i>					
BAND	INDIAN NAME	HOME ADDRESS <i>Henry Malotte, Keshing Wis.</i>						
PARENTS LIVING OR DEAD	BLOOD	AGE	HEIGHT	WEIGHT	FORCED INSP	FORCED EXPR.	SEX.	
FATHER: <i>Living</i>	MOTHER: <i>Dead</i>	<i>Half</i>	<i>15</i>	<i>5-6</i>	<i>137</i>	<i>35</i>	<i>32</i>	<i>M</i>
ARRIVED AT SCHOOL	FOR WHAT PERIOD	DATE DISCHARGED		CAUSE OF DISCHARGE				
<i>Aug 24-1905</i>	<i>5 Years</i>	<i>June 30 1907</i>		<i>Deserter</i>				
TO COUNTRY	PATRONS NAME AND ADDRESS					FROM COUNTRY		
<i>June 1, 1906</i>	<i>Ranaway from School.</i>							

THE SHAW-WALKER CO., MUSKOGON-CHICAGO 33877

Grade: _____

Grade: _____

Month: _____

Entered at Carlisle, *6th*

date of Discharge, *6th*

Trade or Industry,

Church: *Catholic*

Wm
Mrs Friedman
Supt
Carlisle Pa

Sep 10/10

3691

5-192

BRIEF.

APPLICATION OF

FOR THE ENROLLMENT OF

Gabriel Melotte

IN THE INDIAN SCHOOL AT

Carlisle Pa

POST OFFICE ADDRESS OF APPLICANT:

Musconium Indian Reservation
Keshena Indian School

Date of enrollment, _____, 190

Term of enrollment, _____ (_____) 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, Penn., of Gabriel Melotte, Male, I, Parent, guardian, or next of kin. of Keshewa P. O., State of Wis, do hereby voluntarily consent and agree to enrollment in said school for a period of Three 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 West Branch Settlement Menominee Reservation on Jan. 15th 1889, that the father, Henry Melotte, is a half Indian of the Menominee Tribe located at Keshewa Agency; that he left the tribe about _____; that the mother, Charlotte Melotte, was a half Indian of the Menominee Tribe located at Keshewa 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>Keshewa Indian School</u>	<u>Keshewa, Wis</u>				

This 10 day of September, 1900

Two witnesses:

Charles B Williams Gabriel Melotte
William Satterlee P. O., Keshewa Wis
 (Parent, guardian, or next of kin.)

(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, Gabriel Melotte, do hereby swear that the statements made in the above application are true.

Gabriel Melotte
 (Signature of applicant.) (Parent, guardian, or next of kin.)

Sworn to and subscribed before me this 12th day of Sept, 1900,

Apfelholson

(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, Lawrence W. White, a practicing physician of Keshona Wis., do hereby certify that I have carefully examined Gabriel Melott, 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 10 day of Sept., 1900 Lawrence W. White, 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 _____ by _____; that I believe _____ understood the purport thereof; that I was present at the medical examination of the child named herein; that _____ resides with _____, in or near the town of _____; that the child can not have adequate and proper educational facilities at home for the reason that _____

Dated at _____ this _____ day of _____, 190____ (Official 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, James H. Tuttle, a Agency Clerk, of Keshona Wis., do hereby certify that I am personally acquainted with Gabriel Melotte who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with Gabriel Melotte; 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 He is not an enrolled member of the Keweenaw Tribe of Indians

This 12 day of Sept, 1900, James H. Tuttle

VOUCHER NO. 2.

I, Adam T. Ruff, a Clerk of Kishena, Wis., do hereby certify that I am personally acquainted with

Gabriel Melotte, who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with Gabriel Melotte; that

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 he is not an enrolled member of the Menominee Tribe of Indians

This 12th day of September, 1900 Adam T. Ruff

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 _____

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.

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Record of Graduates and Returned Students,

U. S. INDIAN SCHOOL, CARLISLE, PA.

Dec. 17

1911.

NAME

Gabriel Melotte

1. Are you married and if so to whom?

No

2. What is your present address?

Keshuma Wis

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

No

Give names of

schools and dates if possible

4. What is your present occupation?

Have none just at present

5. Tell something of your present home

I live on a farm

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?

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

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

I ran away from Carlisle soon I am
sorry I did but I am glad of what I
learned at Carlisle I don't use kind of drink

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PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Melotte, Gabriel DATE 10/1 1910

AGE 21 YEARS { NEW / RETURNED } STUDENT. TRIBE Menominee STATE Wis.

DEGREE OF INDIAN BLOOD half

INSPECTION Slight depression above right clavicle.

PALPATION normal.

PERCUSSION normal.

AUSCULTATION { RESONANCE normal.
RESP. MURMUR normal.

HEART SOUNDS good.

MENSURATION { INSP. 37
EXP. 34 RESPIRATION 20 PULSE 74

TEMPERATURE 98.2 degs. HEIGHT 5 FT 6 3/4 IN. WEIGHT 144 LBS.

VISION normal. VACCINATION Good scar.

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER	<u>yes.</u>	<u>?</u>		
MOTHER			<u>yes.</u>	<u>Accident.</u>
BROTHERS {	<u>2</u>	<u>yes.</u>	<u>5-</u>	<u>?</u>
SISTERS {	<u>3</u>	<u>yes.</u>	<u>1</u>	<u>accident.</u>

PERSONAL HISTORY:

REMARKS:

HOSPITAL RECORD.....

EXAMINATION FOR OUTING:

DATES:

CONDITION:

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NAME.

Gabriel Melotte

TRIBE.

Menominee

PARENT OR GUARDIAN.

DATE ENROLLED.

Sept. 22, 1910

TERM.

Three years

AGE.

21

HOME ADDRESS

Keshena, Wis.

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 '119
9

V.G.

Ex

Plumber

V.G.

V.G.

7

9

all day worker

