

967

5-192 a

Winnebago School,
Winnebago, Nebraska.

APPLICATION OF

Lizzie Hunter

FOR THE ENROLLMENT OF

David Rust

IN THE INDIAN SCHOOL AT

Carlisle, Pa.

NAME OF AGENCY FROM WHICH PUPIL CAME:

Winnebago Agency

Date of enrollment, _____, 191

Term of enrollment, _____ (*3*) years.

NAME OF COLLECTING AGENT:

Position, _____

GOVERNMENT 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 14th day of October, 1910

H. H. Johnson
Physician at Winnebago Agency

RESERVATION BONDED SUPERINTENDENT'S CERTIFICATE.

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 Lizzie Hunter (Parent, guardian, or next of kin.) was voluntary, and I recommend the transfer of the said child. The economic conditions of this pupil's home are (here state facts which will enable the Superintendent of the nonreservation school to give the pupil such instruction and training as may best prepare him to meet these conditions, if he is to return to them):

farming community

This 14 day of Oct., 1910

Robert H. Kernal
Superintendent.

NONRESERVATION SCHOOL PHYSICIAN'S CERTIFICATE.

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 _____, 191 _____

Nonreservation 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 shall be furnished with the original of this form for his files, and the duplicate shall be deposited in the office of the superintendent in charge of the reservation. The Reservation Superintendent 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. 6-870

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 *David Priest* ; *M* ; date of birth *1898* ;
(Name of child.) (Sex.)
Winnebago
(Tribe.)

NAME OF FATHER. (Both Indian and English.)	LIVING OR DEAD.	TRIBE.	BAND.	DEGREE OF INDIAN BLOOD.
<i>Walking Priest</i>	<i>L</i>	<i>Winnebago</i>	<i>Nebraska</i>	<i>full</i>
NAME OF MOTHER.				
<i>Lizzie Hunter</i>	<i>L</i>	<i>"</i>	<i>"</i>	<i>"</i>

I, *Lizzie Hunter* , do hereby voluntarily consent and agree to *his*
(Parent, guardian, or next of kin.)
 enrollment in said school for a period of *3* 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.
<i>Genoa Neb</i>	<i>1907</i>	<i>1910</i>	<i>term expired.</i>	<i>3d</i>
2.				
3.				
4.				

Lizzie Hunter
(Parent, guardian, or next of kin.)

P. O. address: *Winnebago,*
Neb.,

Two witnesses:

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 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.)

That no Indian pupil under the age of fourteen years shall be transported at Government expense to any Indian school beyond the limits of the State or Territory in which the parents of such child reside or of the adjoining State or Territory. (35 Stat. L., 781.)

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.

CARLISLE INDIAN INDUSTRIAL SCHOOL
 DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

3716

NUMBER 4419 6219		ENGLISH NAME David Priest			AGENCY Winnebago			NATION Winnebago		
BAND Nebraska		INDIAN NAME			HOME ADDRESS Lizzie Hunter, Winnebago, Nebr.					
PARENTS LIVING OR DEAD		BLOOD	AGE	HEIGHT	WEIGHT	FORCED INSP.	FORCED EPXR.	SEX.		
FATHER, L		MOTHER, L	Full	12	4-9½	88	30½	28¼	M.	
ARRIVED AT SCHOOL 10-19-1910		FOR WHAT PERIOD Three years.		DATE DISCHARGED June 16, 1913			CAUSE OF DISCHARGE Time out			
TO COUNTRY		PATRONS NAME AND ADDRESS						FROM COUNTRY		
4-6-'11		Hyman Fulmer, Martin's Creek, Pa.						Tr. 9-1-'11		
Tr. 9-1-'11		J. N. Richards, Fallsington, Pa.						Tr.		
11-4-'11		Mrs. J. S. Briggs, Yardley, Pa.						4-9-11		

THE SHAW-WALKER CO., MUSKOGEE, 79104

Months in school before Carlisle, 27

Age entered at Carlisle,

Grade at date of Discharge,

Trade or Industry,

Presbyterian

Miles to school

Priest, David

3916

Patron, Mrs. Joseph Briggs

6598

Money sent - Mrs. Lizzie Hunter

7089

Agent's file

115

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PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL *Priest-klavid* DATE *Oct 24 10*

AGE *13* YEARS { NEW { STUDENT. TRIBE *Winnebago* STATE *Nebraska*

DEGREE OF INDIAN BLOOD. *Full*

INSPECTION *Fairly well developed.*

PALPATION *normal*

PERCUSSION *normal*

AUSCULTATION { RESONANCE *normal*
RESP. MURMUR *normal*

HEART SOUNDS *good*

MENSURATION { INSP. *30 1/2* RESPIRATION *18* PULSE *64*
EXP. *28 7/8*

TEMPERATURE *98.2* degs. HEIGHT *4* FT *9 1/2* IN. WEIGHT *88* LBS.

VISION *R 10/15* *L 10/20* VACCINATION *scar good*

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER	<i>yes</i>	<i>good</i>		
MOTHER	<i>"</i>	<i>"</i>		
BROTHERS {	<i>4</i>	<i>4</i>		
SISTERS {	<i>1</i>	<i>1</i>		

PERSONAL HISTORY:

General good health.

REMARKS: *Cough for short time and winter*

HOSPITAL RECORD.....

EXAMINATION FOR OUTING:

DATES:

3-13-1911

CONDITION:

Good

Grade of home no 1

Any general statement or wishes of patron or pupils, together with Agent's estimate of place, people, and pupil:

David wishes to return in the fall but
may decide to remain out.

Mr. Fulmer is very well pleased
with him.

June 6, 1911

D. H. Dickey
Agent.

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REPORT OF David Priest pupil of Carlisle Indian School, who went Sept. 1st 1911 to live with Jos. Briggs of Newtown, Bucks, Pennsylvania, Newtown Railroad Station

Conduct Good
Health Good
Ability Good
Cleanliness Very good
Economy Good
Situation of Room Second floor
Condition of Room Excellent
Condition of Clothing Good
Wages Six dollars per month
Are careful accounts kept by patron? Yes
Are careful accounts kept by pupil? No
Number of days at school Thirty Four 34
Distance to school One and one half miles 1 1/2
Grade or quality of school Country School Non graded
Name and address of teacher Mary Slack Newtown Pa.
Qualifications of teacher Elementary Certificate
In what grade was pupil at Carlisle? Third grade 3rd.
In what grade is pupil at present? Fourth 4th
Attends what church and Sunday school? Presbyterian
Distance to church Two miles
Is there a Catholic church in locality? Yes at Newtown Pa. two miles distant. (Via Trolley 6¢)
Who compose patron's family? Man, wife, and child
What other help is employed? One Indian boy Chris Young
Locality of home On Newtown trace (Linden Kerst Stop)
Home life and environments Very Good
Trade at school None
Nature of work House work
Pupil's age 13 Experience Two seasons

Grade of home No. 12.

Any general statement or wishes of patron or pupils, together with Agent's estimate of place, people, and pupil:

I visited David both in his home and school and find he is giving good satisfaction. David seems to be contented and happy.

Mr. David is undecided as to what he wants to do in the spring but I would encourage his remaining with Mr. Briggs if he will.

Jan. 12th 1912

D. H. Dickey

Acting Agent.

PUPIL'S HEALTH REPORT.

Jan.
This blank is issued so that the school authorities may keep in touch with the health of the pupil. The patron is requested to fill this blank out on the first of MAY, JULY, SEPTEMBER, NOVEMBER, JANUARY, and MARCH, and send it to the school with the outing report for the month.

Patron's name and address *Mabel R. Biggs Yardley Pa.*

Pupil's name *David Priest*

General health of the pupil *Good*

Has pupil been ill the past two months? *No.*

Name of disease.....

Name and address of the physician in attendance.....

Does the pupil have a cough? *slight cold, a bright now.*

For how long has he had it?.....

Give the pupil's weight *98*

Has the pupil any trouble with the eyes?.....

Are the eyelids inflamed?.....

Remarks:.....

Date *Feb. 5 1912*

In cases of serious illness, notify the school at once and have the physician in attendance send in a written report of the case.

Oct

PUPIL'S HEALTH REPORT.

This blank is issued so that the school authorities may keep in touch with the health of the pupil. The patron is requested to fill this blank out on the first of MAY, JULY, SEPTEMBER, NOVEMBER, JANUARY, and MARCH, and send it to the school with the outing report for the month.

Patron's name and address Lewis P. Satterthwaite

Pupil's name David Priest

General health of the pupil Good.

Has pupil been ill the past two months? No

Name of disease.....

Name and address of the physician in attendance.....

Does the pupil have a cough? No

For how long has he had it?.....

Give the pupil's weight 98

Has the pupil any trouble with the eyes? No

Are the eyelids inflamed? No

Remarks:.....

PUPIL'S HEALTH REPORT.

This blank is issued so that the school authorities may keep in touch with the health of the pupil. The patron is requested to fill this blank out on the first of MAY, JULY, SEPTEMBER, NOVEMBER, JANUARY, and MARCH, and send it to the school with the outing report for the month.

Patron's name and address..... *Mabel P. Briggs*

Pupil's name..... *David Priest*

General health of the pupil..... *Excellent*

Has pupil been ill the past two months?..... *no*

Name of disease.....

Name and address of the physician in attendance.....

Does the pupil have a cough?..... *no*

For how long has he had it?.....

Give the pupil's weight..... *98 lbs.*

Has the pupil any trouble with the eyes?..... *no*

Are the eyelids inflamed?.....

Remarks:..... *His health is excellent but unless he has overshoes to wear in muddy weather he will not keep well please send them or money to get them at once.*

Date..... *Dec 4 1911*

PUPIL'S HEALTH REPORT.

This blank is issued so that the school authorities may keep in touch with the health of the pupil. The patron is requested to fill this blank out on the first of MAY, JULY, SEPTEMBER, NOVEMBER, JANUARY, and MARCH, and send it to the school with the outing report for the month.

Patron's name and address..... *Hyman Fulmer, Martins Creek, Pa*

Pupil's name..... *David Priest*

General health of the pupil..... *Seems good*

Has pupil been ill the past two months?..... *No*

Name of disease..... *—*

Name and address of the physician in attendance..... *—*

Does the pupil have a cough?..... *Yes*

For how long has he had it?..... *When he came Apr 6th*

Give the pupil's weight..... *95 lbs*

Has the pupil any trouble with the eyes?..... *No*

Are the eyelids inflamed?..... *No*

Remarks:..... *Had a Cough on coming.*

Shee has it. We hope, by sanitary

rules, more settled weather & giving some

simple Syrup, it may disappear

David. Feels well.

PUPIL'S HEALTH REPORT.

This blank is issued so that the school authorities may keep in touch with the health of the pupil. The patron is requested to fill this blank out on the first of MAY, JULY, SEPTEMBER, NOVEMBER, JANUARY, and MARCH, and send it to the school with the outing report for the month.

Patron's name and address..... *Hyman Julius*

Pupil's name..... *David Priest*

General health of the pupil..... *Good*

Has pupil been ill the past two months?..... *No*

Name of disease.....

Name and address of the physician in attendance.....

Does the pupil have a cough?..... *Slight, grows less*

For how long has he had it?..... *On coming Apr 5th 1911*

Give the pupil's weight..... *98*

Has the pupil any trouble with the eyes?..... *No*

Are the eyelids inflamed?..... *No*

Remarks:.....

PUPIL'S HEALTH REPORT.

This blank is issued so that the school authorities may keep in touch with the health of the pupil. The patron is requested to fill this blank out on the first of MAY, JULY, SEPTEMBER, NOVEMBER, JANUARY, and MARCH, and send it to the school with the outing report for the month.

Patron's name and address..... *Mabel P. Bugge*

Pupil's name..... *David Priest*

General health of the pupil..... *Excellent*

Has pupil been ill the past two months?..... *Cold once or twice*

Name of disease.....

Name and address of the physician in attendance.....

Does the pupil have a cough?..... *no*

For how long has he had it?.....

Give the pupil's weight..... *105*

Has the pupil any trouble with the eyes?..... *no*

Are the eyelids inflamed?.....

Remarks:..... *David is perfectly well*

and full of spirit!

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Oct. 25th, 1913.

Mr. David Priest,
Winnebago, Nebraska.

My dear Friend:

I would be pleased to have you write me whether we may yet expect you to enroll here for this year's work. All our classes are going ahead very rapidly with the year's studies and if you decide to come for an additional period of enrolment you should not delay about doing so. The blank I enclose may be used to submit your application for enrolment to Superintendent Spear for his approval, and as transportation is available he can secure a ticket for you at once.

Hoping that you will let me hear from you regarding this matter, I remain,

Very truly yours,

RKM.

Superintendent.

Copy to Superintendent Spear.

OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

Febr. 967

Name of Student *David Priest*

Home Address *Lizzie Hunter - Winnebago Tribe Winnebago*

Age at Entrance *12* Date of Entrance *10-19-10*

Patron *Hyman Fulmer*

Address *Martinis Creek, Pa*

Recommended by

Grade of Home Church

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

Shop	JAN. July	FEB. Aug.	MAR. Sept.	APR. Oct.	MAY Nov.	JUNE Dec.	JULY Jan.	AUG. Feb.	SEPT. Mar.	OCT. Apr.	NOV. May	DEC. June	TOTAL OR AVERAGE
Days in School													
Conduct													<i>y y y</i>
Ability													<i>y y y</i>
Health													<i>y y y</i>
Earnings													<i>4.00 5.5.</i>

7 y
7 y
y y
6. 5.

L. P. Satterthwaite
Fallsington Pa.

y y.
y y.
y y.
4.50 6

9-1-11 *11-4-11*

Mrs. Jos. Briggs
Yardley, Pa.

17 15 19 20 21
7 y y y y
y y y y y
y y y y y

11-4-11 *4-9-11*

OUTING RECORD — CARLISE INDUSTRIAL SCHOOL

Name of Student

Home Address

Tribe

Age at Entrance	Date of Entrance	Shop		
Patron		Locality		Days in School
Address		R. R. Station		Conduct
Recommended by			Grade in School	Ability
Grade of Home		Church		Health
Date of Outing	Date Returned	Wages		Earnings

JAN.	FEB.	MAR.	APR.	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.

TOTAL OR AVERAGE

