

12 ✓

BRIEF.

Application of

Georgiana Bartlett

FOR THE ENROLLMENT OF

herself

IN THE INDIAN SCHOOL AT

Carlisle, Pennsylvania

POST-OFFICE ADDRESS OF APPLICANT:

Roan Fork, Idaho

Date of enrollment, *Dec. 3rd*, 191*2*

Term of enrollment, *One* (*1*) years

Certificate of Physician.

I, _____, a practicing physician of _____

_____, do hereby certify that I have carefully examined _____,

the child named in this application, and find that _____ 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 _____ day of _____, 191_____

_____, M. D.

Vouchers of Disinterested Persons.

VOUCHER No. 1.

I, _____, a _____, of _____

(Business, calling, or profession.)

_____, do hereby certify that I am personally acquainted with _____

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

This _____ day of _____, 191_____

VOUCHER No. 2.

I, _____, a _____, of _____

(Business, calling, or profession.)

_____, do hereby certify that I am personally acquainted with _____

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

This _____ day of _____, 191_____

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 Georgiana Bartlett, F, I, Georgiana Bartlett (Name of child.) (Sex.) (Parent, guardian, or next of kin.) of Ross Fork P. O., State of Idaho, do hereby voluntarily consent and agree to my enrollment in said school for a period of one years, and also obligate (Not less than 3.) and bind myself to abide by all the rules and regulations for Indian schools.

I further say that the said child was born at Ross Fork, Ida on Dec. 28, 1894 (Date.) that the father, Herbert Bartlett, is a 0 Indian of the (Name of father.) (Is or was.) (Degree.)

Tribes located at _____ Agency; that he left the tribe about _____ (Approximate date.)

that the mother, Alice Bartlett, was a 4/8 Indian of the Bannock (Name.) (Is or was.) (Degree.)

Tribes located at _____ Agency, and left the tribe about _____ (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.

This 3rd day of December, 1912
Two witnesses:

Harvey K. Meyer
(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.)

Georgiana Bartlett
(Parent, guardian, or next of kin.)

P. O., Ross Fork, Ida

AFFIDAVIT.

I, _____, do hereby swear that the statements made in the above application are true.

(Signature of applicant.)

(Parent, guardian, or next of kin.)

Sworn to and subscribed before me this _____ day of _____, 191_____

(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 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 _____, 191_____

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.



NUMBER 2046	ENGLISH NAME <i>Georgiana Bartlett</i>	AGENCY <i>Fort Hall, Ida.</i>	NATION <i>Bannock</i>
BAND	INDIAN NAME	HOME ADDRESS <i>Herbert Bartlett Rose Fork, Ida.</i>	
PARENTS LIVING OR DEAD	BLOOD <i>A 2</i>	AGE <i>11</i>	HEIGHT <i>4-5 1/2</i>
FATHER, <i>Living</i>	MOTHER, <i>Dead</i>	WEIGHT <i>103 1/4</i>	FORCED INSP. <i>28 1/2</i>
ARRIVED AT SCHOOL <i>Aug 29, 1905</i>	FOR WHAT PERIOD <i>5 Years (1)</i>	DATE DISCHARGED <i>June 11, 1913</i>	CAUSE OF DISCHARGE <i>Time out</i>
TO COUNTRY	PATRONS NAME AND ADDRESS		FROM COUNTRY
<i>May 19-1906</i>	<i>Eliz. J. Pennell, Nawa, Pu</i>		<i>9-11-06</i>
APR. 9-1907	<i>Thos J. Wilson, Rising Sun, Md.</i>		AUG 30-1907
<i>4-8-08</i>	<i>Walter Heatman, Kumb-Sq. Pa.</i>		<i>4-7-10</i>
<i>8-30-10</i>	<i>Herbert Smith, Moorestown, N. J.</i>		<i>2-8-31-11</i>
<i>22-8-31-11</i>	<i>Robert McCurdy, Oak Lane, Pa.</i>		<i>8-30-12.</i>

miles to sch. 15

12

X

APPLICATION FOR ENROLLMENT IN A NON-RESERVATION SCHOOL

Full name of child... Georgenia Bartlett Indian name is _____
Name of Father... Herbert G. Bartlett
Name of mother... Alice Bartlett Tribe... Bannock
Reservation... Fort Hall Degree of Indian blood of child... Half
Is either parent white, if so, which?... father Are either or both allotted?... mother
On what reservation?... Fort Hall Age of child... 12 What
reservation school attended?... " " How long?... 5
If ever enrolled in a nonreservation school, name of school, _____
When? _____ How long? _____ If ever
dismissed from a school, where, _____; when, _____
and for what reason? _____

(Signed.)

NOTE—The above blank to be signed by the child, if old enough to understand its import; if not, by the parent, guardian or other person cognizant of the facts

CONSENT BLANK

I, H. H. Bartlett, parent, guardian or next of kin of the
above-named child, Georgenia Bartlett, do hereby consent to her

transfer or enrollment for a period of five (5) years in the Indian School at Carlisle, Pa.

Dated at Fort Hall Agency, Ross Fork, Idaho on the twenty-fifth
day of August, 1905

(Signed.)

(Parent, Guardian or next of kin.)

PHYSICIAN'S CERTIFICATE

I hereby certify that I have personally examined the above-named Georgenia Bartlett
and have found her physically sound, and recommend
the transfer so far as her health conditions are concerned. Dated at Ross Fork, Idaho
on the 25th day of August, 1905

(Signed.)

Frank H. Poole
Agency Physician

AGENT'S OR SUPERINTENDENT'S INDORSEMENT

The statements concerning the above-named Georgenia Bartlett are be-
lieved by me to be correct, and I hereby recommend the transfer.

(Signed.)

A. F. Caldwell
U. S. Indian Agent or Superintendent

NOTE—Age limits, twelve to twenty years. preferably fourteen to eighteen. Students must be at least one-fourth Indian, preferably full Indian. Special cases beyond the age limit can be given consideration.

Card made

CONSENT OF

FOR THE ENROLLMENT OF

IN THE INDIAN SCHOOL AT

For the term of _____ years

Name of agency or place from which pupil came:

Date of enrollment, _____ 190

Date of discharge, _____ 190

Cause of discharge, _____ 190

CONSENT BLANK

SUBSIDIARY CERTIFICATE

AGENTS OR SUPERINTENDENTS RESPONSIBILITY

NAME Georgiana Bartlett 12
 Sex ☒ Male ☐ Female.
 Tribe { Full } Shanock State Idaho Sept 4, 1912
 Age 17 years Respiration 18 Condition of, Eyes OK
 Height 4 ft. 10 1/2 ins. Ears OK
 Weight 103 1/2 lbs. Mensuration { Insp. 34
 Exp. 29
 Throat OK
 Temperature 98.4 Vaccination 1904 Cervical glands OK
 Pulse 72 Vision OK Skin OK
 Inspection OK
 Palpation OK
 Percussion OK
 Auscultation OK
 Heart OK
 (Menstruation) OK

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	<u>yes</u>	<u>good</u>	<u>yes</u>	<u>T. B.</u>
Mother	<u>2</u>	<u>good</u>	<u>2</u>	<u>1, T. B. 1, 2</u>
Brothers	<u>3</u>	<u>good</u>	<u>1</u>	<u>unknown w/ T. B.</u>
Sisters				

Personal history measles

Present condition Good

H. B. Francis, 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.

(On _____, 19____)

6—1955

12

REPORT OF Georgia Bartlett pupil of Carlisle Indian
School, who went Aug. 1910 to live with Mrs. Herbert Smith
(Date) (Patron)
of Cincinnati, Burlington,
(Post Office) (County)

New Jersey, Riverbush N.J. Railroad Station
(State)

Conduct Gen. good

Health Excellent - much improved

Ability Good

Cleanliness 4

Economy "

Situation of Room 3rd floor

Condition of Room Ex -

Condition of Clothing Badly in need of summer clothes

Wages 5⁰⁰

Are careful accounts kept by patron? Yes

Are careful accounts kept by pupil? No

Number of days at school

Distance to school

Grade or quality of school

Name and address of teacher

Qualifications of teacher

In what grade was pupil at Carlisle? 4th

In what grade is pupil at present? 5th

Attends what church and Sunday school? Presb.

Distance to church 1/2 mi.

Is there a Catholic church in locality? No

Who compose patron's family? Mr. + Mrs. S. Miller + two grown.

What other help is employed? None - Laundry put out.

Locality of home Farm

Home life and environments Ex -

Trade at school

Nature of work Gen. helper

Pupil's age 15 Experience 3 yrs

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

Phasau- Jann hum. no heavy work.
not- lousum. 1 3/4 miles from town.
Palm says George is satisfactory. she
is a good worker. neat + willing
at- times has an ugly temper is hap-
ping to control it. she will keep her
of her own stay. Geo would like
to be trans. to Va hum when there
is a baby. she wants to stay out.

Walter V. Gaither
Field Agent

June 1-1911.

12

REPORT OF Georgia Bartlett pupil of Carlisle Indian
School, who went Aug 30, 1910 to live with Mrs. Herbert Smith
(Date) (Patron)
of Cinnaminson, Burlington,
(Post Office) (County)

New Jersey, Riverton Railroad Station
(State)

Conduct Excellent.

Health " has gained much in flesh.

Ability Good.

Cleanliness "

Economy "

Situation of Room 3rd floor.

Condition of Room Excellent.

Condition of Clothing Good.

Wages

Are careful accounts kept by patron?

Are careful accounts kept by pupil?

Number of days at school 5-4

Distance to school 1/2 mi.

Grade or quality of school Graded

Name and address of teacher Miss May A. Smith

Qualifications of teacher Good.

In what grade was pupil at Carlisle? 4th beginning.

In what grade is pupil at present? " ending.

Attends what church and Sunday school? Presbyterian.

Distance to church 1/2 mi.

Is there a Catholic church in locality? No.

Who compose patron's family? Mr & Mrs. Smith, mother & brother.

What other help is employed? Woman to wash.

Locality of home Countryside, no farm work.

Home life and environments Excellent.

Trade at school

Nature of work Gen. helper.

Pupil's age 15 Experience 2 yrs

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

A delightful country home 3 miles from town, Patron an excellent house-keeper, says Georgia is perfectly satisfactory, she is willing and tries, interested in her work, is improving, she is learning to cook. Patron pleased with her and wants to keep her. Georgia likes her home & school says it is the best home she ever had, she wants to stay all summer.

Teacher says & entered school Sept. 7, the first day of school, never tardy, absent but twice, she is well up to grade in all studies, conduct good, application good.

Mollie S. Gaither
Field Agent

Dec. 1, 1910

19
REPORT OF Georgia Bartlett pupil of Carlisle Indian
School, who went Aug. 30-1911 to live with Mrs. R. H. Cuddy
(Date) (Patron)
of Oak Lane, Philadelphia,
(Post Office) (County)
Pennsylvania, Oak Lane Railroad Station
(State)

Conduct Good

Health Excellent

Ability Good

Cleanliness Good

Economy Good

Situation of Room 3rd floor

Condition of Room Good

Condition of Clothing needs winter-clothing

Wages None

Are careful accounts kept by patron? None

Are careful accounts kept by pupil? None

Number of days at school 12

Distance to school 1/4 Block

Grade or quality of school Primary

Name and address of teacher Miss Scholery

Qualifications of teacher Good

In what grade was pupil at Carlisle? 4th

In what grade is pupil at present? 4th

Attends what church and Sunday school? Bapt.

Distance to church 4 Blocks

Is there a Catholic church in locality? No

Who compose patron's family? Mrs. + Mrs. W. C. Child, 17, 16, 10, 4, 8 mo.

What other help is employed? White-Cook + Ch. Cookman

Locality of home Town

Home life and environments Good

Trade at school None

Nature of work sewing + Chambermaid

Pupil's age 16 Experience 3 yrs.

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

Handsome woman. Polite & kind
woman. Excellent house keeper. Says
Gov. is satisfactory. She is kind to
the body & can be trusted with things.
She is a little lazy at times about her
work & careless about her appearance.
Can do well when she tries.

Teacher says Gov. is only a fair pupil.
Weak in math. Can do a little
Gov. likes her home & school. We must
try to decide for summer.

W. B. Gaillet
Trainer Agent.

June - 11 - 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 *Mrs. Leubers, L. Smith - Cummins*

Pupil's name *Gorgyenia Barlett*

General health of the pupil *No very good*

Has pupil been ill the past two months? *Came to me on Jan 17th 1912
do not know.*

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 lbs*

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

Are the eyelids inflamed? *No*

Remarks: *Gorgyenia came to me very much run down in health and with very little appetite, have been giving her medicine, and hope to have her better soon. Have not let her go to school this week as the weather has been so bad and she*
very very well
Date *February 1 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.

8 Marriage of Former Carlisle Student.

Superintendent E. W. Estep, of the Fort Hall Agency, sends in the following news item:

3 "Married, at the Presbyterian Mission on Fort Hall Reservation, by the Rev. H. N. Wagner, on September 13, 1913, Mr. Antone LeClair and Miss Georgina Bartlett.

"The groom is an employee of the agency, being employed in the blacksmith shop. He is educated, sober, progressive, and a first-class man. They start off with good prospects."

Georgina Bartlett is a former student of the Carlisle Indian School, and her friends here wish her happiness and prosperity.

3718

3718

Name **Bartlett, Georgiana,**

Age

Deg. Ind. blood

Address **Ft. Hall, Idaho.**

Information from **Living with her father, 9/1913**

Date

1910

State

Agency

Tribe

POSITIONS FOR WHICH LISTED. SUITABILITY IN ORDER NAMED.

1.

2.

3.

4.

Remarks:

3718

NAME.

Bartlett, Georgiana.

TRIBE.

Bannock.

PARENT OR GUARDIAN

Herbert Bartlett.

DATE ENROLLED.

Aug. 29, 1905.

TERM.

5 years.

AGE.

11

HOME ADDRESS.

Ross Fork, Ida.

DATE OF RECORD

ACADEMIC DEPARTMENT.

INDUSTRIAL DEPARTMENT.

DORMITORY.

OUTING

SPECIAL REMARKS.

ROOM
NO.

Scholarship

Conduct.

Shop.

Ability.

Conduct.

Room
No.

Neatness

Conduct

Ability.

Conduct.

Apr. '07

Nov.

Medium

Ex.

Apr. '08

4 1/2

Good

Ex.

Jan. '09

Outing

July '09

"

Jan. '10

"

July '10

4

Poor

Ex.

D.R.

V.G.

E

V.G.

E

F.G.

F.G.

July 1911

Outing

Fair

"

Fair

Good

Fair

V. Good

V. Good

V. Good

PRESENT NAME

E Georgina Bartlett
Mrs. Antone Leclair

INFORMATION REGARDING RETURNED STUDENTS

PART 1

REPORT BY NONRESERVATION SUPERINTENDENT OR RESERVATION SCHOOL PRINCIPAL

SCHOOL, Carlisle, Pa, June, 1913
Name, Georgina Bartlett; Sex, F; Age, 19; Deg. Indian Blood, 1/2
Belongs: State, Idaho; Agency, J. H. Hall; Tribe, Bannock
Home address, whose care, etc., Herbert Bartlett, Ross Fork, Idaho
Grade in school, 3; health, Good; height, 5 ft. 2 in; weight, 108
Number months instruction given pupil in each school department, including music, _____
Course completed, _____; years in this school, 7
Years spent in other schools and names of schools, _____
Character and disposition, Good
Recommended for what positions, suitability in order named: 1. _____
2. House work; 3. _____; 4. _____
Remarks: Very poor eyesight.
_____, Supt.

PART 2

REPORT BY RESERVATION SUPERINTENDENT

AGENCY, _____, 1913
Date pupil returned from school, _____; employed since return as follows: _____
Are home and local conditions favorable? _____
Should he receive assistance to find employment? _____
At what employment do you think he would do best? _____
Remarks: _____
_____, Supt.

SUGGESTIONS FOR SUPPLYING THE INFORMATION REQUESTED ON THIS BLANK

1. The report of nonreservation school Superintendent should be made at the time or a little before the pupil leaves school, whether at the end of the school year or during the school year, provided the pupil is 18 years of age or over, or younger, if for any special reason the pupil is quitting school permanently. As soon as this report is received, or at least very soon after the pupil returns home, the Supervisor of Indian Employment will correspond with the returned student for the purpose of getting more in personal touch with him and finding out something about his wishes, etc. His answer will be attached to and filed as part of this report.

2. Health, height, and weight of returned students are sometimes very important in placing them properly; height and weight could be approximated very satisfactorily, though from the pupil records now in use all information called for in part 1 of this blank can readily be obtained and be definite.

3. The State, agency, and tribe are important, and where the pupil is not attached to any agency this fact should be stated and the Superintendent should give all available information as to the home and local conditions surrounding the pupil.

4. Where the outgoing pupil has passed the civil-service examination for any position, this fact should always be noted, giving position for which examination was taken.

5. It should be remembered that the Supervisor of Indian Employment can but seldom have a personal acquaintance with the outgoing student, and that he must depend on the information furnished in this report for his basis of action in behalf of the pupil.

6. The degree of Indian blood should always be given, as this fact largely determines how much effort will be made on behalf of any particular returned student; qualifications being equal, or nearly so, the preference will be given to those having the greatest degree of Indian blood.

7. This report should be forwarded promptly to the Supervisor of Indian Employment, Indian Office, Washington, D. C.

8. Reports on students from reservation schools should be made only as to those who leave the schools at 18 years of age, or older, and who will probably not go away to school.

9. If part 1 of this report is made out by the principal of a reservation school, the reservation Superintendent should supply information called for in part 2 if the principal is not informed as to home surroundings and local conditions. Such information is essential to a proper understanding of the difficulties and needs of the pupil.

10. When part 1 is made out by a nonreservation Superintendent, this blank will be sent by the Supervisor of Indian Employment to the Superintendent of the reservation where the outgoing student belongs. He should fill out part 2 and return the blank as promptly as possible, for practically nothing can be done until the information called for in part 2 is supplied.

Information under the heading "Employed since return as follows," will be valuable only in cases where the pupil has been home for some time.

OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

Idaho

12

Name of Student *Georgia Bartlett*

Home Address *Herb. Bartlett, Ross Fork, Tribe Panuoch*

Age at Entrance *11* Date of Entrance *8-29-'05* Shop

Patron *Herbert Smith* Locality

Address *Cinnaminson, N. J.* R. R. Station

Recommended by Grade in School

Grade of Home Church

Date of Outing *1-17-'12* Date Returned *8-8-'12* Wages

Days in School

Conduct

Ability

Health

Earnings

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

<i>7</i>	<i>8</i>	<i>9</i>	<i>10</i>	<i>11</i>	<i>12</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	
						<i>5</i>	<i>19</i>	<i>16</i>	<i>19</i>	<i>16</i>	<i>18</i>	
						<i>v.g.</i>	<i>4</i>	<i>4</i>	<i>4</i>	<i>4</i>	<i>v.g.</i>	
						<i>"</i>	<i>4</i>	<i>4</i>	<i>4</i>	<i>4</i>	<i>4</i>	
						<i>"</i>	<i>4</i>	<i>4</i>	<i>4</i>	<i>4</i>	<i>4</i>	
												<i>5.</i>

4 4.

4 4.

4 4.

5. 625

12

[illegible]

Grade of Home	Church	Health
Good	Methodist	Gd G Y & Ex. Ex Y. Ex Ex Ex

Date of Outing	Date Returned	Earnings	Wages
Apr. 8-1908	4-7-'10		

[illegible][illegible]

NO.

United States Indian School Hospital,

Carlisle, Pennsylvania.

YEAR 1913.

TRIBE

FULL. ONE

NAME Georgina Bartlett

AGE

DIAGNOSIS Sprained back

ADMITTED May 28.

DISCHARGED May 30

RESULT Good

VISITING PHYSICIAN:

RESIDENT PHYSICIAN:

Q R. Allen

H B. Frazer

REMARKS:

Patient Georgina Bartlett Carlisle, Pa. May-27- 191 3 Physician Frederic and Allen
 Address _____ Nurse Frances Roberts

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
					May-27-'13				Hurt Back
					May-28-'13				
7:00 A.M.	98.3	66	24						
5:00 P.M.	99	66	22						
					May-29-'13				
7:00 A.M.	99.1	63	22	12:30	Iron Mixture				
5:00 P.M.	99	52	18	6:00	" "				
					May-30-'13				
				7:00	Iron mixture				
				12:30	Iron mixture				
				6:00	Iron mixture				

NO.

United States Indian School Hospital,

Carlisle, Pennsylvania.

YEAR 1913.

TRIBE

FULL. ONE

NAME Georgia Bartlett

AGE

DIAGNOSIS Tonsillitis

ADMITTED Mar 14.

DISCHARGED Mar 19.

RESULT Good

VISITING PHYSICIAN:

RESIDENT PHYSICIAN:

A. R. Allen

H. B. Fraher

REMARKS:

Case No. _____

DIAGNOSIS

Revise

Notes of Case

Name George Washington Bartlett M.F.

Age _____ S.M.W.

Nativity.....

Occupation.....

Residence-----

Date of admission Mar 14-13

Diet 4:30 PM.

Treatment

Result

[illegible]

Copyright, 1885, by James C. Wilson, M.D.

Published by J. B. Lippincott Company, Philadelphia, Pa.

Patient

Barrett

Carlisle, Pa.

191

Physician

Address

Nurse

Rosie Heaney

H.

T.

P.

R.

H.

Medicine

H.

Nourishment

H.

Remarks

*Mar 19-13**700**984 92 18*

Patient *Georgina Bartlett* Carlisle, Pa.

191

Physician

Address

Nurse

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
					Mar-17-'13				
				5:15	throat swab				
				6:15	Ton tab				
				7:15	throat swab				
				8:15	Ton tab.				
				9:15	throat swab.				
700	98	60	20		Mar 18				
600	78.2	72	18	8:15	Ton's Tab				
				9:00	Throat swab				
				10:00	Ton's Tab.				
				11:00	Throat swab.				
				12:00	Ton's Tab				
				1:00	throat swab				
				2:15	Ton tab				
				3:15	throat swab				
				4:15	Ton tab				
				5:15	throat swab				
				6:15	Ton tab				
				7:15	throat swab				
				8:15	Ton tab				

Patient

Sergeant Butcher, Carlisle, Pa. Mar 16

1913

Physician

Fralic & Allen

Address

Nurse

P. H. Healey

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
				11 ⁰⁰	Swab				
				12 ⁰⁰	Ton's Tab				
				1 ⁰⁰	Swab				
				2 ⁰⁰	Ton's Tab				
				3 ⁰⁰	Swab				
				4 ⁰⁰	Ton's Tab				
				5 ⁰⁰	Swab				
				6 ⁰⁰	Ton's Tab				
				7 ⁰⁰	Swab				
				8 ⁰⁰	Ton's Tab				
7 ⁰⁰	98	60	22		Mar 17				
8 ⁰⁰	97	72	18	8 ⁰⁰	Throat Swab				
				9 ⁰⁰	Ton's Tab				
				10 ⁰⁰	Throat Swab				
				11 ⁰⁰	Ton's Tab				
				12 ⁰⁰	Throat Swab				
				1 ⁰⁰	throat swab.				
				2 ⁰⁰	Ton's Tab				
				3 ⁰⁰	throat swab				
				4 ⁰⁰	Ton's Tab.				

Patient Georgina Bartlett Carlisle, Pa. Mar - 14 - 13 191
Address _____

Physician Allen E. Fratic
Nurse Rose Leaney

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
					<u>Mar - 14 - 13</u>				
					<u>Mar 15 - 13</u>				
99	80	2.0	800		Ton. Tab				
98	92	1.8	900		Throat Swab				
			1000		Ton. Tab				
			1100		Throat Swab				
			1200		Ton. Tab				
			1.00		throat swab				
			2.00		ton. Tab				
			3.00		throat swab				
			4.00		ton. Tab				
			5.00		throat Swab				
			6.00		ton. Tab.				
			7.00		throat swab				
			8.00		cough mix				
			9.00		throat swab.				
					<u>Mar 16</u>				
7.00	98.3	80	18	800	Ton. Tab				
6.00	98.2	74	20	900	Throat Swab				
			1000		Ton. Tab				

NO.

United States Indian School Hospital,

Carlisle, Pennsylvania.

YEAR

1912

TRIBE

FULL.

ONE

NAME

Isaguna Bartlett

AGE

DIAGNOSIS

Ints

ADMITTED

Sept 10.

DISCHARGED

Oct 12

RESULT

Improved.

VISITING PHYSICIAN:

RESIDENT PHYSICIAN:

A. R. Allen

H. B. Frazier

REMARKS:

Discharged from Hospital
Due to measles here.

DIAGNOSIS

Notes of Case

Age _____ S.M.W.

Nativity.

Occupation.

Residence

Date of admission Sept 10th 98 10:15 am

Diet

Treatment

Result

Sept

[illegible]

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Published by J. B. Lippincott Company, Philadelphia, Pa.

Patient Georgina Bartlett Carlisle, Pa., Oct 2nd. 1912 Physician Francis
 Address _____ Nurse Mary Bailey

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
5:30	98	80	36		Oct 3rd.				Out of bed.
7:30 A.M.	98.4	82	22						
5:30 P.M.	98	82	24						
7:30 A.M.	98.1	80	26		Oct 4th.				
5:30 P.M.	98	74	20						
				7:30	apt. in eye				
7:30 A.M.	98	67	16		Oct 5th.				
5:30 P.M.	99	60	24						
7:30 A.M.	98	98	14		Oct 6th.				
5:30 P.M.	98	80	16						In bed.
7:30 A.M.	98	70	18		Oct 7th.				
5:30 P.M.	98.3	94	24	8:30	atrop in eye.				
7:30 A.M.	98	88	16		Oct 8th.				
5:30 P.M.	97.2	100	20						
8 A.M.	98	90	26		Oct. 9th.				
5 P.M.	98	88	14	8:30	atropine.				
8 A.M.	98	80	16		Oct 10th.				
5 P.M.	98.1	80	16	12:30					
				8:30	atropine				

Patient Gertrude Barlett Carlisle, Pa., Sept. 24 1912 Physician F. J. J. J.
 Address _____ Nurse Mary Bailey

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
8:15	98.			2:30	Atropine			10:00	Anenama
					Sept 24			10:20	BM Good.
3:30	98.3	78	24	2:30	Atropine				
4 P.M.	99.								
3:30	99				Sept 25				
				2:30	Atropine				
					26th				
7 am	98.			8:00	Atropine				
5 P.M.	98.	70	22						
					Sept. 27.				
2:30 am	98	66	24						out of bed
5 P.M.	98.4	76	30						
7:30 am	98	80	30		Sept. 28th.				
7:30 am	98	80	24		Sept. 29th.				
5:00	99	64	24						
4:30	98.2	76	20		Sept. 30th.				
5:30 P.M.	98	100	32						
4:30 am	99	74	28		Oct 1st				
5:30 P.M.	98	99	38	9:00	Atropine				
7:30 am	98	82	26		Oct 2nd.				

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
Nov	98.2			8:00	1 dr Depsin				
3.30	98			5:00	5 gtt Nux vom.				
				8:00	" " " "				
					Sept 17				
Nov	98.2			8:00	1 dr Nux Vom	6:30	no breakfast		
				8:30	" " " "				
3.30	100			9:00	1 dr Nux Vom				
				9:30	" " " "				
				10:00	" " " "				
				10:30	" " " "				
3.30	100			11:00	" " " "				
				11:30	" " " "				
				12:00	" " " "				
					Sept 19				
Nov	98.								
3.30	100								
					Sept 20				
Nov	98								
Nov	97.4								
3.30	98.5				Sept 21				

Patient Georgina Bartlett Carlisle, Pa., Sept 10 191 2 Physician _____
 Address _____ Nurse Aigner Bartholomew

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
330	79	81	24		Sept 10.			10:30	Ice to eyes.
8.00	97							12:00	" " "
					Sept 11			3:30	" " "
330	984	78	22		Sept 12.			8.00	" " "
8.00	97							12:00	" " "
330	98				Sept 13.				
8.00	98								
330	983				Sept 14				
8.00	98								
330	991				Sept 15				
8.00	982								
400	992								

DIAGNOSIS

Notes of Case

Name Leorgina Earle M.F.

Age _____ S.M.W.

Nativity 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120 121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200 201 202 203 204 205 206 207 208 209 210 211 212 213 214 215 216 217 218 219 220 221 222 223 224 225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243 244 245 246 247 248 249 250 251 252 253 254 255 256 257 258 259 260 261 262 263 264 265 266 267 268 269 270 271 272 273 274 275 276 277 278 279 280 281 282 283 284 285 286 287 288 289 290 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312 313 314 315 316 317 318 319 320 321 322 323 324 325 326 327 328 329 330 331 332 333 334 335 336 337 338 339 340 341 342 343 344 345 346 347 348 349 350 351 352 353 354 355 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371 372 373 374 375 376 377 378 379 380 381 382 383 384 385 386 387 388 389 390 391 392 393 394 395 396 397 398 399 400 401 402 403 404 405 406 407 408 409 410 411 412 413 414 415 416 417 418 419 420 421 422 423 424 425 426 427 428 429 430 431 432 433 434 435 436 437 438 439 440 441 442 443 444 445 446 447 448 449 450 451 452 453 454 455 456 457 458 459 460 461 462 463 464 465 466 467 468 469 470 471 472 473 474 475 476 477 478 479 480 481 482 483 484 485 486 487 488 489 490 491 492 493 494 495 496 497 498 499 500 501 502 503 504 505 506 507 508 509 510 511 512 513 514 515 516 517 518 519 520 521 522 523 524 525 526 527 528 529 530 531 532 533 534 535 536 537 538 539 540 541 542 543 544 545 546 547 548 549 550 551 552 553 554 555 556 557 558 559 560 561 562 563 564 565 566 567 568 569 570 571 572 573 574 575 576 577 578 579 580 581 582 583 584 585 586 587 588 589 590 591 592 593 594 595 596 597 598 599 600 601 602 603 604 605 606 607 608 609 610 611 612 613 614 615 616 617 618 619 620 621 622 623 624 625 626 627 628 629 630 631 632 633 634 635 636 637 638 639 640 641 642 643 644 645 646 647 648 649 650 651 652 653 654 655 656 657 658 659 660 661 662 663 664 665 666 667 668 669 670 671 672 673 674 675 676 677 678 679 680 681 682 683 684 685 686 687 688 689 690 691 692 693 694 695 696 697 698 699 700 701 702 703 704 705 706 707 708 709 710 711 712 713 714 715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730 731 732 733 734 735 736 737 738 739 740 741 742 743 744 745 746 747 748 749 750 751 752 753 754 755 756 757 758 759 760 761 762 763 764 765 766 767 768 769 770 771 772 773 774 775 776 777 778 779 780 781 782 783 784 785 786 787 788 789 790 791 792 793 794 795 796 797 798 799 800 801 802 803 804 805 806 807 808 809 810 811 812 813 814 815 816 817 818 819 820 821 822 823 824 825 826 827 828 829 830 831 832 833 834 835 836 837 838 839 840 841 842 843 844 845 846 847 848 849 850 851 852 853 854 855 856 857 858 859 860 861 862 863 864 865 866 867 868 869 870 871 872 873 874 875 876 877 878 879 880 881 882 883 884 885 886 887 888 889 890 891 892 893 894 895 896 897 898 899 900 901 902 903 904 905 906 907 908 909 910 911 912 913 914 915 916 917 918 919 920 921 922 923 924 925 926 927 928 929 930 931 932 933 934 935 936 937 938 939 940 941 942 943 944 945 946 947 948 949 950 951 952 953 954 955 956 957 958 959 960 961 962 963 964 965 966 967 968 969 970 971 972 973 974 975 976 977 978 979 980 981 982 983 984 985 986 987 988 989 990 991 992 993 994 995 996 997 998 999 1000 1001 1002 1003 1004 1005 1006 1007 1008 1009 1010 1011 1012 1013 1014 1015 1016 1017 1018 1019 1020 1021 1022 1023 1024 1025 1026 1027 1028 1029 1030 1031 1032 1033 1034 1035 1036 1037 1038 1039 1040 1041 1042 1043 1

Occupation _____

Residence.....

Date of admission.....Feb 10-19

Diet 10/30 a.m.

Full.

Treatment

Result.

[illegible]

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NO.

United States Indian School Hospital,

Carlisle, Pennsylvania.

YEAR 1912

TRIBE

FULL. ONE

NAME Georgiana Bartlett

AGE

DIAGNOSIS After care of Eye-operation
in Bluta

ADMITTED Dec 19

DISCHARGED Dec 28

RESULT Healed

VISITING PHYSICIAN:

RESIDENT PHYSICIAN:

A. R. Allen

H. B. Francis

REMARKS:

Case No. _____

DIAGNOSIS

Revise After eye of P. M. Phil
Notes of Case

Name Deorina Bartlett M.F.

Age 20 S.M.W.

Nativity.....

Occupation.....

Residence _____

Date of admission Dec 19th 1911
Diet 5 P.M.

Treatment

Result W. L. Chrysler

[illegible]

Patient

Franklin B. Smith

Carlisle, Pa.,

Dec 26th

1912

Physician

Nurse

Francis J. Allen
Bailey

Address

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
8am	97.3	76	24						
5:30 ^{pm}	98.4	76	18						
					Dec 27 th				
8am	97.4	76	16						
5:30 ^{pm}	99	86	28						
					Dec 28 th				
8am	98	76	24						
						10 ^{am}	discharged		

Patient Georgia Bartlett Carlisle, Pa., Dec 1914 191 2 Physician Frederick Allen
 Address _____ Nurse Mary D. Bailey

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
5:30 ^{PM}	99.1	78	18						
					Dec 20th				
8am	98.4	76	24	8am	Boric Acid ^{to} eye				
5:30 ^{PM}	98.4	80	18	7PM					
8am	98.3	84	14		Dec 21st				
5:30 ^{PM}	99.1	88	31						
					Dec 22nd				
8am	98.1	80	16						
5:30 ^{PM}	99	95	26						
					Dec 23rd				
8am	99.4	84	12						
5:30 ^{PM}	98.3	82	18						
					Dec 24th				
8am	98	65	28						
5:30 ^{PM}	92.2	78	14						
					Dec 25th				
8am	98	82	18						
5:30 ^{PM}	97.2	70	22						

The Carlisle Arrow.

3718

Married, at the Presbyterian Mission on Fort Sill reservation, by the Rev. H. N. Wagner, on September 13, 1913. Mr. Antoine Leblair and Miss Georgina Bartlett.

The groom is an employee of the Agency, being employed in the Blacksmiths shop. He is educated, sober, progressive and a first class man. They start off with good prospects.

E. W. Estep
Supt.

Contributor.