5-192 a.

BRIEF.

APPLICATION OF	
Es Mas	
FOR THE ENROLLMENT OF	***********
FOR THE ENROLLMENT OF	
Luiself	
IN THE INDIAN SCHOOL AT	
Carlesle, Vennsy	Evania
NAME OF AGENCY FROM WHICH PUPIL CAME:	
Marajo Agence,	N. M.
the state of the s	V.1.010,
Date of enrollment,	., 190
0,1	
Term of enrollment, Three (3) years.
NAME OF COLLECTING AGENT:	
TABLE OF COMMONING ACTION .	

Position,	******
	6—870

PHYSICIAN'S CERTIFICATE.

I hereby certify that I have this day carefully examined the above-named child herein proposed for transfer and find have 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 12th day of Hebruary, 1909 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 was voluntary, and I recommend the transfer of the said child. This Hirst day of december, 190 8 CERTIFICATE OF SCHOOL PHYSICIAN. I hereby certify that on _______, I made a careful exami-, the child named in nation of the physical condition of the foregoing application, and found ______ to be _____ I therefore recommend that the said child be _____ enrolled in this school. This _______ day of _________, 190

SPECIAL NOTE.

School Physician.

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.

6-870

APPLICATION FOR ENROLLMENT IN A NONRESERVATION SCHOOL.

(For a child enrolled at an Agency.)

For and in consideration and maintenance in the Unite					ng the care	0
of Savajo (Name of chil.) Parajo (Dribe.)		; M _{(Sc}	ale;	date of birth	1890	;
NAME OF FATHER. (Both Indian and English.)	LIVING OR DEAD,	TRIBE.		BAND.		DEGREE OF INDIAN BLOOD,
Beduga Shi zhoti	Living	Naraj	io		7	Full
NAME OF MOTHER. Ahelsan	Living .	Navaj	·0			Full
enrollment in said school for all the rules and regulations to The said child has been e	a period of .	(Not less than 3.) chools.	years,	ntarily consent		P
NAME OF SCHOOL.	DATE OF ENROLLMENT,	DATE OF DISCHARGE.		CAUSE.	GR	ADE.
Navajo Trug Och.	1901	1908	Exp.	Terms	2n	d.
2.				-		
3.						
4.						
) (Pare	Eg Mig	3	7
Two witnesses:	au	P. O. address		rora	Ars	3000 6-870
Low A. Sull	wan					

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.)

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.

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL 735

NAME OF PUPI	I Ney	Ez		DATE 9 1012419/0
AGE 1 9. YEARS	NEW ST	UDENT. TRIBE	wajo	STATE Oryone
DEGREE OF INDIA	4	- ull	U	······································
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PALPATION	non	ual	***********	
PERCUSSION	no	low		
AUSCULTATION -	RESONANCE		-al)
HEART SOUNDS	γ	lorma	l	
MENSURATION {	INSP. 38 EXP. 35	RESPIRATION	ی	U PULSE 2
TEMPERATURE		. Неібнт. 5 гт		
VISION	4.7			_2
	V. 1	VACCINATION	30.0.	-P.)
FAMILY HISTORY:	V. 1	Condition of Health.	Dead.	Cause of death.
	Living.		,	Cause of death.
FAMILY HISTORY:	Living.	Condition of Health.	,	Cause of death.
FATHER	Living.	Condition of Health.	,	Cause of death.
FATHER MOTHER	Living.	Condition of Health.	,	Cause of death.
FAMILY HISTORY: FATHER MOTHER BROTHERS	Living. yes yes 3	Condition of Health.	,	Cause of death.
FAMILY HISTORY: FATHER MOTHER BROTHERS SISTERS	Living. yes yes 3	Condition of Health.	,	Cause of death.
FAMILY HISTORY: FATHER MOTHER BROTHERS SISTERS	Living. yes yes 3	Condition of Health.	,	Cause of death.
FAMILY HISTORY: FATHER MOTHER BROTHERS SISTERS. PERSONAL HISTO	Living. yes yes 3	Condition of Health.	,	Cause of death.

HOSPITAL RECORD	

EXAMINATION	FOR OUTING:
DATES;	CONDITION:
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DATES: m.f. 24-1910 Mar. 14-1911	The second secon
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m.f. 34-1910 Mar. 14-1911	Jood CK.

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL	ez he	2		DATE (1) 19,09
. ~	1	DENT. TRIBE		STATE arizona
DEGREE OF INDIAN BI	5	el	0	0
INSPECTION INDIAN BI		develo	£	nent
INSPECTION	00		<i>y</i>	
PALPATATION.	n	mal		
PERCUSSION A	w	sal.		
	2			
(Reso	NANCE 21		l	
Auscultation	MURMUR 2	lu-	21	
HEART SOUNDS.	w	ial		
(Insp.	38		. ,	/ 0
MENSURATION Exp.	34	RESPIRATION	/.6	PULSE 68
TEMPERATURE 98	degs.	HEIGHT 5 FT	8 3/4 1	weight 50 Lbs.
10/,		Vaccination =	li.	and a co-
VISION	·····	VACCINATION -	V	196-1
FAMILY HISTORY:		Reva		
	Living.	Condition of Health.	2 - Dead.	Cause of death.
		Condition of Health.		
FAMILY HISTORY:		Condition of Health.		
FATHER		Condition of Health.		
FATHER	Living. Mes Yes 5	Condition of Health.		
FATHER		Condition of Health.		
FAMILY HISTORY: FATHER	Living. Mes Yes 5	Condition of Health.		
FAMILY HISTORY: FATHER MOTHER BROTHERS	Living. Mes Yes 5	Condition of Health.		
FAMILY HISTORY: FATHER MOTHER BROTHERS SISTERS PERSONAL HISTORY:	Living. Yes Yes 6	Condition of Health.		
FAMILY HISTORY: FATHER	Living. Yes Yes 6	Condition of Health.		
FAMILY HISTORY: FATHER MOTHER BROTHERS SISTERS PERSONAL HISTORY:	Living. Yes Yes 6	Condition of Health.		

(over)

77	
HOSPITAL RECORD	

EVAMINATION	FOR OUTING.
EXAMINATION	FOR OUTING:
EXAMINATION	FOR OUTING:
EXAMINATION Dates:	FOR OUTING: CONDITIONS:
Dates:	Conditions:
Dates:	Conditions:
Dates:	Conditions:
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Dates:	Conditions:
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DATES: Uhril 6, 1909 Jan, 26-1910	Conditions:
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DATES: Uhril 5, /909 Jan. 26-1910	CONDITIONS: Good Good

OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

San Carles and Advanced	001114	IG RECORD -	CARLISLE	INDU	STRI	AL S	снос)L								
Name of Student Home Address Tribe																
Age at Date of Entrance	Shop			JAN.	FEB.	MAR.	APR.	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.	TOTAL OR AVERAGE
Patron	Locality		Days in School													
Address	R. R.	. Station	Conduct													
Recommended by		Grade in School	Ability													
Grade of Home	Church		Health													
Date of Date Outing Retu	e urned Wage	s	Earnings													
					**											
;w																

YAWMAN A ERRE MEG. CO., ROCHESTER N. Y.

441037 3M, 4-09

INFORMATION REGARDING RETURNED STUDENTS

PART 1

REPORT BY NONRESERVATION SUPERINTENDENT OR RESERVATION SCHOOL PRINCIPAL

SCHOOL, July	5,1912. ,191
Name, Sylva ; Sex. Belongs: State, Wy , ; Agency, Mya Home address, whose care, etc., Ar Doff Grade in school, II B ; health, good	, M.; Age, 22; Deg. Indian Blood, Tw
Belongs: State, Win, ; Agency, Mara	jo ; Tribe, navaho
Home address, whose care, etc., The Doff	ance, aux
Grade in school, IIB; health, good	; height, ; weight, 1604
Number months instruction given pupil in each school d	epartment, including music,
Course completed,	
Years spent in other schools and names of schools,	
Character and disposition, Character gene	rally Good, Disposition sullen
Character and disposition, Character gene and disagreea Recommended for what positions, suitability in order as	ble. amed: 1. Dairyman
2. Farm Laborer ; 3. Teamster	; 4. Laborer
Remarks: This boy is sullen and moody	but works well when not sullen.
	, Supt.
PART	2
REPORT BY RESERVATION	N SUPERINTENDENT
AGENCY,	, 191
Date pupil returned from school,	
Are home and local conditions favorable?	
Should he receive assistance to find employment?	
At what employment do you think he would do best?	
Remarks:	
6—2419	, 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, Denver, Colo.

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.

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NAME.		,		TRI					ENT OR GUA				
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DATE ENROLLED.		1	TERM.	7)	,	A	GE.	ном	E ADDRESS	1 Je	dug	a Shi zhoti Defiance Asis SPECIAL REMARKS.	
Feb. 1	6,1	909.	The	ree	yea	rs	19	(Ct)	ath.)) 9	tt. a	Defiance, Usis	
DATE OF RECORD		DEMIC DEPA		100000000000000000000000000000000000000				STATE OF THE PARTY OF				SPECIAL REMARKS.	
	NO.	Scholarship	Conduct.	Shop.	Ability.	Conduct.	Room No.	Neatness	Conduct,	Ability.	Conduct.		
July 19 Jan. 110 Jan. 11 July 11	3	Good	Good	Ten.	good	Dood	305			good	good		
Jan . 10	2	(),	Eye,	art	9000	Food	207	9000	2000	0	4		
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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	Fred	Fishbru	m, lea	lib Po
Pupil's name		Neg		
General health of the pupil		Book		
Has pupil been ill the past to				
Name of disease				
Name and address of the phy	sician in atten	dance Ma,	at the	ochrol
Does the pupil have a cough	?			
For how long has he had it?				
Give the pupil's weight				
Has the pupil any trouble wit	h the eyes?	No		
Are the eyelids inflamed?				
Remarks: 69 was	b in	three of	lap ?	The -
conflained		, '		
as loent.	him &	to the	achoo	lfor
treatment the	ecan	- bac	k Sm	. Hpr.
30. A. In cases of serious illness, notify the sche		he physician in attendan		
an cases of serious fittlesst notify the sent	The second secon		HILANDER CHIEF TO THE PARTY OF	

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 Fred le Tishburn, Carlel
Pupil's name & g. feg.
General health of the pupil 9000
Has pupil been ill the past two months?
Name of disease
Name and address of the physician in attendance
Does the pupil have a cough?
For how long has he had it?
Give the pupil's weight 157 lb.
Has the pupil any trouble with the eyes?
Are the eyelids inflamed?
Remarks:

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

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 Fred & Fishburn
Pupil's name & g. Koz
General health of the pupil
Has pupil been ill the past two months?
Name of disease
Name and address of the physician in attendance
10
Does the pupil have a cough?
For how long has he had it?
Give the pupil's weight /38
Has the pupil any trouble with the eyes?
Are the eyelids inflamed?
Remarks:

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

REPORT AFTER LEAVING CARLISLE 563757 3M-2-11 NAME AT CARLISLE PRESENT NAME INFORMATION THROUGH DATE ADDRESS OCCUPATION GRADE ITEMS OF INTEREST

CARLISLE INDIAN INDUSTRIAL SCHOOL 50321 Three you. Oscar Servi, newtown, Pa Hilson Jones, Tradesville, Par 8-31-18 O. Dishburn R# 9 Carliste Ja. 7-6-11 THE SHAW-WALKER CO., MUSICELIN. 79104 Months in school before Carlisle. 84 mos Navajo Trng. Sch. 61-08 Frade entered at Carlisle, Grade at day of Discharge, Trade or Industry, Church, Presbyterian Brot by Peter Vaguette, Supt. Fet. Defiance ariz. Dre. statements gives far their name Hosteen beta wa

Department of the Interior.



Mr. M. Friedman

Supt. U. S. Indian School

Carlisle

6-3305

Pennsylvania

526
January 10, 1913.
Name Con h hole
(Please give name by which enrolled and also present or married name.)
Tribe Maraho
Present Address Indian Wells aris.
Former Address Fit Defiance, Orin,
(Address from which we heard from you last.)
Present Occupation
Remarks:

Department of the Interior.



Mr. M. Friedman

Supt. U. S. Indian School

Carlisle

Pennsylvania

6-330E

Eg nez agents file