

Monks is shove before Cenlali. Ir Churelo

Nice no Out school

## Mr. M. Friedman

Supt. U. S. Indian School

## Carlisle

## Pennsylvania

Name

(Please give name by which enrolled and also present or married name.)
Tribe 6 hep pexcou

Present Address
 POPPer

Former Address
(Address from which we heard from you last.)
Present Occupation
farmed.

Remarks:
BRIEF.
$\because$
APPLICATION OF

Mary Hoder
FOR THE ENROLLMENT OF
Harry Hodder
IN THE INDIAN SCHOOL AT
Carlisle,Ponn。
NAME OF AGENCY FROM WHICH PUPIL CAME:
White Earth, Minn.Date of enrollment,191

Term of enrollment, $\qquad$ (------------) years.

[^0]Position,

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 $\qquad$ Carlisle Pen.
$\qquad$ of $\qquad$ Harry Hodder $\qquad$ ; M $\qquad$ ; date of birth Dec, 1, 1895. $\qquad$ (Name of child.)
(Tribe.)

| NAME OF FATHER. |
| :---: |
| (Both Indian and English.) |


| LIVING OR |
| :---: |
| DEAD. |

NAME OF MOTHER.

I, Mary (Handed fan, or next of kin.) do hereby voluntarily consent and agree to $\qquad$
 all the rules and regulations for Indian schools.

The said child has been enrolled in the following schools:
NAME OF SCHOOL.
P. O. address:

Many Holden
Detroit

Two witnesses:


## 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 $\qquad$ day of Lech.....


## 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 $\qquad$ was voluntary.
(Parent, guardian, or next of kin.)
(Here state whether the child lives within reach of a public school, whether the State laws permit it to enroll therein, and if it lives near the public school why it can not attend such school.)

I recommend the transfer of the said child.


I hereby certify that on $\qquad$ I made a careful examination of the physical condition of (As soon after arrival as possible.) the child named in the foregoing application, and found $\qquad$ to be $\qquad$

I therefore recommend that the said child be $\qquad$ enrolled in this school.

This $\qquad$ day of 191

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 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.

## 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.

NAME dada les Sex $\left\{\begin{array}{l}\text { Male. } \\ \text { Female }\end{array}\right.$

 Condition of, Eyes...Height .-. 5 ft. .-.-----------ins. Weight 125

Mensuration $\left\{\begin{array}{l}\text { Insp. } \\ \text { Exp. } \\ \text { E }\end{array}\right.$




Heart Lhung fuel we gulas,

## (Menstruation)

FAMILY HISTORY.


## Personal history

$\qquad$

Present condition

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.

CMSE RECORD, 5-354.
Name

 (On WeCl 1,19/1)


NAME AT CARLISLE

PRESENT NAME

| DATE | INFORMATION THROUGH | ADDRESS | OCCUPATION | ITEMS OF INTEREST | GRADE |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 1914 |  | Ponsford Ininn | Sasner |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  | $5$ |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |


[^0]:    NAME OF COLLECTING AGENT:

