

CARLISLE INDIAN INDUSTRIAL SCHOOL

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

3798

| | | | | | | | |
|-----------------------------|---------------------------------|---|--------------------------------|-----------------------------------|--|---------------------|-----------|
| NUMBER 5253 | ENGLISH NAME Paul Good Iron | AGENCY Standing Rock | NATION Sioux | | | | |
| BAND | INDIAN NAME Grandfather-john | HOME ADDRESS Runs in middle Shields, S. D. | | | | | |
| PARENTS LIVING OR DEAD L | BLOOD full | AGE 18 | HEIGHT 6-1 | WEIGHT 158 | FORCED INSP. 38 | FORCED EXPR. 35- | SEX. M |
| FATHER | MOTHER | ARRIVED AT SCHOOL Oct. 3, 1914 | FOR WHAT PERIOD Three years | DATE DISCHARGED Sept. 14, 1915 | CAUSE OF DISCHARGE Unworthy and Undesirable | | |
| TO COUNTRY | PATRONS NAME AND ADDRESS | | | | | FROM COUNTRY | |

SHAW-WALKER, MUSKOGEE, MICHIGAN. 43445

Months in school before Carlisle, 63

Grade entered at Carlisle,

Grade at date of Discharge,

Trade or Industry,

Church, Catholic

46 mi. to public school

134

STANDING ROCK
AGENCY, N. D.
RECEIVED
SEP 19 1914
FILE 825
No. 3345

5-192 a

BRIEF.

APPLICATION OF

John Reuss Middle

FOR THE ENROLLMENT OF

Paul Good Iron

IN THE INDIAN SCHOOL AT

Carlisle Plur.

NAME OF AGENCY FROM WHICH PUPIL CAME:

Standing Rock Agency.

Date of enrollment, _____, 191

Term of enrollment, _____ (_____) years.

NAME OF COLLECTING AGENT:

Position, _____

P

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 Penn.

of Penn
Paul Good Iron; male; date of birth Dec 5-1897;
(Name of child.) (Sex.)
Sionx
(Tribe.)

| NAME OF FATHER. (Both Indian and English.) | LIVING OR DEAD. | TRIBE. | BAND. | DEGREE OF INDIAN BLOOD. |
|--|-----------------|--------------|---------------------|-------------------------|
| <u>Jerome Good Iron</u> <u>wagi</u> <small>NAME OF MOTHER.</small> | <u>dead</u> | <u>Sionx</u> | <u>See the Bear</u> | <u>full</u> |
| <u>Emilia Good Iron</u> <u>makpiya</u> | <u>dead</u> | <u>Sionx</u> | <u>See the Bear</u> | <u>full</u> |

I, John Russ in middle ^{Grand Father}, do hereby voluntarily consent and agree to his
(Parent, guardian, or next of kin.)
 enrollment in said school for a period of three 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. |
|---------------------|---------------------|--------------------|--------------------|--------------|
| <u>Corcoran</u> | <u>1902</u> | <u>1910</u> | <u>transferred</u> | <u>Fifth</u> |
| <u>Fort Quin</u> | <u>1911</u> | <u>1913</u> | <u>transferred</u> | <u>Fifth</u> |
| <u>Pratt School</u> | <u>1913</u> | | | |
| <u>1.</u> | | | | |

John Russ in middle ^{Grand Father}
(Parent, guardian, or next of kin.)
 P. O. address: Shiloh N. Dak. ^{mark.}

Two witnesses:

William Guston
William Smite

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 24 day of Sept, 1914

Oscar A Duncan

Physician at Standing Rock Agency.

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 John Sims in Middle 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.

This 26 day of Sept, 1914

Albert H. Keale

Agent or Superintendent.

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 _____ (As soon after arrival as possible.)

I therefore recommend that the said child be _____ enrolled in this school.

This _____ 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.

I hereby certify that I have this day carefully examined the above-named child and find that the same is in good physical condition and is well adapted for removal from the reservation to the limits of other pupils.

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.

134.

NAME Paul Good Iron Sex Male Female

Tribe Full Sims State North Dakota Oct 5th, 1914

Age 18 years Respiration 18 Condition of, Eyes Trachoma -

Height 6 ft. 1 ins. Ears Normal

Weight 167 1/4 lbs. Mensuration { Insp. 37

Temperature 98. Exp. 33 1/2 Throat Negative

Pulse 72 Vaccination Positive Cervical glands 4

Vision Good Skin Acne

Inspection -

Palpation Negative

Percussion "

Auscultation "

Heart 4

(Menstruation) -

FAMILY HISTORY.

| | LIVING. | CONDITION OF HEALTH. | DEAD. | CAUSE OF DEATH. |
|----------|----------|----------------------|------------|---------------------|
| Father | | | <u>Yes</u> | <u>Tuberculosis</u> |
| Mother | | | <u>Yes</u> | <u>" "</u> |
| Brothers | <u>1</u> | <u>Good</u> | | |
| Sisters | | | <u>1</u> | <u>Infancy</u> |

Personal history Measles,

Present condition -

Walter Rindtloff, 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.

NAME Paul Goodiron Sex Male. Female.

Tribes Full } Sioux State N. Dak Sept. 24, 1914

Age 18 years Respiration normal Condition of, Eyes good

Height 6 ft. 1 ins. Mensuration { Insp. 38 Ears good

Weight 158 lbs. { Exp. 35 Throat Enlarged tonsil

Temperature 98.6 see note Vaccination yes Cervical glands good

Pulse 78 Vision 10/20 Skin good

Inspection normal

Palpation normal

Percussion normal

Auscultation normal

Heart normal

(Menstruation) _____

FAMILY HISTORY.

| | LIVING. | CONDITION OF HEALTH. | DEAD. | CAUSE OF DEATH. |
|-----------------------|---------|----------------------|-------|------------------------|
| Father | | | ✓ | <u>Tuberculosis.</u> |
| Mother | | | ✓ | " |
| Brothers <u>one</u> } | ✓ | <u>good</u> | | |
| Sisters <u>one</u> } | | | ✓ | <u>died in infancy</u> |

Personal history has had not sickness except sore eyes
two years ago.

Present condition Has quinsy at present which account for
raise in temperature

Edward Duncan, 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.

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134

Sept. 14th, 1915.

Mr. C. C. Covey,
Superintendent, Standing Rock Agency,
Fort Yates, N. D.

Dear Mr. Covey:

Paul Good Iron was brought to my office this forenoon and a report was made that all efforts to keep him at work and in school are failing. When I questioned Paul about the charges he stated that he does not know himself whether he wants to settle down to earnest work or not. Believing that time cannot be given to such a young man it is being arranged to have him leave here this evening. At his request transportation for his passage to Shields, North Dakota, will be procured for his use and he has advised me that he will be but two miles distant from his grandfather's home when he arrives at that station.

I am sorry to take such drastic action in this case, and only because Paul is old enough to know better is his dismissal being effected.

Very respectfully,

HKM.

Superintendent.

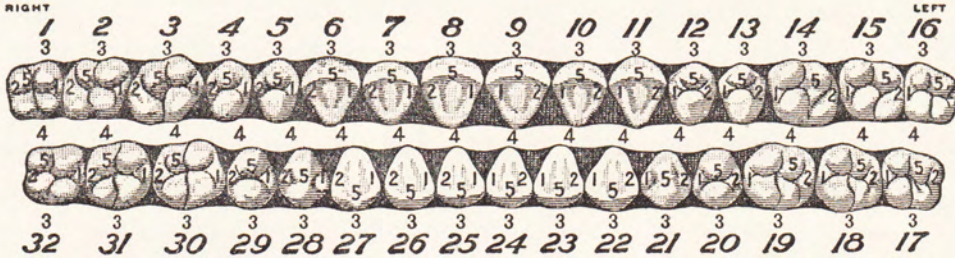
(Copy to Mr. Runs-in-the-Middle.)

PUPIL'S DENTAL RECORD.

Name Paul Goodson Age _____ Sex M

School _____

Date of examination December 2, 1917



| NO. | SUB. NO. | CONDITION OF TEETH, AND WORK REQUIRED. | WORK ACTUALLY DONE. | DATE, 191 <u>7</u> |
|------------|----------|--|---------------------|--------------------|
| <u>18.</u> | <u>5</u> | <u>Amal.</u> | <u>Amal</u> | <u>Dec. 7</u> |
| <u>18</u> | <u>5</u> | <u>Amal</u> | <u>Amal</u> | <u>11</u> |
| <u>20</u> | <u>5</u> | <u>Cleaning</u> | <u>Amal</u> | <u>11</u> |
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No. *5253* NAME. *Goodiron, Paul* AGE. *18* TRIBE. *Sioux* DEGREE OF INDIAN BLOOD. *7* NAME OF AGENCY AND RESERVATION, IF ENROLLED; IF NOT, POST OFFICE OF FAMILY. *Standing Rock.*

| DATE ENTERED. | Months in school before enrollment here. | IN WHAT GRADE OR ROOM. | | Distance to nearest public school from pupil's home. | REMARKS. | | |
|------------------|--|------------------------|-------------------------|--|--|--------------|--------------------|
| | | On entering here. | At date of this report. | | (Temporarily absent, outing, deserters, on sick leave, special authorities for enrollment, etc.) | | |
| <i>10-3-14</i> | <i>63</i> | <i>7</i> | <i>-</i> | <i>46</i> | To COUNTRY | FROM COUNTRY | DATE DISCHARGED |
| <i>Sept. '15</i> | <i>-</i> | <i>-</i> | <i>V</i> | | | | <i>SEP 14 1915</i> |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | <i>Catholic</i> |

Progress from _____, to _____
 (Date) (Date)

| FIRST YEAR IN THIS SCHOOL | SEPT. | OCT. | NOV. | DEC. | JAN. | FEB. | MAR. | APR. |
|---|-------|------|------|------|------|------|------|------|
| Class or grade..... | | | | | | | | |
| Academic..... standing* | | | | | | | | |
| Industrial..... standing* (Department) | | | | | | | | |
| Musical: Band..... standing* | | | | | | | | |
| Vocal..... standing* | | | | | | | | |
| Orchestra..... standing* | | | | | | | | |
| Department..... standing* | | | | | | | | |
| Physical condition..... | | | | | | | | |

Remarks: _____

3798

DEPARTMENT OF THE INTERIOR

2530-15-225

UNITED STATES INDIAN SERVICE

W J P

STANDING ROCK INDIAN SCHOOL

FORT YATES, - NORTH DAKOTA

June 26th, 1915, JUN 22 1915

Superintendent,

Mr Standing Rock Agency,
Supt. Indian School,
Fort Yates, N.D.

Dear Sir, :-

As I have your favor of the 22nd, enclosing check in excess of \$44.34 to be placed to the credit of Paul Goodiron the Farmers State Bank of Glen Ull Respectfully, deposit to the credit of Paul Goodiron.

W.H.M.

Supervisor in charge.

Very truly yours,

Charles J. Tracy

1-Encl.
6-17.

Superintendent.

DEPARTMENT OF THE INTERIOR

UNITED STATES INDIAN SERVICE

STANDING ROCK INDIAN SCHOOL

FORT YATES, - NORTH DAKOTA

2530-15-225

W J P

JUN 22 1915

Mr. O. H. Lipps,
Supt. Indian School,
Carlisle, Pa.

Dear Sir:-

As recommended in your letter of June 11, 1915, I inclose check No.251 for \$44.34, payable to your order on the Farmers State Bank of Glen Ullin, N. D., for deposit to the credit of Paul Goodiron.

Very truly yours,

Stanley J. Lovey,

1-Encl.
6-17.

Superintendent.

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DEPARTMENT OF THE INTERIOR

UNITED STATES INDIAN SERVICE

STANDING ROCK INDIAN SCHOOL

W J P

FORT YATES, - NORTH DAKOTA

June 11th, 1915.

Mr. C. H. Lipps,
Supervisor in charge,
Carlisle Indian School,

JUN - 2 1915

Mr. Claude C. Covey,
Superintendent, Standing Rock Agency,
Fort Yates, N. D.

Dear Sir:-

My dear Sir: Paul Good Iron a member of this agency who is

now a student of your school writes this office that he is

in need of money. When Paul Good Iron was seen at this office relative to the need of money you mentioned in your favor of the 2nd instant he stated that he would like to have the use.

lease money he thinks must have been received this last year. If such money has accumulated I would recommend that it be sent to me for Paul's use.

Very respectfully,

6-2

EKM.

Superintendent.

lease money

DEPARTMENT OF THE INTERIOR

UNITED STATES INDIAN SERVICE

STANDING ROCK INDIAN SCHOOL

FORT YATES, - NORTH DAKOTA

W J P

Mr. O. H. Lipps,
Supervisor in charge,
Carlisle Indian School,
Carlisle, Pa,

JUN -2 1915

Dear Sir:-

Paul Good Iron a member of this agency who is now a student of your school writes this office that he is in need of money. Please advise if the statment of Paul is correct and the amount required to meet his immediate use.

Very respectfully,

Edward J. Lowry
Superintendent.

62

Please money

134

3795

Sept. 27th, 1915.

Mr. C. C. Covey,
Superintendent, Standing Rock Agency,
Fort Yates, N. D.

My dear Sir:

I enclose herewith my check No. 320 in the amount of \$4.21, which represents the balance of the amount that was left here by Paul Good Iron to pay for his transportation home.

Very respectfully,

Encl.

HKM.

Superintendent.

en 134

Shields, N.D.
Feb. 14-14

Carlisle Indian School
Mr. Oscar H. Sippes
Dear Sir.

Febr. 23rd, 1915.

Mr. John Runs the Center,
Shields, North Dakota.

My dear Sir:

Replying to your favor of February the 14th, this is to advise you that Paul Good Iron was enrolled at this school in the fall of 1914 for a three year period of enrolment, which necessitates his remaining at Carlisle until after the close of the school year in June of 1917.

Assuring you that I will be pleased to have you write me regarding Paul at any time you desire information about him, I remain,

Very truly yours,

HKM.

Supervisor in Charge.

Yours truly, John Runs the Center

Shields, N.D.

Feb. 14-14

Carlisle Indian School.
Mr. Oscar H. Sipps
Dear Sir.

I would like
to ask you one thing.
I had a boy that has
went to Carlisle which
I would like to speak
of that, what I would like
to know about this
boy ^{has to} right come back
from the school. Or
how many more years
yet. Will you please
let me know quick
as possible. You know
I mean Paul Goodiron
Yours truly, John Bunthe center

Information regarding pupils to test eligibility and whether in need of Federal aid.

3 1915
Date of report April 27 1915
Name of child Paul Goodiron Age 19 Grade fifth
Home post office Shields N. Dak.
Tribe Sioux Degree of Indian blood full
How many acres of land do you own 160. A. Location in Sioux County
four miles east of Shields N. Dakota
What is the annual income from your land rent for yearly 10¢ acres
Do you have any other income no. How much
Is your father living no
Father's name Jerome Goodiron
Home post office
Tribe Sioux Degree of Indian blood full.
Is he a citizen no
How much land does he own I dont know. Allotment No.
What is its estimated value I dont know.
What is the annual income from his land I dont know.
Does he have any other income no.
If so, how much
Does your father pay taxes on land or personal property no
Is your mother living no
Mother's name Emma Goodiron
Home post office
Tribe Sioux Degree of Indian blood full.
Is she a citizen
How much land does your mother own 320. A. Allotment No.
What is its estimated value I dont know

