

**CARLISLE INDIAN INDUSTRIAL SCHOOL**  
 DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

3827

NUMBER <del>3207</del> 2608	ENGLISH NAME Delia La Gernier	AGENCY La Pointe	NATION Chippewa				
BAND Bad River	INDIAN NAME	HOME ADDRESS Frank La Gernier R. F. D., Ashland, Wis.					
PARENTS LIVING OR DEAD	BLOOD 5/8	AGE 17	HEIGHT 5-5 1/2	WEIGHT 132 1/2	FORCED INSP. 3 3/2	FORCED EPXR. 55 1/2	SEX F.
FATHER. <input checked="" type="checkbox"/>	MOTHER. <input checked="" type="checkbox"/>	ARRIVED AT SCHOOL Jan. 18, 1911		FOR WHAT PERIOD Five years	DATE DISCHARGED Sept. 17, 1912	CAUSE OF DISCHARGE Failed to return	
TO COUNTRY 5-29-12	PATRONS NAME AND ADDRESS Home On Leave					FROM COUNTRY	

THE SHAW-WALKER CO., MUSKEGON, 79104

Months in school before Carlisle. 8 1/2

Grade entered at Carlisle, .....

Grade at date of Discharge, .....

Grade or Industry, .....

Church. Catholic

Miles to school - 1

Name LaFernier, Delia, Now Myers. Age 3827 Deg. Ind. blood

Address 203 Bellinger St., Eau Claire, Wis.

Information from La Pointe Agency.

Date June, 1914

State Agency

Tribe

POSITIONS FOR WHICH LISTED. SUITABILITY IN ORDER NAMED.

- 1.
- 2.
- 3.
- 4.

Remarks: Married and living at home.

NAME Delia LaFrenes Sex  Male  Female.  
 Tribe <sup>Full</sup> Chippewa State Wis Date Dec 29, 1910  
 Age 17 years Respiration 18 Condition of Eyes Good  
 Height 5 ft. 7 ins. Mensuration { Insp. 37 3/4 Ears Good Condition  
 Weight 130 lbs. { Exp. 35 Throat Normal  
 Temperature 98 1/2 Vaccination Did not take Cervical glands Normal  
 Pulse 72 Vision Fair Skin Normal  
 Inspection Negative  
 Palpation Negative  
 Percussion Negative

Auscultation Negative  
 Heart Normal  
 (Menstruation) Regular not painful

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	41	Good		
Mother	37	Good		
Brothers	12	Good		3 mo's Cholera Infantum
	10			
Sisters	12	Good		

Personal history Had small pox in 1901 - and measles 1905 otherwise has always been healthy.

Present condition In good health at the present time

J. M. Meyer, 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.





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**BRIEF.**

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**Application of**

*Frank La Fernio*

FOR THE ENROLLMENT OF

*Delia La Fernio*

IN THE INDIAN SCHOOL AT

**Carlisle, Pennsylvania**

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NAME OF AGENCY FROM WHICH PUPIL CAME:

*LaPinto*

Date of enrollment, *January 18*, 190*1*

Term of enrollment, *Five* ( *5* ) years

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# Application for Enrollment in a Non-reservation 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 Delia La Fernier; F; date of birth March 10, 1893  
(Name of Child) (Sex)  
Chippewa  
(Tribe)

NAME OF FATHER (Both Indian and English)	Living or Dead	TRIBE	BAND	DEGREE OF INDIAN BLOOD
<u>Frank La Fernier</u> <small>NAME OF MOTHER</small>	<u>Living</u>	<u>Chippewa</u>	<u>Bad River</u>	<u>1/4</u>
<u>Kate La Fernier</u>	"	"	" "	<u>Full</u>

I, Frank La Fernier, do hereby voluntarily consent and agree to her enrollment in said school for a period of five years, and also obligate myself to abide by all the rules and regulations for Indian Schools.  
(Not less than 3)

The said child has been enrolled in the following schools:

NAME OF SCHOOL	DATE OF ENROLLMENT	DATE OF DISCHARGE	CAUSE	GRADE
1. <u>Odench. Day</u>	<u>1900</u>	<u>1909</u>	<u>Completed Course</u>	
2.				
3.				
4.				

Frank La Fernier  
(Parent, guardian, or next of kin)

P. O. address: Ashland, Wis.  
P. J. D.

Two Witnesses:

Susie La Fernier  
Wm. Kasperner

## PHYSICIAN'S CERTIFICATE.

I hereby certify that I have this day carefully examined the above-named child herein proposed for transfer and find her 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 29 day of Dec, 1910

J. M. Meyers  
Physician at Bedonkohe Reservation Agency.  
Kobovito Agency

## CERTIFICATE OF AGENT OR 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 Frank La Frenco  
(Parent, guardian, or next of kin)  
was voluntary, and I recommend the transfer of said child.

This 16 day of January, 1911

J. W. Hoopstall  
Agent or Superintendent.

## SPECIAL NOTE.

This form must be executed in duplicate when a child is transferred from a reservation to a non-reservation 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.

NOTE.—Age limits, fourteen to twenty years. Preferably fourteen to eighteen. Students must be at least one-fourth Indian, preferably full Indian. Special cases beyond the age limit will be given consideration. An industrial course only can be taken and the term reduced to three years, in exceptional cases.



## 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 is living, and if neither of them is 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.

This form is to be used only in transfers from reservations or Indian schools to nonreservation schools.





9827

NAME. <i>Delia La Fernier</i>		TRIBE. <i>Chippewa</i>		PARENT OR GUARDIAN. <i>Frank La Fernier</i>	
DATE ENROLLED. <i>Jan. 18, 1911</i>		TERM. <i>Five years</i>		AGE. <i>17</i>	
HOME ADDRESS <i>Ashland, Wis.</i>					

DATE OF RECORD	ACADEMIC DEPARTMENT.		INDUSTRIAL DEPARTMENT.			DORMITORY.			OUTING		SPECIAL REMARKS.
	ROOM NO.	Scholarship	Conduct.	Shop.	Ability.	Conduct.	Room No.	Neatness	Conduct.	Ability.	

<i>July 71</i>	<i>②</i>										
<i>Dec. '11</i>				<i>Print</i>	<i>Good</i>	<i>Good</i>		<i>E</i>	<i>E</i>		

3827

TRADE RECORD, CARLISLE.

PUPIL *Orlia Lafertier.*

TRADE *Alfina No 6.*

ABILITY *Good. Rather slow.*

CONDUCT *Splendid.*

REMARKS *New Girl - Don't expect herself.*

INSTRUCTOR *E. H. Miller.*



# INFORMATION REGARDING RETURNED STUDENTS

## PART 1

### REPORT BY NONRESERVATION SUPERINTENDENT OR RESERVATION SCHOOL PRINCIPAL

SCHOOL, \_\_\_\_\_, 191

Name, Delia La Fernier; Sex, 7; Age, 18; Deg. Indian Blood, 5/8

Belongs: State, Wis.; Agency, La Pointe; Tribe, Chippewa

Home address, whose care, etc., Frank La Fernier, P.O., Ashland, Wis.

Grade in school, Bus. Dept.; health, Good; height, 5-5 1/2; weight, 132

Number months instruction given pupil in each school department, including music, \_\_\_\_\_

Course completed, Business Course; years in this school, 1

Years spent in other schools and names of schools, \_\_\_\_\_

Character and disposition, Good

Recommended for what positions, suitability in order named: 1. Assistant Clerk

2. \_\_\_\_\_; 3. \_\_\_\_\_; 4. \_\_\_\_\_

Remarks: could assist in office work.

\_\_\_\_\_, Supt.

## PART 2

### REPORT BY RESERVATION SUPERINTENDENT

AGENCY, \_\_\_\_\_, 191

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.

