

TO WHOM IT MAY CONCERN:

This is to certify that

Nora Ground

has attended the

Tonawanda Reservation

School at

Akron New York.

N. Y., from

Spring term

1908

to

Fall term

1908.

That being as long as I
have taught in this school. I wish to say, she is a
bright ^{honest} girl and anxious to learn.

Akron

N. Y.

Maria M. Palmer.

Teacher.

Oct. 8.

1908.

BRIEF.

Application of

Mr. Young Charles

FOR THE ENROLLMENT OF

Nora Ground

IN THE INDIAN SCHOOL AT

Carlisle, Pennsylvania

POST OFFICE ADDRESS OF APPLICANT:

Akron, Erie Co., New York.

Date of enrollment, _____, 190

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

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 Nora Ground, (Name of child.) Female, I, young Charles, (Sex.) (Parent, guardian, or next of kin.) of Akron P. O., State of New York, do hereby voluntarily consent and agree to her enrollment in said school for a period of five years, and also obligate and bind myself to abide by all the rules and regulations for Indian schools. (Not less than 3.)

I further say that the said child was born at Tonawanda Reservation on Sept. 12, 1894 that the father, Alexander Ground is a full Indian of the Seneca (Name of father.) (Is or was.) (Degree.) Tribe located at _____ Agency; that he left the tribe about _____; (Approximate date.) that the mother, Abbie Hatch, was a full Indian of the Seneca (Name.) (Is or was.) (Degree.) Tribe located at _____ Agency, and left the tribe about _____; 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.
<u>Thomas Orphan</u> (<u>Govin's</u>)	<u>Versailles</u> <u>New York</u>	<u>date unknown</u> <u>to guardian</u>		<u>Sore</u> <u>eyes</u> <u>and</u> <u>mother's</u> <u>illness</u>	<u>3rd</u>

This eight day of October, 190 8
Two witnesses:

Danison Boudry
F. M. Hunt

young Charles
(Parent, guardian, or next of kin.)

P. O., Akron, New York

(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.)

AFFIDAVIT.

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

Young Charles
(Signature of applicant.) (Parent, guardian, or next of kin.)

Sworn to and subscribed before me this eight day of October, 190 8

Henry S. Steiner
Notary Public

(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 Physician.

I, Frank A. Helwig M.D., a practicing physician of Akron
N.Y., do hereby certify that I have carefully examined Nora Ground,
the child named in this application, and find that she 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 9 day of Oct, 1908 F. A. Helwig, M. D.

Vouchers of Disinterested Persons.

VOUCHER No. 1.

I, H. J. Suffer, a Supt of Indian Schools, of
(Business, calling, or profession.)
Jonawanda Reservation, do hereby certify that I am personally acquainted with
Young Charles who makes the foregoing application; that I believe his state-
ments therein are true; that I am acquainted with Nora Ground; that
(Name of Child.)
She is known and recognized in the community in which she lives as an Indian; that in my opinion
she can not receive proper and adequate schooling at home for the reason that I consider
her Capable of schooling that she cannot obtain
in the reservation Schools
This 9th day of Oct, 1908 H. J. Suffer

VOUCHER No. 2.

I, C. C. Parker, a Justice of the Peace of
(Business, calling, or profession.)
Akron N.Y., do hereby certify that I am personally acquainted with
Young Charles, who makes the foregoing application; that I believe his state-
ments therein are true; that I am acquainted with Nora Ground; that
(Name of child.)
She is known and recognized in the community in which she lives as an Indian; and that in my opinion
she cannot receive proper and adequate schooling at home for the reason that her Mother
is dead and she has no home
This 13th day of October, 1908 C. C. Parker

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 _____, 190_____

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.

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

THE SHAW-WALKER CO., MUKWAGON-CHICAGO 33877

Months in school before Carlisle, 12
Thos. Orphan
Versailles, N. Y. 3rd Gr.
Grade entered at Carlisle, 2nd Gr.
3
Grade at date of Discharge,
Trade or Industry,
Church, Metho dist
Miles to sch. 1/2

Like rest. good

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

113

NAME OF PUPIL Ground, Nora DATE 2/23 1909

AGE 14 YEARS { NEW RETURNED } STUDENT. TRIBE Seneca STATE N.Y.

DEGREE OF INDIAN BLOOD Full blood

INSPECTION Good development - somewhat flat chested.

PALPATION Normal

PERCUSSION Normal

AUSCULTATION { RESONANCE Normal
RESP. MURMUR Normal

HEART SOUNDS Normal. Accelerated but though nervousness

MENSURATION { INSP. 30 1/2
EXP. 28 RESPIRATION 24 PULSE 96 (nervous)
6 1/2 lb gain

TEMPERATURE 98.6 degs. HEIGHT 5 FT. IN. WEIGHT 93 1/2 LBS.

VISION 10/30 VACCINATION 7/21/08

MENSTRUATION

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER	<u>Yes</u>	<u>Hæmoptis</u>		
MOTHER			<u>Yes</u>	<u>Consumption</u>
BROTHERS {			<u>3</u>	<u>Consumption</u>
SISTERS {			<u>4</u>	<u>Consumption</u>

PERSONAL HISTORY:

Gives history of blood spitting - has cough at present

REMARKS:

attended mother's last illness. Had cough at that time & hæmoptis. Has had cough ever since. Hæmoptis less 1 or 2 occasions since she came here

(over)

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Ground, Nora DATE 12/18 1908

AGE 14 YEARS { NEW RETURNED } STUDENT. TRIBE Seneca STATE N.Y.

DEGREE OF INDIAN BLOOD Full blood

INSPECTION Fair development

PALPATION Normal

PERCUSSION Slight impairment of resonance over left apex.

AUSCULTATION { RESONANCE Voice sounds slightly increased in apex.
RESP. MURMUR

HEART SOUNDS

MENSURATION { INSP. 30 1/4
EXP. 27 RESPIRATION 24 PULSE 84

TEMPERATURE 98.6 degs. HEIGHT 5 FT. IN. WEIGHT 87 LBS.

VISION 10/30 VACCINATION 12/21/08

MENSTRUATION

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER	<u>yes</u>	<u>Haemoptysis</u>		
MOTHER			<u>yes</u>	<u>Consumption.</u>
BROTHERS {			<u>3</u>	<u>Consumption.</u>
SISTERS {			<u>4</u>	<u>Consumption.</u>

PERSONAL HISTORY:

Convalescent from measles. Attended mother's last illness. Had cough at that time + haemoptysis. Has had cough ever since + haemoptysis Dec 1st + on other occasions since she came here. Has cough and grayish yellow sputum.

Altre Reaction - good

(over)

113

Akron, N.Y.
July 3, 1918.

Dear Mr. Friedman:-

I shall now take the
greatest of pleasure in
writing a few lines to you
to let you know that I
am very well and I hope
that you are all the same
and also to let you know
that I am safe at home

and am now enjoying
myself with my sister
and also my other parents
and I hope that you are
just as happy as I am

I do not know
what else to say so
I shall now come to
close my letter with
my best regards

and I wish to hear
from you.

I am as ever your
friend.

Nova Ground

erie Co.

Akron.

N.Y.

REPORT OF Nora Ground pupil of Carlisle Indian
School, who went Apr. 10-12 to live with Mrs. R. K. Rawlings
(Date) (Patron)
of Port Deposit, Cecil Co.
(Post Office) (County)
Md., Port Deposit or Rising Sun
(State) Railroad Station

Conduct Excellent

Health Good

Ability Good

Cleanliness neat and clean

Economy

Situation of Room 2d floor - 1 window

Condition of Room Good

Condition of Clothing Good

Wages \$4 per mo.

Are careful accounts kept by patron? yes

Are careful accounts kept by pupil? No

Number of days at school

Distance to school 1 mile

Grade or quality of school Country School

Name and address of teacher

Qualifications of teacher

In what grade was pupil at Carlisle? Room 4 1/2

In what grade is pupil at present?

Attends what church and Sunday school? Presbyterian

Distance to church 2 1/2 miles. Family drive

Is there a Catholic church in locality? No - One in Rising Sun. 4 mi.

Who compose patron's family? Mrs. & Mrs. Rawlings - small boy & girls

What other help is employed? No other help

Locality of home Country - Farm

Home life and environments Very good; happy

Trade at school

Nature of work

Pupil's age 18 Experience First experience

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

Mrs. Rawlings home is a farm in the country and conditions and environments seem to be of a very happy and pleasant kind. In the winter the family is somewhat smaller. One daughter is principal of school in Rising Sun. The family is very much pleased with Nora's disposition. They would like her to remain with them for the winter. Nora liked her home but would rather come back to Carlisle. She had no definite reason for coming back to school. I deemed it advisable for Nora to remain through the winter with Mrs. Rawlings.

L.M.J.

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 R. H. Rawlings, Port Deposit Md

Pupil's name Nora Ground

General health of the pupil Good

Has pupil been ill the past two months? No. Had a cold

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 106

Has the pupil any trouble with the eyes? no

Are the eyelids inflamed? no

Remarks: _____

Date Nora Ground

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 Mrs. R. K. Rawlings, Port Deposit, Md.

Pupil's name Nora Brown.

General health of the pupil Generally good.

Has pupil been ill the past two months? No, with exception of cold.

Name of disease _____

Name and address of the physician in attendance _____

Does the pupil have a cough? Yes,

For how long has he had it? A week.

Give the pupil's weight 112 lbs

Has the pupil any trouble with the eyes? No.

Are the eyelids inflamed? _____

Remarks: The cough I think is from cold, as a number of children at school have colds.

Date Nov. 30, 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.

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. A. H. Rawlings - Post Deposit

Pupil's name Nora Ground

General health of the pupil Good

Has pupil been ill the past two months? suffers occasionally

Name of disease Neuralgie

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 110 lbs.

Has the pupil any trouble with the eyes? no

Are the eyelids inflamed? no

Remarks: Suffers with neuralgie
think from the teeth -
will see the dentist and
have them attended to
as advised by you.

Date Sept. 31, 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.

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. R. H. Rawlings, Port Deposit, Md.

Pupil's name Nora Ground

General health of the pupil Good

Has pupil been ill the past two months? A cold in Dec.

Name of disease cold

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 110

Has the pupil any trouble with the eyes? no

Are the eyelids inflamed? no

Remarks: _____

Date January 30, 1913

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

Port Deposit, Maryland, Jan 1 1913

Miss Nora Ground

To E. S. BOYLE, D. D. S., Dr.

This bill
not paid.
D.S.

1912

Oct	5	To 3 Amalgam Fillings	\$3 00	
"	8	" 2 " "	2 00	
"	8	" 2 Cement "	2 00	
"	12	" 3 " "	3 00	
"	25	" 1 Amalgam "	1 00	
"	25	" 2 Cement "	2 00	
"	30	" Vitalizing Nerve	1 00	
"	30	" Treating	1 00	
Nov	1	" " "	1 00	
"	6	" + Root Filling	1 00	
"	6	" 1 Amalgam "	1 00	
"	9	" 1 " "	1 00	
"	9	" Treating + Root Filling	1 00	\$20 00

June 24 1913
113

June 20th, 1913.

My Dear friend

I will drop you a few lines to you
to day. About Nora. I like

Mr. Alex Ground,

to have her to come home for
Akron, New York.

this school. Just to visit
My dear Sir:

if you please. And soon as the
school starts I will send

her back. I like to see her
to arrive at her home. I will advise that she can

now. well you please. leave here on Tuesday evening of next week. Trans-

this will be all right. portation to Akron will be procured for her use and

And she should arrive there on Wednesday morning, June the
25th.

I would thank you to notify me when she ar-
rives at home and to let me hear later in the summer
when her return to Carlisle is to be arranged for.

Alex Ground

Very truly yours,

H.M.

Superintendent.

Carbon copy to Mr. Young Charles.

June th 10 1913

My Dear friend.

I will drop you a few line. to you
to day. I bought Nora. I like
to have her. to come home. for
this school. Out. just to visit
if you please. and soon as the
school stert and I will send
her Back. I like to see her bad
now. well you please.

this will be all I Ask you
And write back soon
At Basom N. Y.

from your truly

Alex Ground.

Mr. Friedman

Please note
insufficient funds

W. H. M.

MAY 20 1913

Deposit M^d
Jan'y. 2nd 1913
Ness A Friedman
Curlyh P^r

Dear Sir:

I am enclosing bill for
services rendered Nora
Ground. Mrs. Robt. Rawlings
authorized same and re-
quested bill sent to you

Yours Truly
E. S. Boyle

1/25/13
1/25/13
1/25/13

Deposit Mtd

May 17 - 1913

cases A Friendman

Carlyle Pm

Dear Sir:

Some time ago I sent
a bill for services rendered
an Indian girl who was in
the employ of Robert Rawlings.
I have not received any re-
ply to same. Will you kind-
ly give the matter your at-
tention & oblige.

Yours Truly

E. S. Boyle

Am't of bill \$20⁰⁰

May 24, 1913.

E. S. Boyd,

Port Deposit, Md.

Dear Sir:

I have your bill of \$20.00 against Nora Ground, one of our Indian girls, for professional services and in reply will say that Nora does not have one-half that amount in bank here to pay the bill. We have no fund from which to draw to pay such bills so the pupils have to pay for such services. Nora is earning only \$4.00 a month and a bill such as the one you rendered seems exorbitant to charge one of such small earning capacity. If your bill were smaller you would stand a better chance of getting your pay sooner. Under the circumstances it will be impossible to pay this bill until the girl has earned the money.

Very respectfully,

LaF.

Superintendent.

3877

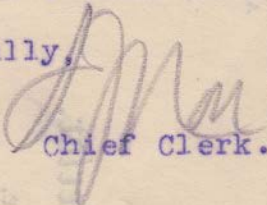
Mr. Friedman;

This bill is for dental work of Nora Ground, a pupil without money.

Mrs. LaFlesche advises that the ~~xxx~~ charges were excessive and hence the letter attached.

Shall the vouchers be prepared for the settlement from official funds to be transmitted for approval to Indian Office.

Respectfully,



Chief Clerk.

January 15, 1914.

Dr. E. S. Boyle,
Port Deposit, Md.

Dear Sir:

In reference to your letter of the first instant enclosing bill for services rendered Nora Ground, I have to advise that you furnish me an itemized statement covering the \$20.00 charged. This will be enumerated on the attached voucher, which please certify to as to the correctness of the same.

Very respectfully,

SJN:SR

Superintendent.

Port Deposit, Md., *Jan'y 1* 1914

Strat College

TO E. S. BOYLE, D. D. S., DR.

DUE WHEN RENDERED.

<i>Gr Rental Service to Work Ground</i>	<i>\$20</i>	<i>00</i>

Received Payment, _____

post M

Jan. 1st 1914

A President Supr.

Industrial College

Carlyle, Ill

Dear Sir:

I enclose bill for services rendered Work Ground while in the service of Mrs. Rawlings. You have taken exception to this bill. I desire to say the acct. is a just one and that Mrs. Rawlings was informed as to what the work would cost before it was done. Now sir I trust you will give this matter your attention and care in any further trouble in collecting same & oblige Yours truly E. A. Boyle

Post Report Mrs

May 26 - 1913

Mr. M. Friedman, Esq.
Carlisle Pa

3877

Dear Sir:

I have just received your letter and beg to state that there is nothing extravagant about my bill for services rendered Nora Brown. The work was arranged for by Mrs. Robt. Rawlings who had an understanding as to what the bill would be. Some of her teeth were in a very bad condition and required a great deal of treatment for which I made but a very nominal charge. If you will refer to the itemized statement which I sent you the first of the year and bear in mind the fact that the girl received first class service I think

you will realize the injustice
you have done me by accusing
me of being exorbitant in
my charges. That is if you
know the difference between
first class dentistry and the
cheap kind. Trusting this ex-
planation may enlighten you
upon the matter and cause
you to take a different view
of it I am

Very respectfully
E. S. Boyle

NAME Nora Ground Sex ☒ Male. ☐ Female.

Tribes { ☒ Full ☐ Seneca State New York Date Mar. 14, 1912

Age 16 years Respiration Normal Condition of, Eyes OK

Height 5 ft. 1 1/2 ins. Ears OK

Weight 110 lbs. Mensuration { Insp. 35 Exp. 31 Throat Enlarge Tons.

Temperature 98 7/5 Vaccination yes Cervical glands Slightly

Pulse 80 Vision OK Skin OK Enlarged

Inspection OK

Palpation OK

Percussion OK

Auscultation OK

Heart OK

(Menstruation) Normal

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	<u>yes</u>	<u>Good</u>		
Mother			<u>yes</u>	<u>unknown</u>
Brothers			<u>3</u>	<u>childhood</u>
Sisters			<u>3</u>	<u>Infancy.</u>

Personal history Measles

Present condition

H. B. Fraley, 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 _____

Age Sex $\begin{cases} \text{Male.} \\ \text{Female.} \end{cases}$ Tribe $\begin{cases} \text{Full} \\ \text{1/} \end{cases}$ Residence
(On, 19....)

3877

NAME.

TRIBE.

PARENT OR GUARDIAN.

DATE ENROLLED.

TERM.

AGE.

HOME ADDRESS

DATE OF RECORD

ACADEMIC DEPARTMENT.

INDUSTRIAL DEPARTMENT.

DORMITORY.

OUTING

SPECIAL REMARKS.

ROOM
NO.

Scholarship

Conduct.

Shop.

Ability.

Conduct.

Room
No.

Neatness

Conduct.

Ability.

Conduct

June '10

3

Good.

Good

Gen.

Gd

V.Gd

20

Good

V.Gd

July '10

3

Good

Good

D.R.

"

E

Fair

E

Jan. '11

4

Poor

Good

"

V.

"

E

V.G.

July '11

4 1/2

Poor

Good.

Dec. '11.

Gen.

G.

Ex.

V.G.

Ex.

OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

113

Name of Student

Nora Ground

Home Address

Young Charles, Aberson, N.Y.

Tribe

Seneca

Age at Entrance

14

Date of Entrance

11-6-'08

Shop

JAN.

FEB.

MAR.

APR.

MAY

JUNE

JULY

AUG.

SEPT.

OCT.

NOV.

DEC.

TOTAL OR AVERAGE

7

8

9

10

11

12

1

2

3

4

5

6

Patron

R. K. Pawlings

Locality

Days in School

Address

Port Deposit, Md.

R. R. Station

Conduct

Recommended by

Grade in School

Ability

Grade of Home

Church

Health

Date of Outing

4-10-'12

Date Returned

4-9-'13

Wages

Earnings

4.

8 19 15 20 15
4. 4. 8 4 4 4 4 2.8
4. " 4 4 4 4 4 "
4. " 4 4 4 4 4 "
4. 4. 4.

3877

Nora Ground

PRESENT NAME