Months in school before Carlisle. Grade entered at Carlisle, Grade at date of Discharge, Trade or Industry, miles to s

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No. 3940 James Brac	NAME.	numk	Schead	Age.	· CP	TRIBE.	20	DEGREE OF INDIAN BLOOD.	NAME OF AG VATION, IF E POST OF	NROLLED; I	F NOT,
DATE ENTERED.	Mouths in school before enroll- ment here.	IN WHA	At date of this report.		ce est c	(Tempora	crity abs	sent, outing,	farks. , deserters, or r enrollment, e		
	36			Im		To COUNTI	RY	20 E	COUNTRY	DATE DISC	HARGED
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Class or grade		anding	*								
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Vocal Orchestra.								}			
Orchestra.	St	anding.									
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	tion)					
Physical condi	tion					<u> </u>					

Name of Student Bradley Mumblehead Home Address Ino. M. Head, almost ribe Cherokee Age at Entrance 9 Date of 844 -08 Shop 7AN. EEB. MAR. APR. MAY JUNE JUNY AUG. SERT. COT. NOW. DEC. Patron M. Throng Address Hardley, Ta.
Recommended by 9 9 Conduct Ability Church Health Date of Uning 4-28 1/ Date Returned 9-1-11 Wages Earnings 18. 18. 5.7. Dudbridge Furlang Ca 9-8-11 31-4-11 12.6018. a. Van Lunance 15 15 20 20 4 4 9, 9, 9, 4, 4 Drylestown, a. 4 yel, 9 8 9. y 4, 4, q. y, y. 8-30-13 18. 18. 18 6-14-12

OUTING RECORD - C												1	67	9
Name of Student Bradley Mumblehead Ho	me Address	low-	me	mb	leh	26	alm	ron	S, n.	C, TI	ibe C	her	oke	-
Age at Entrance 19 Date of Entrance Mar - 4-1918 Shop				_	_	-						NOV.		
Patron Locality Locality	Days in School													
Patron E. H. Louett Address R. R. Station Morrisville Pa. Marisville Pa. Recommended by Grade in School	Conduct							Gd	Gel					
Recommended by Grade in 7 School	Ability							Il.	Id					
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679 5-192 a.

BRIEF.

APPLICATION OF
John Brumblehead,
James James James
la liste. Penn
NAME OF AGENCY FROM WHICH PUPIL CAME: INDIAN SCHOOL GHEROKEE, N. G.
Date of enrollment, March 4, 1908
Term of enrollment, Five (5) years.
NAME OF COLLECTING AGENT: Sent Sines.
Position,
6—870

APPLICATION FOR ENROLLMENT IN A NONRESERVATION SCHOOL.

(For a child enrolled at an Agency.)

For and in consideration	of the Gove	ernment of the	United	States assum	ing the ca	re, education,
and maintenance in the Unit	ed States Inc	lian School at	Ca	erlisle	s, Pe	mu
0 0						190
of James Mum	blehead	e; Me		date of birth	march	15,188
Eastern Charoke	e	(60.3	e./i			799
(Tribe.)						
NAME OF FATHER. (Both Indian and English.)	LIVING OR DEAD,	TRIBE.		BAND		DEGREE OF INDIAN BLOOD:
John		-0 /	,	0 -		
Mumblehead	2.	Cheroke	u	Cash	ern	
NAME OF MOTHER.	10.					
	rund					
110	000					0.
I, John XIII.	next of kin.)	do here	by volur	ntarily consen	t and agre	e to his
enrollment in said school for	a period of	five	_ years,	and also obli	gate myse	lf to abide by
all the rules and regulations	for Indian so	Not less than 3.)				
The said child has been e	nrolled in th	e following sc	hools:			
NAME OF SCHOOL.	DATE OF ENROLLMENT,	DATE OF DISCHARGE.		CAUSE.	6	GRADE.
1. Eastern Cherolin	. 5	Tran	rle	mel.		
2.			1	, ,		A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
3.						
o.				***************************************		
4.			******			
		17		7		
		Holiz	Pare	nt, guardian, or next	of kin.)	ed_
	1	P. O. address:	0000000000	alm	ond	
Two witnesses:					No	,
gell armead	ch		Weke.	****************		6—870
Jeff arneas	,					
Dar wharnew	h					

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 4th day of Dec. 1907
Cussel D. Stock
Russeel S. Stolk Physician at Cherokeen Gency.
OSPITIONE OF ACENT OF POWER CUREDINTENDENT
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 home (Parent, guardian, or next of kin.)
was voluntary, and I recommend the transfer of the said child
This 4th day of Alea, 1907
Demot Stand
Agent or Superintendent.
CERTIFICATE OF SCHOOL PHYSICIAN.
I hereby certify that on, I made a careful exami-
(As soon after arrival as possible.) nation of the physical condition of, the child named in
the foregoing application, and found to be
I therefore recommend that the said child be enrolled in this school.

SPECIAL NOTE.

School Physician.

...., 190

This _____ day of __

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.

6–870

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.

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

NAME Drad	ley ma	unblehead		Say Male.
Tribe (Fall)	Theroke	e State N	· C	Sex \ Females
	~		C	ondition of, Eyes 02
Age 2 (37	as. Insp. 3	2	Ears OC
Weight 12	9 1	ms. Mensuration $\{Exp. 3\}$		Throat OK
Weight 12 Temperature	98	Vaccination 445	Annual	Cervical glands
Pulse	76	Vision		Skin
Inspection				
i aipation	0 4			
Percussion	0 16			
Auscultation O	IC			
Heart O K	C	<u> </u>		
(Menstruation)		2		
		FAMILY HISTOR	γ.	
	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	450	wee		
Mother	1		Gre	Pheumateine
Brothers	7	•	2	Dry phoid ?

Sisters			3	7
Personal history	Leuis	au bui mearles.		
Personal history	decies	aet bui mearles.		
Personal history	Q4	au bui meanles.		

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.

CAS	FD	FCC	nge	55	354
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			Name					
44	Sex	Male. Female.	Tribe	{Full	·	Residence	 	

Age (On, 19....)

DATE.				SYMPTOMS.	TREATMENT.	DIAGNOSIS.	REMARKS.
19	T.	P.	R.				History, progress, and termination of the disease.
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*****			******				***************************************
		TARGET					

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL	numb	lehear!	Trad	Ceogre nov. 1 1909
AGE YEARS	NEW ST	UDENT. TRIBE	heraxe	e STATE M. C.
DEGREE OF INDIAN	BLOOD Te	ell		
Inspection	air d	enelope	mb	CSTATE NOV. 1 19 09
PALPATION 7	Conn	e frem	ilis	
***************************************	m		l_	
Auscultation R	ESP, MURMUR	home	e_	
HEART SOUNDS	Z-7.0			
MENSURATION { E	ISP. 3/12 XP. 35/2	RESPIRATION	, 3 e	PULSE 92 N. WEIGHT 29 LBS. 2 car 19 a 4 Cause of death.
TEMPERATURE	9.9 degs	HEIGHT 5	FT 5 / 4 D	N. WEIGHT 129 LBS.
VISION/ FAMILY HISTORY:	9	VACCINATIO	NOON	2 car 190 st
	Living.	Condition of Hea	alth. Dead.	Cause of death.
FATHER	yes.	Hasconsu	uption	
Mother	0	0	yes.	
BROTHERS	2	Good		Cause of death.
(3	2''?
SISTERS			1	Flener?
PERSONAL HISTORY	": megsle	es 10 ye	0 000	
			70,	
REMARKS: Just	return	ed from c	ountr	, with history
grathe	profuu	blood A	petti	g. Spir linte Has dry Last Gross (over)
blood on	and of	all su	alet wi	last 6 mos (over)
con host wa	00 2001 11	2,0,000	1	

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUP	1L 7	Mumb	Chead Bra	dle	1 DATE May 29 19 10
AGE 9/ YEARS	R	NEW ST	TRIBE CH	herok	J. DATE May 25 19 10 STATE M. Caroline
DEGREE OF INDI	AN BL	00D fr	ill		
Inspection	Gr	oval	develop	m	uf.
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PALPATION	no	ma	1		
			al		,,,,,,,,,,
	RESO	NANCE P	romal		
Auscultation -	Prop	MUDAUD 2	normal		
			val.		
HEART SOUNDS.	INCD	35	.,,		
MENSURATION -	Evn	99	RESPIRATION	4 9	PULSE /8
TEMPERATURE	9	€ 2 dec	s HEIGHT 5 FT	3° 10	WEIGHT /33 LBS.
	10		VACCINATION		
VISION	10		Vaccination	Yv.	
VISION	10	Living.	Condition of Health.	So Dead.	Cause of death.
VISIONFAMILY HISTORY	10	Living.	Condition of Health.	So Dead.	Cause of death.
VISIONFAMILY HISTORY	10	Living.	Condition of Health.	So Dead.	Cause of death.
VISIONFAMILY HISTORY FATHER MOTHER BROTHERS	70	Living. Yes	Condition of Health. Port	Dead. yes.	Cause of death.
VISIONFAMILY HISTORY FATHER MOTHER BROTHERS	70	Living. Yes	Condition of Health. Port	Dead. yes.	Cause of death.
VISIONFAMILY HISTORY FATHER MOTHER BROTHERS	70	Living. Yes	Condition of Health.	Dead. yes.	Cause of death.
VISIONFAMILY HISTORY FATHER MOTHER BROTHERS	70	Living. Yes	Condition of Health. Port	Dead. yes.	Cause of death.
VISION FAMILY HISTORY FATHER MOTHER BROTHERS SISTERS	70	Living. Yes	Condition of Health. Port	Dead. yes.	Cause of death.
VISION FAMILY HISTORY FATHER MOTHER BROTHERS SISTERS PERSONAL HIST	70	Living. Yes	Condition of Health. Port	Dead. yes.	Cause of death.
VISION FAMILY HISTORY FATHER MOTHER BROTHERS SISTERS	70	Living. Yes	Condition of Health. Port	Dead. yes.	Cause of death.

(over)

IOSPITAL RECORD	
	······································
	ON FOR OUTING:
EXAMINATIO	ON FOR OUTING: Condition:
EXAMINATIO	Condition:
EXAMINATIO	ON FOR OUTING: Condition:
EXAMINATIO	Condition:
EXAMINATIO	Condition:
EXAMINATIO	Condition:
DATES: Capail 26, 1911,	Condition:
DATES: Capail 20, 1911,	Condition:
DATES: Capail 20, 1911,	Condition:
DATES: Capail 20, 1911,	Condition:
DATES: Capril 20, 1911,	CONDITION:
DATES: Capril 26, 1911,	CONDITION:
DATES: Capril 26, 1911,	CONDITION:

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10

Sept. 19th, 1915.

Vintra to

Mr. J. Bradley Mumblehead,

Almond, North Carolina.

My doar Friend:

of recent date, and in compliance with the request conteined therein I enclose herewith a check for the amount to your credit in our school bank. I would suggest that you save what is required to pay for your transportation to Carlisle, because then you will be sure of your transportation whenever you are ready.

ours a number of students to return with you. The blanks I enclose should be filled out by the parents of each boy and girl when you have interested and then the application must be submitted to Superintendent Henderson for his approval. Such other assistance as is then required will be given you, and I will be requested to place transportation for your use and those who come with you.

Hoping that your brother Poger will be ready to

-2- J. Bradley Mushlehead.

come back with you. I am.

Very truly yours,

HICH.

Superintendent.

Copy to Superintendent Henderson.

M. Friedman, 19,1913. Indian Defool, Carlisle, Pa, Hear die Jow I will drok you a few lines first to let you know that I came home alright. But I sorry 9. say that I find my flick wasn't well. I am week mie down there. But 9 an To get back there about first of The month if I came I am I glad to Say there Some fors and guils wanted to go

Carliste with me. Do 9 Thank I could get ten student. 9 wante about tens application flanks, at once so I could be ready by frist of next month IM Friedman 9 want rest of my money what I had in the fank at Carlisle. I need it just now because my father I want to help him out what 9 can before I go fack to School again. I only gat 18 56. 70 dollars up There in fante, now, I will try to get all the Student 9 can for yo I tell you with its fretty lone Some down here far me

Hope to hear from your doon. 9. Bradley Munthhead. Worth Carolina, Swain County for your use, together with the copies of the ATER that

Mr. J. Bradley Musblokest, The 100 hare poon and That

Almond, Worth Carolina.

My dear Friend: For Seal Forms

I have received your letter of October the 2nd, advising that a number of the young people at your home have decided to come to Carliale with you and that you will see Superintersent Homerson about the applications for transfer this week. I am pleased to know that your efforts to interest students have been successful, and if their applications are approved Mr. Henderson can arrange to secure transportation for you as an escort to the party.

Answering the inquiry contained in your letter I will advise that your own application may be filled out for a one year period of envolment. If transportation is not secured for you as escort you will have to pay for the same from your own funds. It is for this reason that a one year envolment can be arranged.

I enclose herewith a number of application blanks

-2- Mr. J. Bradley Mumblehead.

for your use, together with the copies of the AFRON that have been issued this school year.

Hoping that we shall see you here soon and that your brother Roger will return to school with you. I am,

Very truly yours,

Encls.

HICH.

Superintendent.

Copy to Superintendent Henderson.

almond It, 8, Oct. 2, 1913, Mr. Friedman, Indian School Hear Sir: Carlisle . P.a. How 9 mile diok y an a few hing Jenaw that I am well and also getting long fine down There your how. But it fretty

Conesone for me. Well My Friedman 9 want to know if How many years D. Stayed There at School of 9 Come up agail. Decause you Ipnous that I Levas up there five years. Thy Some of The fores first would 2. go for three years if They Spay they on wany Shelle. Deshat do you think about it, I golf want to go.

I am going up to Cherokee Hididy I dol I see afout it next week, But I would like to pros Thous long I havet to Staying up There. I wishe yo frould sort me The Darliste arrow. Hoping to hear from From your Struend 9B Minublihead, almond Horain County.

TRADE RECORD, CARLISLE.

PUPIL Bradly sumblinead
TRADE Carriage wood worker

ABILITY Food

CONDUCT

REMARKS

INSTRUCTOR

martin

Lace

TRADE RECORD, CARLISLE. REMARKS INSTRUCTOR

November 10, 1916.

Mr. Bradley Mumblehead, Cherckee, N. C. Through Sup't. James E. Henderson.

Dear Sir:

I am enclosing herewith a check for the amount of \$76.89 which is to balance your account on the books of this school. I shall appreciate it if you will immediately have this check cashed, in order to relieve us of any extra work in connection therewith.

I am enclosing herewith a franked envelope for reply which requires no postage, and will thank you to give this matter your early attention.

Yours very truly,

CVP-RFH

Superintendent.

'Y AND E' ROCH.

REPORT AFTER LEAVING CARLISLE

563757 3**M-2-11**

NAME AT CARLISLE J. Bradley Mumble Read

PRESENT NAME					
DATE	INFORMATION THROUGH	ADDRESS	OCCUPATION	ITEMS OF INTEREST	GRADE
	+				
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		2			