

5741 or 3893

Martin, Jas.

Mother's file

4922

Regarding condition - Lewis W. Page

5159

Father's file - Joe Squirrel

4922

3893

CARLISLE INDIAN INDUSTRIAL SCHOOL
DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

NUMBER 7378 6178	ENGLISH NAME James Martin	AGENCY White Earth	NATION Chippewa
BAND Mille Lac	INDIAN NAME Ne da wa al	HOME ADDRESS White Earth, Minn.	
PARENTS LIVING OR DEAD FATHER, <input checked="" type="checkbox"/> MOTHER, <input checked="" type="checkbox"/>	BLOOD I ⁵ / ₆	AGE 20	HEIGHT 5'7 ¹ / ₂ "
		WEIGHT 129 ³ / ₄	FORCED INSP. 36
			FORCED EPXR. 34 ¹ / ₂
			SEX. M.
ARRIVED AT SCHOOL Sept. 30, 1910	FOR WHAT PERIOD Five years	DATE DISCHARGED Oct. 2, 1913	CAUSE OF DISCHARGE Termination of leave.
TO COUNTRY	PATRONS NAME AND ADDRESS		FROM COUNTRY
4-6-11	A. E. Slack, Taylorsville, Pa.		6-6-11
6-16-13	On leave		

THE SHAW-WALKER CO., MUSKOGEE, 79104

... in school before Carlisle. 9

... entered at Carlisle, Normal

... grade at d. of Discharge,

... trade or Industry,

... church. Episcopal

... Miles to school - 1/2

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Martin James DATE 10/3 1910

AGE 19 YEARS { NEW / RETURNED } STUDENT. TRIBE Chippewa STATE Minnesota

DEGREE OF INDIAN BLOOD full

INSPECTION Well developed.

PALPATION Normal

PERCUSSION Normal

AUSCULTATION { RESONANCE Normal
RESP. MURMUR Normal

HEART SOUNDS Normal

MENSURATION { INSP. 36
EXP. 34 1/2 RESPIRATION 20 PULSE 68

TEMPERATURE 98.6 degs. HEIGHT 5 FT 7 3/4 IN. WEIGHT 129 1/2 LBS.

VISION 10 VACCINATION Good scar

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER	<u>Yes</u>	<u>Good</u>		
MOTHER	<u>Yes</u>	<u>Good</u>		
BROTHERS {	<u>2</u>	<u>Good</u>		
SISTERS {	<u>2</u>	<u>Good</u>		

PERSONAL HISTORY: General health good

REMARKS: 137 1/2 3/2/11

HOSPITAL RECORD

EXAMINATION FOR OUTING:

DATES:

Mar. 14-1911

CONDITION:

OK

NAME Jessie Martin Sex Female ^{Male.}

Tribe Chipp State minn ^{Full} ₁₁ Sept. 24th, 1910

Age 19 years Respiration normal Condition of, Eyes Good

Height 5 ft. 7 ins. Mensuration { Insp. 33 1/2 Ears Good

Weight 125 lbs. { Exp. 31 Throat Normal

Temperature Normal Vaccination yes Cervical glands "

Pulse " Vision Good Skin "

Inspection "

Palpation "

Percussion "

Auscultation "

Heart "

(Menstruation) "

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	<u>L</u>	<u>Good</u>		
Mother	<u>L</u>	<u>"</u>		
Brothers <u>2</u>	<u>living</u>	<u>"</u>		
Sisters <u>3</u>	<u>2 living</u>	<u>"</u>	<u>1 dead at 22 - Don't know</u>	

Personal history Negative

Present condition good

P. A. Hattery, 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.

870

5-192 a.

BRIEF.

APPLICATION OF

FOR THE ENROLLMENT OF

James Martin

IN THE INDIAN SCHOOL AT

NAME OF AGENCY FROM WHICH PUPIL CAME:

Date of enrollment, _____, 190

Term of enrollment, _____ (_____) years.

NAME OF COLLECTING AGENT:

Position, _____

20

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, Pa

of James Martin ; M ; date of birth 1890 ;
(Name of child.) (Sex.)
Chippewa
(Tribe.)

NAME OF FATHER. <small>(Both Indian and English.)</small>	LIVING OR DEAD.	TRIBE.	BAND.	DEGREE OF INDIAN BLOOD.
<u>Udgedum</u>	<u>Living</u>	<u>Chippewa</u>	<u>Mill Lac</u>	<u>7/8</u>
<u>Wah wahush Ka Sence</u>	<u>"</u>	<u>"</u>	<u>" "</u>	<u>full</u>

I, James Martin, do hereby voluntarily consent and agree to my
(Parent, guardian, or next of kin.)
 enrollment in said school for a period of Five 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>1. White Earth D.S.</u>	<u>1909</u>	<u>1910</u>	<u>Enter Day School</u>	<u>1</u>
<u>2. Elbow Lake D.S.</u>	<u>1910</u>			<u>1</u>
<u>3.</u>				
<u>4.</u>				

James Martin
(Parent, guardian, or next of kin.)

P. O. address: White Earth

Two witnesses:

Mmm

PHYSICIAN'S CERTIFICATE.

I hereby certify that I have this day carefully examined the above-named child herein proposed for transfer and find _____ 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, 1900

P.A. Hartney M.D.

Physician at White Earth 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 _____ was voluntary, and I recommend the transfer of the said child.

(Parent, guardian, or next of kin.)

This 24 day of Sept, 1900

John R. Howard

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 _____, 1900

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.)

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.

REPORT OF James Martin pupil of Carlisle Indian
 School, who went 4/6, 1911 to live with Albert E. Slack,
(Date) (Patron)
 of Taylorville, Bucks,
(Post Office) (County)
Pa, Newtown Railroad Station
(State)

Conduct Good, Slow
 Health Good
 Ability Fair
 Cleanliness Fair
 Economy Good
 Situation of Room Upper floor
 Condition of Room Good
 Condition of Clothing Good
 Wages \$10.00 per month with advancement
 Are careful accounts kept by patron? yes
 Are careful accounts kept by pupil? no
 Number of days at school
 Distance to school
 Grade or quality of school
 Name and address of teacher
 Qualifications of teacher
 In what grade was pupil at Carlisle? 1st
 In what grade is pupil at present? 1st
 Attends what church and Sunday school? Presbyterian
 Distance to church 1/2 mile
 Is there a Catholic church in locality?

Who compose patron's family? 3 children
 What other help is employed? One Indian boy
 Locality of home Near Wood Hill
 Home life and environments Good
 Trade at school Shoemaker
 Nature of work General farm
 Pupil's age 19 Experience 1 year

Grade of home no 2

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

James did not give any degree of satisfaction. He seemed to lack in energy and that of course did not suit a hard working man such as Mr. Slack.

James may do well at some other home. From his opinion, I don't think James is well.

Dec. 8th, 1911

D. H. Dickey
Agent

NAME <i>James Martin</i>		TRIBE. <i>Chippewa</i>	PARENT OR GUARDIAN.	
DATE ENROLLED. <i>Sept. 30, 1910</i>		TERM. <i>Five years</i>	AGE. <i>20</i>	HOME ADDRESS <i>White Earth, Minn.</i>

DATE OF RECORD	ACADEMIC DEPARTMENT.			INDUSTRIAL DEPARTMENT.			DORMITORY.			OUTING		SPECIAL REMARKS.
	ROOM NO.	Scholarship	Conduct.	Shop.	Ability.	Conduct.	Room No.	Neatness	Conduct.	Ability.	Conduct	
<i>Jan. 11</i>	<i>1</i>	<i>v.g.</i>	<i>Ed</i>	<i>shop</i>	<i>v.g.</i>	<i>v.g.</i>		<i>9</i>	<i>v.g.</i>			
<i>July 11</i>	<i>1</i>	<i>Fair</i>	<i>Good</i>									
<i>Dec. 11</i>								<i>7</i>	<i>9</i>			

OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

870

Name of Student *James Martin* Home Address *White Earth, Minn. Tribe* *Chippewa*

Age at Entrance *20* Date of Entrance *9-30-'10* Shop *July* *Aug* *Sept* *Oct* *Nov* *Dec* *Jan* *Feb* *Mar* *Apr* *May* *June* *July* *Aug* *Sept* *Oct* *Nov* *Dec* TOTAL OR AVERAGE

Patron *A. E. Slack* Locality Days in School

Address *Taylorville, Pa.* R. R. Station Conduct *4 4*

Recommended by Grade in School Ability *7 4*

Grade of Home Church Health *4 4*

Date of Outing *4-6-'11* Date Returned *6-5-'11* Wages Earnings *8.005.*