

CARLISLE INDIAN INDUSTRIAL SCHOOL

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

3900

NUMBER 4930	ENGLISH NAME Esley Oden	AGENCY	NATION Chippewa
BAND	INDIAN NAME	HOME ADDRESS Mrs Emma Sandvick 234 Commercial St. St Paul, Minn	
PARENTS LIVING OR DEAD	BLOOD 1/4	AGE 16	HEIGHT 5-8
FATHER, P.	MOTHER, L.	WEIGHT 128 1/4	FORCED INSP. 34 1/2
ARRIVED AT SCHOOL Jan. 18, '13.	FOR WHAT PERIOD Three years	DATE DISCHARGED 2-22-13	CAUSE OF DISCHARGE Deserted
TO COUNTRY 1-22-13	PATRONS NAME AND ADDRESS Ran	FROM COUNTRY	

THE SHAW-WALKER CO., MINNEAPOLIS 125071

Months in school

70

Grade entered at C. I. S.

Grade at date of Discharge,

Trade or Industry,

Church, Catholic

Miles to school 1 1/4

See Office letter of Jan. 3, 1913.

Ed. Subls.

130,001-1912

A. G. Z.

826

BRIEF.

Myrtle Evans Peake

Application of

Myrtle Evans Peake

FOR THE ENROLLMENT OF

Esley Owen.

IN THE INDIAN SCHOOL AT

Carlisle, Pennsylvania

NAME OF AGENCY FROM WHICH PUPIL CAME:

Wabasha Minnesota which
was abandoned & Indians paid
off 37 years ago

Date of enrollment

191

Term of enrollment

three

(3)

years

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 Esley Odew ; (Name of Child) ; date of birth March 29th 1892 (Sex)

Winnebago
(Tribe)

NAME OF FATHER
(Both Indian and English)

Living or
Dead

TRIBE

BAND

DEGREE OF
INDIAN BLOOD

Donald Odew

Dead

Carlisle

NAME OF MOTHER

Living

Winnebago

one half - 1/2

I, _____, do hereby voluntarily consent and agree to his

enrollment in said school for a period of three 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>St Mary Convent School</u>				<u>eight grade</u>
2. <u>St Paul</u>				<u>minors</u>
3.				
4.				

Mrs Emma Gondroche
(Parent, guardian, or next of kin)

P. O. address: 234 Commercial St

St Paul, Minn

Two Witnesses:

Anthony P. Gondroche
Myrtle E. Peake

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 9th day of Nov, 1912

M M Ghent M.D.

Physician at _____ Agency.

CERTIFICATE OF AGENT OR SUPERINTENDENT.

Indians at this agency were
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 _____
(Parent, guardian, or next of kin.)
was voluntary, and I recommend the transfer of said child.

This _____ day of _____, 19____

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.)

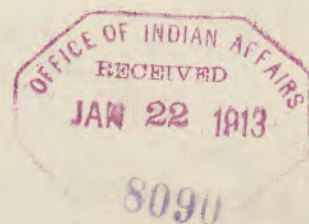
Provided, that hereafter no Indian child shall be taken from any school in any State or Territory to a school in any other State against its will or without the written consent of its parents. (29 Stats., p. 348.)

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.



BRIEF.

APPLICATION OF

John H. Pondroche

FOR THE ENROLLMENT OF

Esley Eden

IN THE INDIAN SCHOOL AT

Carlisle Penna.

POST OFFICE ADDRESS OF APPLICANT:

Date of enrollment, _____, 19

Term of enrollment, _____ (_____) years.

NAME OF COLLECTING AGENT:

Position, _____

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, Penna., of Esley Oden, Male, I, Mrs. E. Londroche of St Paul, Minn., do hereby voluntarily consent and agree to his enrollment in said school for a period of 3 to 5 years, and also obligate and bind myself to abide by all the rules and regulations for Indian schools.

I further say that the said child was born at Wabasha on Mar. 29th, 1896 that the father, Donald Oden, was 1/4 Indian of the Sac & Fox (Date.) (Name of father.) (Is or was.) (Degree.) Tribe located at _____ Agency; that he left the tribe about _____; that the mother, Genevieve Oden, is 1/4 Indian of the Winnebago (Name.) (Is or was.) (Degree.) (Approximate date.) 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>Commonwealth</u>	<u>Popestone</u>				
<u>St. Mary's</u>	<u>Somah</u>				
<u>attended</u>	<u>St Mary's High school</u>				

This 20th day of Dec., 1912

Two witnesses:

John H. Londroche

Mrs. E. Londroche

(Parent, guardian, or next of kin.)

John J. Doyle

P. O., St Paul Minn.

(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, Mrs. E. Londroche, do hereby swear that the statements made in the above application are true.

Mrs. E. Londroche

(Signature of applicant.)

(Parent, guardian, or next of kin.)

Sworn to and subscribed before me this 7th day of January, 1913

Adrianes

(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.)

6-871

My Commission Expires Nov. 15, 1914

CERTIFICATE OF PHYSICIAN.

I, M. M. Ghent, a practicing physician of St Paul, Minn, do hereby certify that I have carefully examined Esley Eden, the child named in this application, and find that he 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 20 day of Dec, 1912 M. M. Ghent, M. D.

VOUCHER OF SOLICITOR FOR SCHOOL.

I hereby certify that I was present and witnessed the execution of the foregoing application made by John H. Longroche, that its contents were explained or interpreted to he by John H. Longroche; that I believe he understood the purport thereof; that I was present at the medical examination of the child named herein; that he resides with Mrs E Longroche, in or near the town of St Paul;

that the child can not have adequate and proper educational facilities at home for the reason that

He is practically an orphan and had to quit school to make his living

Dated at St Paul this 20 day of Dec, 1912 John H. Longroche

(NOTE.—This voucher must be executed by the official representative of the nonreservation school to which application is made. Pupils and Indian solicitors will not be accepted.)

VOUCHERS OF DISINTERESTED PERSONS.

VOUCHER NO. 1.

✓ I, H. L. Lrye, a stone mason, of St Paul, do hereby certify that I am personally acquainted with John H. Longroche who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with Esley Eden;

he is known and recognized in the community in which he lives as an Indian; that in my opinion he can not receive proper and adequate schooling at home for the reason that

He is practically an orphan and had to quit school to make his living

This 20th day of Dec, 1912 H. L. Lrye

✓ I,

Geo. B. Loucks

a

Asst. Yard Master U. Depot.

(Business, calling, or profession.)

St. Paul

do hereby certify that I am personally acquainted with

J. H. Longrocks, who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with *Esley Eden*; that

(Name of child.)

he is known and recognized in the community in which he lives as an Indian; and that in my opinion he can not receive proper and adequate schooling at home for the reason that *his**Guardian has no way of giving him schooling*

This

day

Jan

19

13

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 _____, 19

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 special 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 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.

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.

3900

new entered Jan 18-1913

NAME

Osley Oden

Sex { Male.
Female.Tribe { Full
1/4

Chippewa

State

Minnesota

Jan 20, 1913

Age 16 years

Respiration

20

Condition of, Eyes

O.K.

Height 5 ft. 8 ins.

Mensuration

Insp. 34 1/2

Ears

O.K.

Weight 128 1/2 lbs.

Exp. 29

Throat

O.K.

Temperature 98

Vaccination

Cervical glands

O.K.

Pulse 72

Vision

Skin

O.K.

Inspection Fairly well developed

Palpation

O.K.

Percussion

O.K.

Auscultation

O.K.

Heart

O.K.

(Menstruation)

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father			yes	unknown
Mother	yes	good.		
Brothers	0		0	
Sisters	0		0	

Personal history

typhoid fever when 8 or 9 yrs old - pneumonia before ten years old - measles - tonsillitis - mumps.

Present condition

Good except for slight bronchitis

H B Trali, 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.

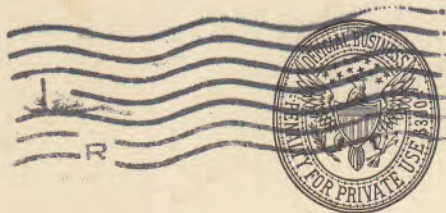
The reverse side is intended as a card-index case-record for use by all Service physicians.

Name _____

Age Sex { Male.
Female. } Tribe { Full
1/ } Residence

(On _____, 19____)

Department of the Interior



Mr. M. Friedman

Supt. U. S. Indian School

Carlisle

Pennsylvania

6-3305

Name

3900 Jan 19, 1914

(Please give name by which enrolled and also present or married name.)

Tribe

Chas. H. Osborn
Winnebago

Present Address

234 Commercial St.

Former Address

(Address from which we heard from you last.)

Present Occupation

Yard Clean. C. M. S. P.

Remarks:

Wished like to be
back at Carlisle again.

Esley Eden

PRESENT NAME