

3930

THE SHAW-WALKER CO., MUSKOGEE 79104

Trade or Industry, .....

Church, Episcopal

Miles to school

# PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL James Warren DATE 7/12 1910

AGE 14 YEARS { NEW STUDENT. TRIBE Chippewa STATE Minnesota  
RETURNED

DEGREE OF INDIAN BLOOD  $\frac{1}{4}$

INSPECTION Normal

PALPATION normal

PERCUSSION normal

AUSCULTATION { RESONANCE normal  
RESP, MURMUR normal

HEART SOUNDS

MENSURATION { INSP. 30 1/2  
EXP. 28 RESPIRATION PULSE

TEMPERATURE degs. HEIGHT 5 FT 1 IN. WEIGHT 101 LBS.

VISION 9/10 VACCINATION good scar

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER			yes	accident
MOTHER	yes	good		
BROTHERS {	no			
SISTERS {	1 yes	good		

PERSONAL HISTORY:

measles, Whooping  
Cough.

REMARKS:

HOSPITAL RECORD

No

EXAMINATION FOR OUTING:

DATES:

CONDITION:

7/27

1912

Outing

1008

5-192 a.

BRIEF.

APPLICATION OF

Mrs. Sadie Warren

FOR THE ENROLLMENT OF

James Warren

IN THE INDIAN SCHOOL AT

Carlisle, Pa.

NAME OF AGENCY FROM WHICH PUPIL CAME:

White Earth, Minn.

Date of enrollment, \_\_\_\_\_, 190

Term of enrollment, Five ( 5 ) years.

NAME OF COLLECTING AGENT:

Position, \_\_\_\_\_



## 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 Warren ; boy ; date of birth Aug. 9, 1896 ;  
(Name of child.) (Sex.)

Chippewa  
(Tribe.)

NAME OF FATHER. (Both Indian and English.)	LIVING OR DEAD.	TRIBE.	BAND.	DEGREE OF INDIAN BLOOD.
<u>Alfred Warren</u>	<u>D</u>	<u>Chippa</u>	<u>Miss</u>	<u>1/4</u>
NAME OF MOTHER.				
<u>Sadie Warren</u>	<u>L</u>	<u>"</u>	<u>"</u>	<u>1/4</u>

I, Mrs. Sadie Warren, do hereby voluntarily consent and agree to his  
(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.
1. <u>White Earth Gov.</u>				<u>7th</u>
2. <u>Morris</u> "				
3. <u>Huron Public, S. D.</u>		<u>1910</u>	<u>Learn English</u>	<u>7th</u>
4.				

Signed here Mrs. Sadie Warren  
(Parent, guardian, or next of kin.)

P. O. address: Huron

Two witnesses:

S. T. Root

### 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 August day of 8<sup>th</sup>, 1900

Opus W. Abbott 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 Sadu Wiley was voluntary, and I recommend the transfer of the said child.  
(Parent, guardian, or next of kin.)

This 8<sup>th</sup> day of Aug, 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.

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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.

1808

REPORT OF James Warren pupil of Carlisle Indian  
School, who went 5/1/1912 to live with Theo S. Snook  
(Date) (Patron)  
of Titusville  
(Post Office) (County)  
N. J. Trenton N. J. Railroad Station  
(State)

Conduct Excellent  
Health Good  
Ability Good  
Cleanliness Good  
Economy Very good  
Situation of Room Third floor  
Condition of Room Good  
Condition of Clothing Fair  
Wages \$12 per month  
Are careful accounts kept by patron? yes  
Are careful accounts kept by pupil? No  
Number of days at school Attended at Carlisle  
Distance to school \_\_\_\_\_  
Grade or quality of school \_\_\_\_\_  
Name and address of teacher \_\_\_\_\_  
Qualifications of teacher \_\_\_\_\_  
In what grade was pupil at Carlisle? 4th  
In what grade is pupil at present? 4th  
Attends what church and Sunday school? Episcopal  
Distance to church In same village  
Is there a Catholic church in locality? No  
Who compose patron's family? Man wife and child  
What other help is employed? None  
Locality of home In Titusville N. J.  
Home life and environments Good  
Trade at school None  
Nature of work Small farm  
Pupil's age 16 Experience Good



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

James gives excellent satisfaction in his country home. He wishes to return to Barbise in the fall.

July 31, 1913  
W. S. Dickey  
A. Agent

R

Oct. 22nd, 1913.

Mrs. D. O. Root,

Huron, South Dakota.

My dear Madam:

If you have not yet succeeded in enrolling your son, James Warren, at any other school for this year's work may we yet expect him to return to Carlisle for an additional period of enrollment?

James is at the age when he can make the best progress at his trade and I assure you that I would be pleased to have him return to Carlisle.

Hoping that I shall hear from you in regard to this matter, I remain,

Very respectfully,

HKM.

Superintendent.



Warren, James

3930

Mother - Mrs. D. W. Root

6525-

3930

NAME

James Warren

TRIBE

Chippewa

PARENT OR GUARDIAN.

DATE ENROLLED.

Sept. 8, 1910

TERM.

AGE.

14

HOME ADDRESS

Huron, S. Dak.

SPECIAL REMARKS.

DATE OF RECORD

ACADEMIC DEPARTMENT.

INDUSTRIAL DEPARTMENT.

DORMITORY.

OUTING

ROOM  
NO.

Scholarship

Conduct.

Shop.

Ability.

Conduct.

Room  
No.

Neatness

Conduct.

Ability.

Conduct

Jan. '11  
July '11  
Dec. '11

9

Ex.

Ex.

Orderly V.gd V.gd

V.gd V.gd  
V.g. g.





*D. O. Root*  
PHOTOGRAPHER.  
DEALER IN MUSICAL INSTRUMENTS  
AND ART GOODS.  
HURON, S.D.

648

Mr. Friedman. Supt.  
Carlisle. Pa.

Dear Sir.

James arrived Home safely. and is looking well.  
and states He enjoyed the trip Home.

Yours Truly,

*Mrs. D. O. Root,*



