

4117

BRIEF.

APPLICATION OF

Margaret Cadotte Bemsey

FOR THE ENROLLMENT OF

Cadotte
Julia Bemsey

IN THE INDIAN SCHOOL AT

Carlisle, Pa.

NAME OF AGENCY FROM WHICH PUPIL CAME:

.....

Date of enrollment,, 190

Term of enrollment, *Three* (*3*) 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 Julia Bemeseay ; F ; date of birth July 11, 1899 ;
(Name of child.) (Sex.)
Chippewa
(Tribe.)

NAME OF FATHER. (Both Indian and English.)	LIVING OR DEAD.	TRIBE.	BAND.	DEGREE OF INDIAN BLOOD.
<u>Joe Cadotte Bemeseay</u>	<u>Living</u>	<u>Chippewa</u>	<u>Badrivers</u>	<u>3/4</u>
<u>Margaret Cadotte Bemeseay</u>	<u>"</u>	<u>"</u>	<u>"</u>	<u>1/2</u>

I, Margaret Cadotte Bemeseay, do hereby voluntarily consent and agree to her
(Parent, guardian, or next of kin.)
 enrollment in said school for a period of three 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>La Pointe Public Holy Family School</u>	<u>1906</u>	<u>1907</u>	<u>Left to attend School Bayfield</u>	<u>Third</u>
<u>School Bayfield</u>	<u>1907</u>	<u>1910</u>	<u>moved back to Medicine Island</u>	<u>Sixth</u>
3.				
4.				

Joe Cadotte (Bemeseay) his
Margaret Cadotte (Bemeseay) his
(Parent, guardian, or next of kin.)

P. O. address: La Pointe

Two witnesses:

Paul E. Schwarz
H. J. Conlin

Medicine Island
Island County
Wis.

PHYSICIAN'S CERTIFICATE.

I hereby certify that I have this day carefully examined the above-named child herein proposed for transfer and find her 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 17 day of Jan, 1964

Henry Hamman

Physician at Red Cliff 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 Margaret Badotte Benseny was voluntary, and I recommend the transfer of the said child. (Parent, guardian, or next of kin.)

This 19th day of January, 1964

M. Dady

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 _____, 190

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.

CARLISLE INDIAN INDUSTRIAL SCHOOL

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

4119

NUMBER 2946	ENGLISH NAME <i>(Berensay)</i> Julia Cadotte	AGENCY	NATION Chippewa	
BAND	INDIAN NAME	HOME ADDRESS Father - Joe Cadotte (Berensay) La Pointe, Wis.		
PARENTS LIVING OR DEAD 2	BLOOD 1/2	AGE 14	HEIGHT 5-2 1/2	WEIGHT 112
FATHER	MOTHER	FORCED INSP. 34	FORCED EXPR. 31	SEX. F.
ARRIVED AT SCHOOL Jan. 26, 1914	FOR WHAT PERIOD Three years	DATE DISCHARGED Sept. 30, 1914	CAUSE OF DISCHARGE Termination of lease	
TO COUNTRY 6-30-14	PATRONS NAME AND ADDRESS On leave			FROM COUNTRY

THE SHAW-WALKER CO., MUSKOGEE 12107

Months in school before Carlisle 5 yrs.

Grade entered at Carlisle.

Grade at date of Discharge.

Trade or Industry.

Church. Catholic

NAME Julia Barnesay Sex ~~Male~~ Female.

Tribe ^{Full} 112 State Wis Jul 17, 1914

Age 14 years Respiration normal Condition of, Eyes normal

Height 5 ft. 2 ins. Mensuration { Insp. 35 Ears normal

Weight 105 lbs. { Exp. 32 Throat normal

Temperature 98.2 Vaccination nil Cervical glands normal

Pulse 80 Vision good Skin normal

Inspection normal

Palpation normal

Percussion normal

Auscultation normal

Heart normal

(Menstruation) regular

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>4</u>	<u>yes</u>	<u>good</u>		
Sisters <u>4</u>	<u>yes</u>	<u>good</u>		

Personal history no sickness

Present condition healthy

Henry Kamm, 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.

4119

CARLISLE INDIAN SCHOOL

No. <i>2946</i>	NAME. <i>Julia Cadotte</i>	AGE. <i>14</i>	TRIBE. <i>Chippewa</i>	DEGREE OF INDIAN BLOOD. <i>1/2</i>	NAME OF AGENCY AND RESERVATION, IF ENROLLED; IF NOT, POST OFFICE OF FAMILY. <i>Ls Pointe, Wis.</i>
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DATE ENTERED.	Months in school before enrollment here.	IN WHAT GRADE OR ROOM.		Distance to nearest public school from pupil's home.	REMARKS.		
		On entering here.	At date of this report.		(Temporarily absent, outing, deserters, on sick leave, special authorities for enrollment, etc.)		
<i>Jan 26, 14</i>	<i>45</i>		<i>10 1/2</i>	<i>-</i>	To COUNTRY	FROM COUNTRY	DATE DISCHARGED
<i>April 1914</i>			<i>20 1/2</i>		<i>6-30-14 = Leave</i>		<i>SEP 30 1914</i>

Catholic
~ 1639 ~

Progress from _____ to _____
(Date) (Date)

FIRST YEAR IN THIS SCHOOL	SEPT.	OCT.	NOV.	DEC.	JAN.	FEB.	MAR.	APR.
Class or grade.....								
Academic.....standing*								
Industrial.....standing* (Department)								
Musical: Band.....standing*								
Vocal.....standing*								
Orchestra.....standing*								
Department.....standing*								
Physical condition.....								

Remarks: _____

~~XXXXXXXXXXXX~~
~~XXXXXX~~

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March 26th, 1914.

Mrs. Joe Cadotte,
La Pointe, Wisconsin.

My dear Madam:

I have noted the request contained in your letter of March the 24th, to the effect that you desire to have your daughters Julia and Charlotte at home with you for the summer months. In reply thereto I must state that they have been enrolled here for so short a period that their return home at this time seems inadvisable. I will also state that the request for such special action in behalf of your daughters should be submitted to me thru the office of Superintendent Dady, so that his recommendation in the premises can be considered in connection with your request.

Very respectfully,

HKN.

Supervisor in Charge.

Copy to Superintendent Dady.

La Pointe, Wis.

Mar. 24, 1914.

Oscar H. Lippe,
Supervisor in charge,
Carlisle Pa.

Dear Sir:- I am writing
to you to ask if my
daughters Julia and
Charlotte Cadotte may
come home for vaca-
tion. I need them
very bad. They like
the school real well
and I know that
they will be glad to
return in September.

Yours truly
Mrs. Joe Cadotte.

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June 9th, 1914.

Mrs. Joseph Cadotte,
Bayfield, Wisconsin.

My dear Madam:

Having noted the request contained in your letter of June the 6th, this is to advise that your daughters Charlotte and Julia can be given permission to spend the summer months with you at your home if Superintendent Dady will approve your request and you can arrange to deposit with him or with me the amount that will be required to pay for their transportation home and back again to Carlisle.

Let me hear what else I can do to assist you in this matter.

Very truly yours,

HKN.

Supervisor in Charge.

Copy to Superintendent Dady.

20
Carlisle School.

Bayfield Wis June 6

Mr O H. Lipps

I dropes
you a line I wish
to have Charlotte to
come home this
summer and Mr
Dady told me to
write and ^{you} permit from you
write to Mr Dady
and he it will be
all right if Julia
likes to come let
her come writ to Mr
Dady so they can come
with the rest

hope to hire from
soon from.

Mrs Joseph
Bodotter

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February 28th, 1914.

Mr. J. B. Dady,
Supt. & Spl. Disb. Agent,
Red Cliff Indian Agency,
Bayfield, Wis.,

Dear Sir,

I have your favor of the 23rd, enclosing bills aggregating 36.77 and 5.95 against Charlotte and Julia Bemessay respectively, together with checks drawn in payment of the same for the girls signature. The girls have approved the bills and signed the checks which are enclosed herewith.

Very respectfully,

W. H. M.

Supervisor in charge.

DEPARTMENT OF THE INTERIOR
UNITED STATES INDIAN SERVICE

Red Cliff Indian Agency,
Bayfield, Wisconsin,

February 23, 1914.

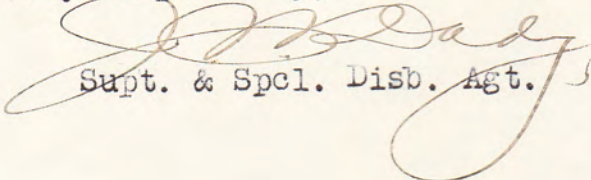
Mr. Moses Friedman,
Supt., Carlisle Indian School,
Carlisle, Pa.

Dear Sir:

Enclosed please find check for \$36.77, which please have Charlotte Bemesay sign and return for payment to Doyle & Rummel in order to settle the balance of her account for clothing purchased just before she left for Carlisle. Please have her write and acknowledge on the bill that she received the goods and return the acknowledged bill and the check in your reply.

I am also enclosing a check for \$5.95 for Julia Bemesay for clothing purchased just before she left for Carlisle. Please handle this check and the bills attached to it in the same manner as requested above for Charlotte Bemesay.

Very respectfully,


Supt. & Spcl. Disb. Agt.

S-D